OPERATOR, WELL		1991 Ave Prod.	1992 Ave Prod.
Santa Fe Energy Operating Partners	Longknife 35 Fed. No. 1	13 BOPD	9.0 BOPD
	Parkway "36" State No. 1	3.9 BOPD	4.7 BOPD
	" " No. 2	20.4 BOPD	12.6 BOPD
	" " No. 3	24.7 BOPD	20.6 BOPD
	" " No. 4	6.09 BOPD	6.25 BOPD
	" " No. 6	20.8 BOPD	13.8 BOPD
	" " No. 7	4.7 BOPD	3.0 BOPD
Strata Production Company	Halcon State No. 2	4.3 BOPD	2.3 BOPD
Siete Oil & Gas Company	Flathead State No. 1	11.6 BOPD	9.2 BOPD
	Osage Federal No. 1	80.2 BOPD	80.0 BOPD
	" " No. 2	79 BOPD	76 BOPD
	" " No. 3	63.4 BOPD	55.4 BOPD
	" " No. 4	35 BOPD	19.5 BOPD
	" " No. 5	10.6 BOPD	2.3 BOPD
	Renegade Federal No. 1	77 BOPD	67 BOPD
	" " No. 2	78 BOPD	76 BOPD
	" " No. 3	24.2 BOPD	17.7 BOPD
Meridian Oil Inc.	Apache "A" Federal No. 1	79 BOPD	72 BOPD
	" " No. 2	95 BOPD	73 BOPD
	" " No. 3	51.5 BOPD	53.3 BOPD
	" " No. 4	28.1 BOPD	44.0 BOPD
	Apache Federal No. 1	39.1 BOPD	88 BOPD
	" " No. 2	36.5 BOPD	92 BOPD

35 < BOPD

Is your RETURN ADDRESS completed on the reverse side?

PS Form 3811, December 1991

DOMESTIC RETURN RECEIPT

5. Signature (Addressee)

6. Signature (Agent)

AUBREY L OR BETTY JO DUNN SR
P O BOX 386
ALAMOGORDO NM 88310

3. Article Addressed to:

4a. Article Number
P 056 186 103

4b. Service Type
- ☐ Registered
- ☐ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☐ Return Receipt for Merchandise

7. Date of Delivery

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

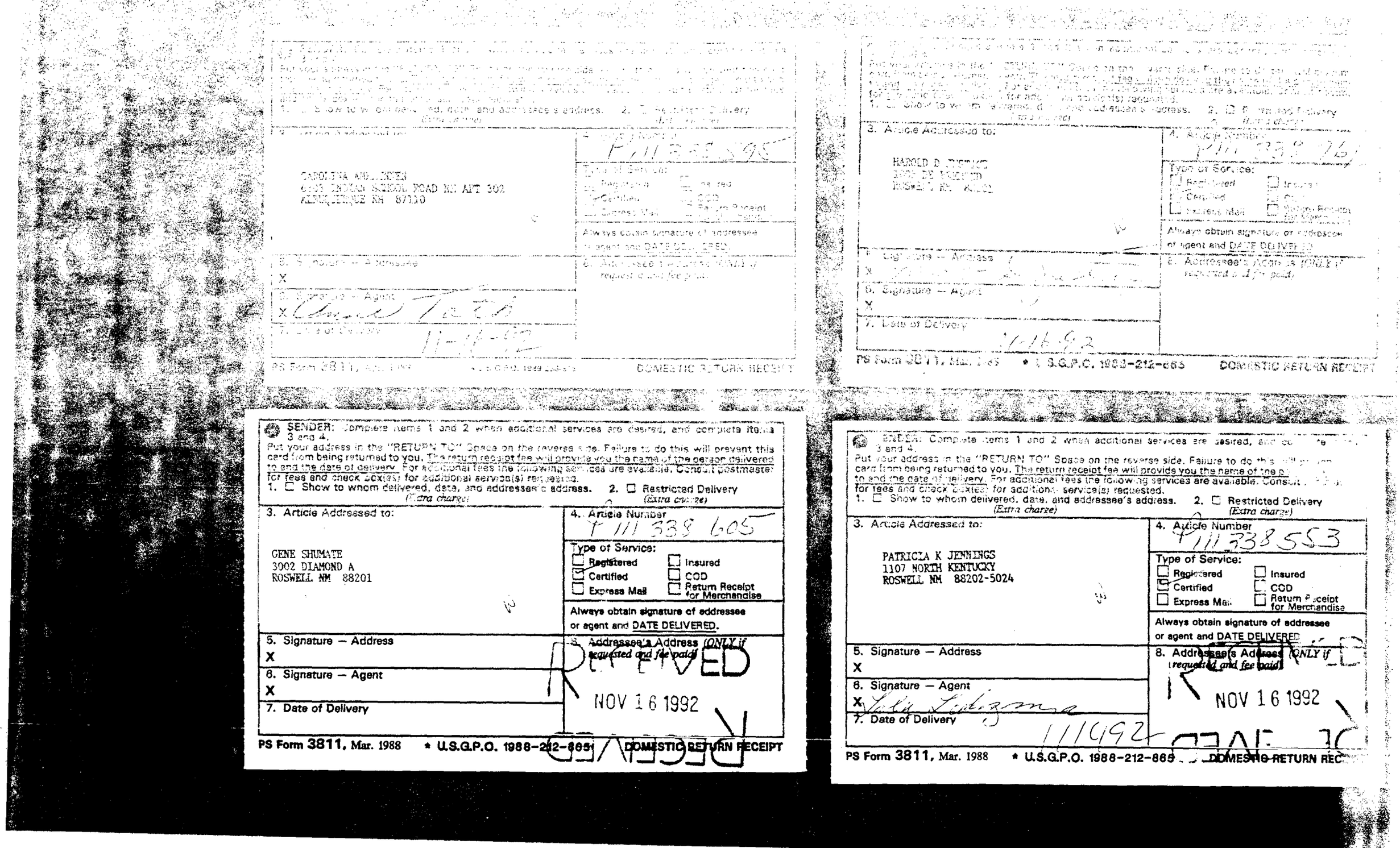
Consult postmaster for fee.

DOMESTIC RETURN RECEIPT

P 056 186 103

ATCA S DUNN
P O BOX 386
ALAMOGORDO NM 88310

88310-0386



CAROLYNA ANN JENSEN
6305 INDIAN SCHOOL ROAD NE APT 302
ALBUQUERQUE NM 87110

P 111 338 595

Always obtain signature of addressee or agent and DATE DELIVERED.

11-17-92

PS Form 3811, DOMESTIC RETURN RECEIPT

3. Article Addressed to:

HAROLD D PISTOLE
1305 DE KOVEN
ROSWELL NM 88201

4. Article Number
P 111 338 626

Type of Service:
Registered Insured
Certified COD
Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

6. Signature — Agent
X

7. Date of Delivery
11-16-92

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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:

GENE SHUMATE
3002 DIAMOND A
ROSWELL NM 88201

4. Article Number
P 111 338 605

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

RECEIVED
NOV 16 1992

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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:

PATRICIA K JENNINGS
1107 NORTH KENTUCKY
ROSWELL NM 88202-5024

4. Article Number
P 111 338 553

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X Sally Lobozzo

7. Date of Delivery
11/16/92

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

RECEIVED
NOV 16 1992

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN REC

SERVICE: Complete items 1 and 4 when additional services are desired, and complete items 3 and 5.
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 fee(s) 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:

BORICA OIL INC
P O DRAWER H
FORT SUMNER NM 88119

4. Article Number
P 111 538 603

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X Nancy A Sparks

7. Date of Delivery
11-16-92

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:

WILLIAM & LORETA HUNKER TRUST
327 EAST DEVARGAS
SANTA FE NM 87501

4a. Article Number
P 561 867 074

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

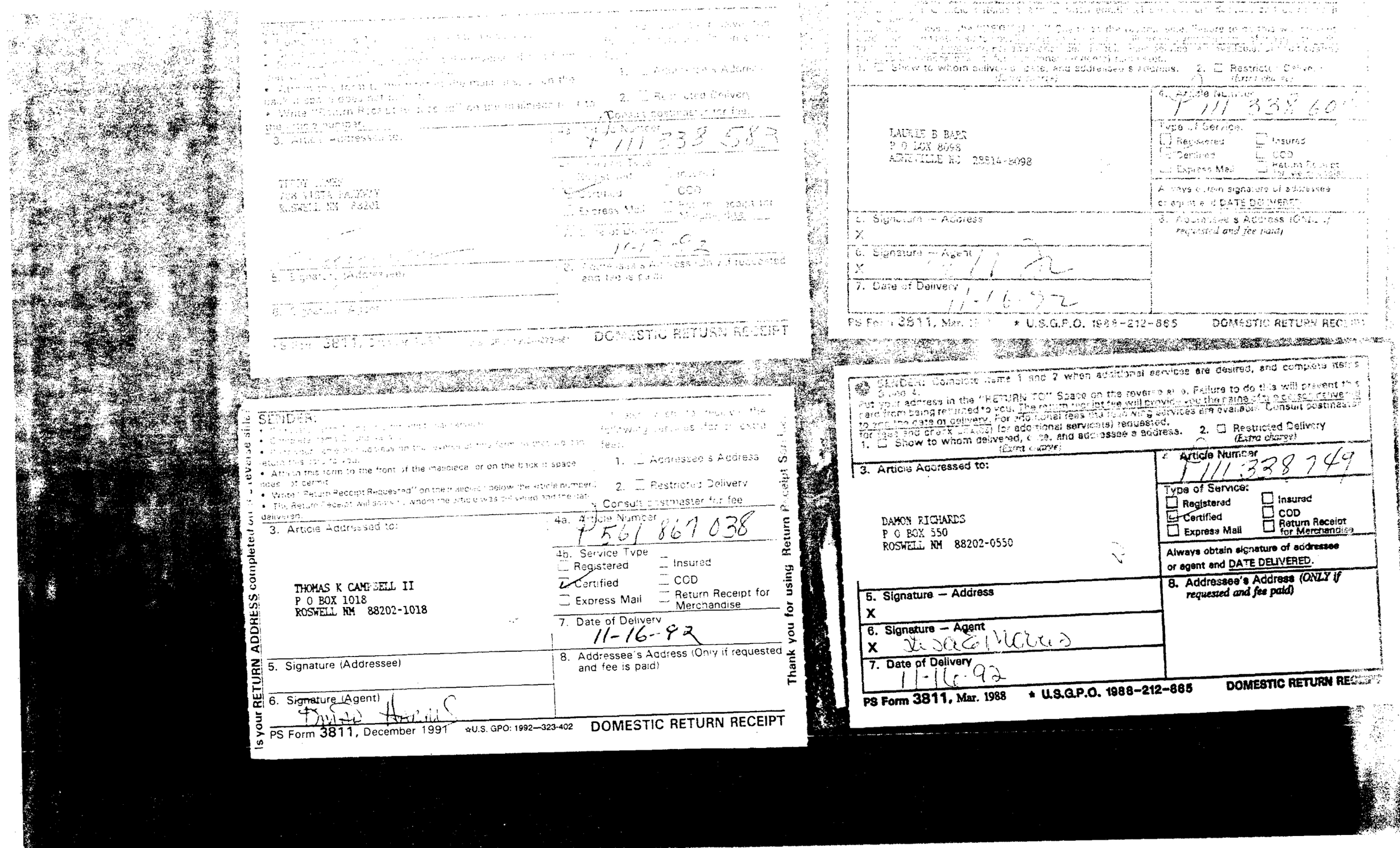
5. Signature (Addressee)
W.W. Hunker

6. Signature (Agent)

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

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.



LAURIE B BARR
P O BOX 8068
ROSWELL NM 88202-8068

Article Number
P 111 338 607

Type of Service:
Registered / Insured
Certified / COD
Express Mail / Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery
11-16-92

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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 fee.
1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge)
2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
DAMON RICHARDS
P O BOX 550
ROSWELL NM 88202-0550

4a. Article Number
P 561 867 038

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16-92

5. Signature (Addressee)

6. Signature (Agent)
Damon Richards

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

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

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 fee.
• Attach this form to the front of the mailpiece, or on the back if space does not permit.
• Write "Return Receipt Requested" on the mailpiece below the article number.
• The Return Receipt will show to whom the article was delivered and the date delivered.
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:
THOMAS K CAMPBELL II
P O BOX 1018
ROSWELL NM 88202-1018

4a. Article Number
P 561 867 038

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

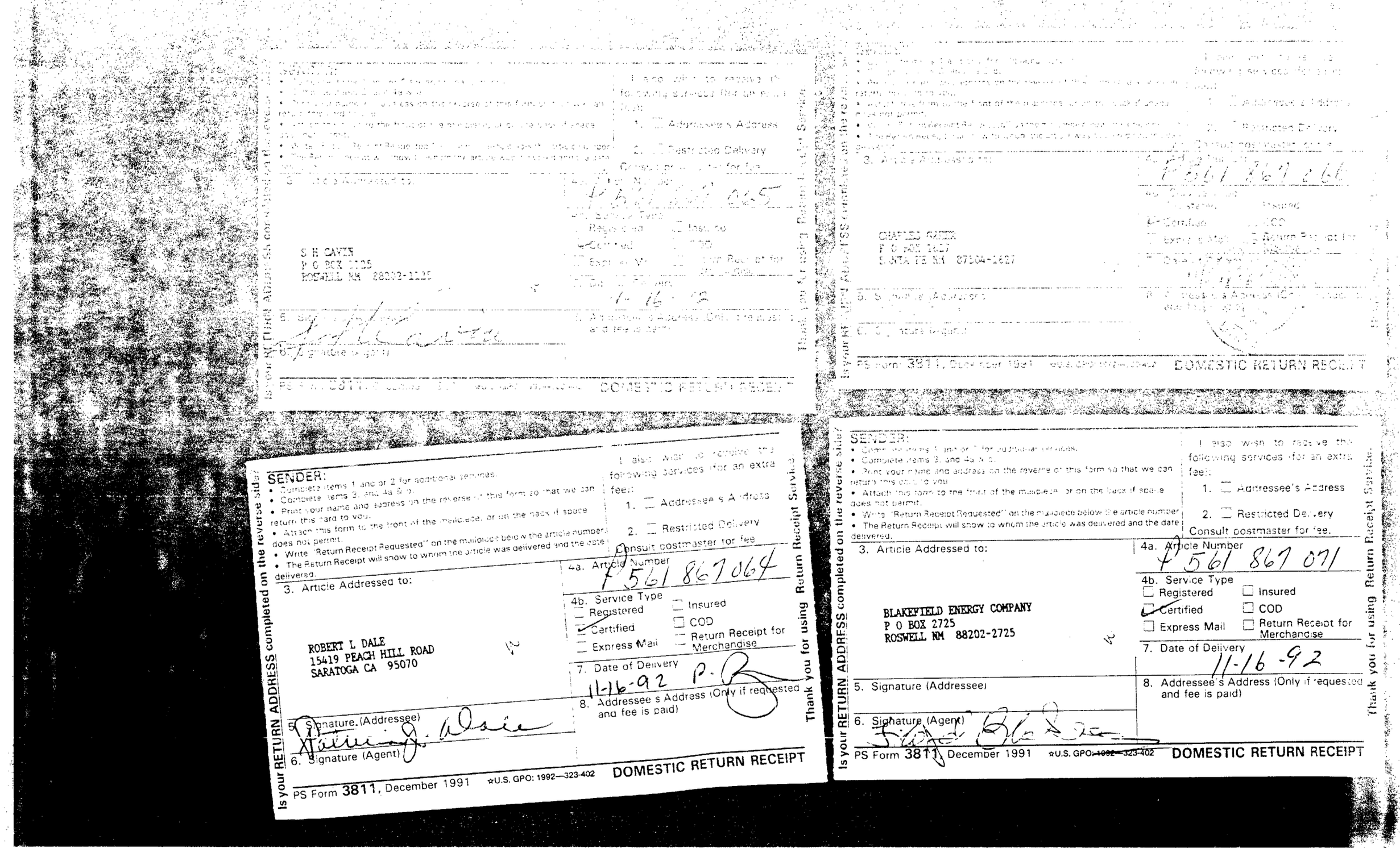
7. Date of Delivery
11-16-92

5. Signature (Addressee)

6. Signature (Agent)
Damon Richards

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

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT



S H CAVIN
P O BOX 1125
ROSWELL NM 88202-1125

CHARLES RAZOR
P O BOX 1627
SANTA FE NM 87504-1627

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

ROBERT L DALE
15419 PEACH HILL ROAD
SARATOGA CA 95070

4a. Article Number
P 561 867 064

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16-92

5. Signature (Addressee)

6. Signature (Agent)

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

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

BLAKEFIELD ENERGY COMPANY
P O BOX 2725
ROSWELL NM 88202-2725

4a. Article Number
P 561 867 071

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16-92

5. Signature (Addressee)

6. Signature (Agent)

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

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

PANAGAN OIL PROPERTIES INC
P O BOX 420
ROSWELL NM 88202-0420

4a. Article Number
P 561 867 069

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16-92

5. Signature (Addressee)

6. Signature (Agent)

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

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

---

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

3. Article Addressed to:

SIETE OIL & GAS CORPORATION
P O BOX 2523
ROSWELL NM 88202-2523

4. Article Number
P 338 585 52

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

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

6. Signature — Agent
X

7. Date of Delivery

PS Form 3811, Mar. 1988 ☆ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece next to the article number.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee

3. Article Addressed to:

SANTA FE ENERGY RESOURCES INC
500 WEST ILLINOIS SUITE 500
MIDLAND TX 79701

4a. Article Number
P 111 338 585

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

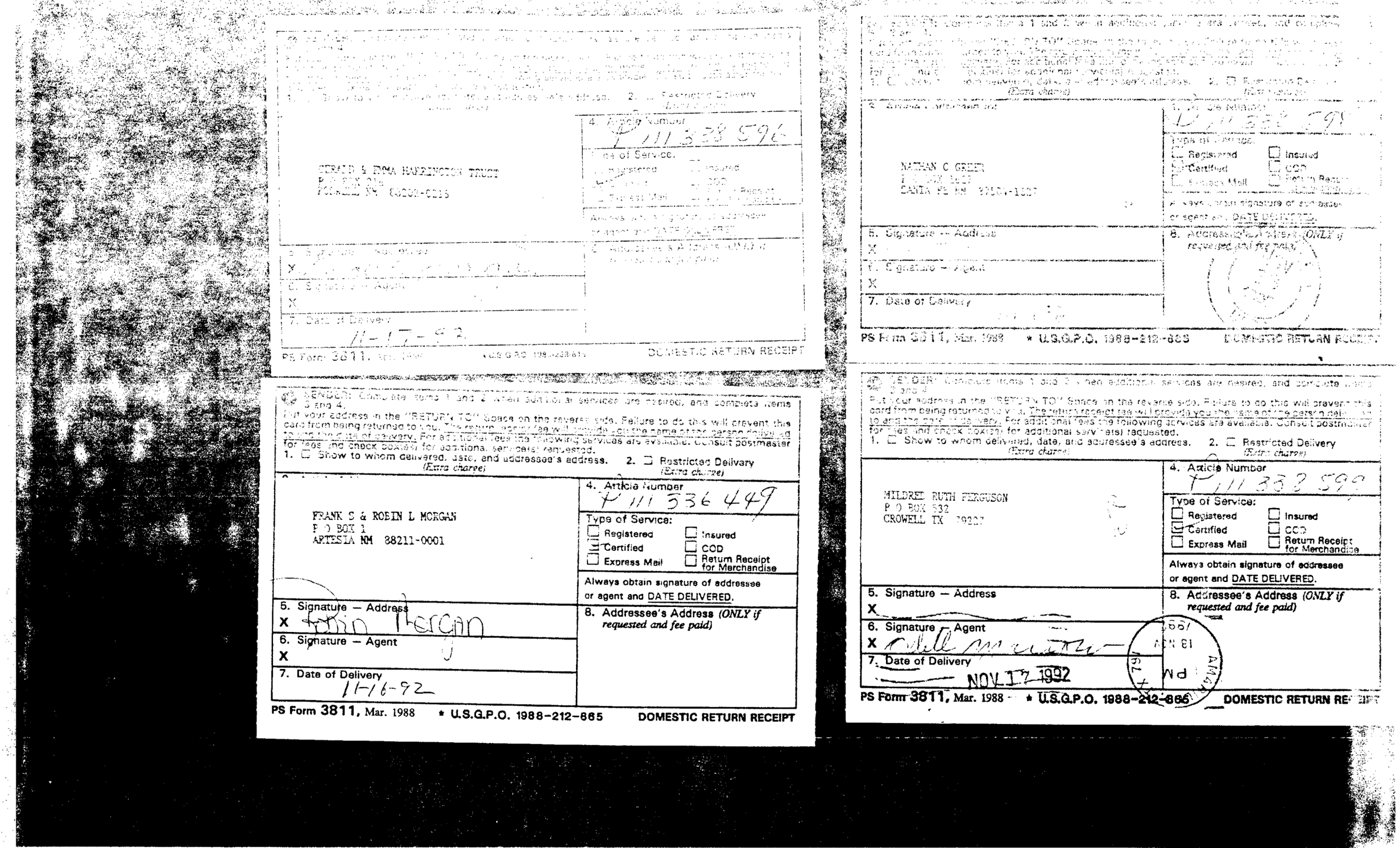
7. Date of Delivery
11-16-92

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, October 1990 ☆U.S. GPO: 1990—273-861 DOMESTIC RETURN RECEIPT



GERALD & EMMA HARRINGTON TRUST
P O BOX 816
PORTALES NM 88130-0816

4. Article Number
P 111 338 596

Type of Service:
Registered
Certified
Express Mail
Insured
COD
Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery
11-17-92

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

NATHAN C GREER
P O BOX 1607
SANTA FE NM 87504-1607

4. Article Number
P 111 338 597

Type of Service:
Registered
Certified
Express Mail
Insured
COD
Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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)

FRANK S & ROBIN L MORGAN
P O BOX 1
ARTESIA NM 88211-0001

4. Article Number
P 111 336 449

Type of Service:
Registered
Certified
Express Mail
Insured
COD
Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X Robin Morgan

6. Signature — Agent
X

7. Date of Delivery
11-16-92

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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)

MILDRED RUTH FERGUSON
P O BOX 532
CROWELL TX 79227

4. Article Number
P 111 338 599

Type of Service:
Registered
Certified
Express Mail
Insured
COD
Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

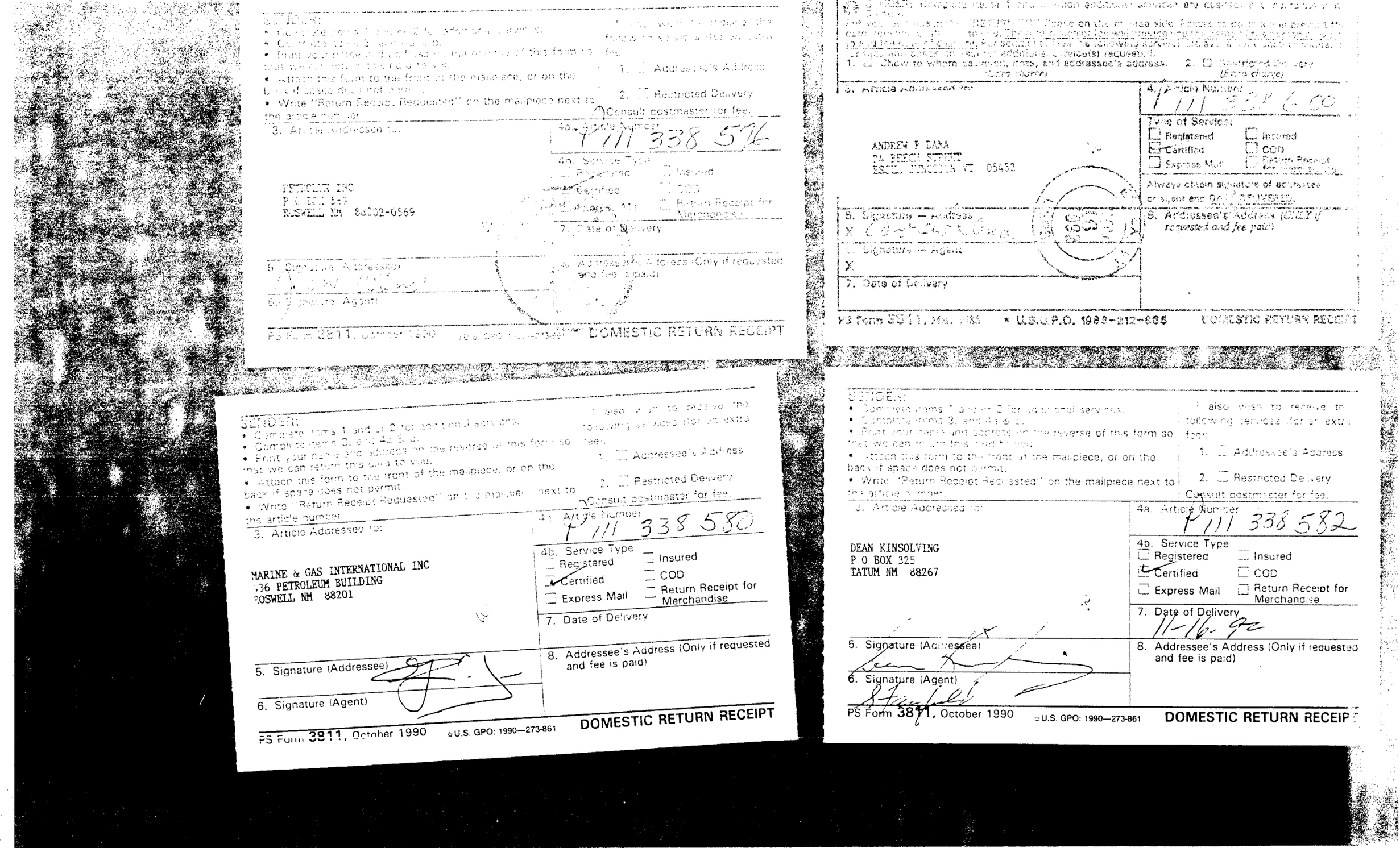
5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery
NOV 17 1992

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT



SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece next to the article number.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

PETROLEUM INC
P O BOX 569
ROSWELL NM 88202-0569

4a. Article Number: P 111 338 576

4b. Service Type:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, October 1990 *U.S. GPO: 1990—273-861 DOMESTIC RETURN RECEIPT

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

3. Article Addressed to:

ANDREW P DANA
24 BEECH STREET
ESSEX JUNCTION VT 05452

4. Article Number: P 111 338 600

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece next to the article number.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

MARINE & GAS INTERNATIONAL INC
336 PETROLEUM BUILDING
ROSWELL NM 88201

4a. Article Number: P 111 338 580

4b. Service Type:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, October 1990 *U.S. GPO: 1990—273-861 DOMESTIC RETURN RECEIPT

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece next to the article number.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

DEAN KINSOLVING
P O BOX 325
TATUM NM 88267

4a. Article Number: P 111 338 582

4b. Service Type:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery: 11-16-92

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, October 1990 *U.S. GPO: 1990—273-861 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)

SOUTHLAND ROYALTY COMPANY
P O BOX 51810
MIDLAND TX 79710-1810

4. Article Number
P 111 338 152

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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)

POLO OIL & GAS COMPANY
P O BOX 699
ROSWELL NM 88202-0699

4. Article Number
P 111 338153

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

ROSEMY B AMELUNXEN
P O BOX 6639
CARLSBAD NM 88202-6639

4a. Article Number
P 111 338 151

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

5. Signature (Addressee)

6. Signature (Agent)

7. Date of Delivery

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

PS Form 3811, December 1991 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)

ALASCO OIL AND GAS
436 PETROLEUM BUILDING
ROSWELL NM 88201

4. Article Number
P 111 338 151

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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:

MOUNTAIN APPLE COMPANY
P O BOX 396
ALAMOGORDO NM 88310

4. Article Number
P 111 338 755

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery
11-16-92

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER:
• Complete items 1 and/or 2 for additional services.
• Complete items 3, and 4a & b.
• Print your name and address on the reverse of this form so that we can return this card to you.
• Attach this form to the front of the mailpiece, or on the back if space does not permit.
• Write "Return Receipt Requested" on the mailpiece next to the article number.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

KERRY J LEONARD
P O BOX 400
ROSWELL NM 88202-0400

4a. Article Number
P 111 338 757

4b. Service Type
Registered ☐ Insured
Certified ☐ COD
Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16-92

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, February 1990 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:

RED OAK CATTLE COMPANY
P O BOX 998
ARDMORE OK 73402

4. Article Number
P 111 338 759

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery
11-16-92

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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:

MANZANO OIL CORPORATION
P O BOX 2107
ROSWELL NM 88202-2107

4. Article Number
P 111 338 757

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

ROSWELL NM NOV 1992

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece next to the article number.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

PATRICK J MORELLO
[illegible]

4a. Article Number P 111 338 518

4b. Service Type
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery [illegible]

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, December 1991 U.S. GPO 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:

WARREN C SCOTT
428 PETROLEUM BUILDING
ROSWELL NM 88201

4. Article Number P 111 338 7

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X Sharon Scott

7. Date of Delivery
11/16/92

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

PS Form 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

STAN H STOCKER
3302 ST JAMES CT
TYLER TX 75701

4a. Article Number P 561 858 804

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-17-92

5. Signature (Addressee)
Mrs. S. H. Stocker

6. Signature (Agent)

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

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

MCKAY OIL CORPORATION
P O BOX 2014
ROSWELL NM 88202-2014

4a. Article Number P 327 278 544

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16-92

5. Signature (Addressee)

6. Signature (Agent)
[illegible signature]

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

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN AD[DRESS complete]d on the reverse side?

Thank you for using Return Receipt Service.

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:

LARUE & MUNCY
P O BOX 470
ARTESIA NM 88210-0470

4. Article Number
P 111 338 760

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
11-16-92

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
• Complete items 1 and 2 for additional services.
• Complete items 3, and 4a & b.
• Print your name and address on the reverse of this form so that we can return this card to you.
• Attach this form to the front of the mailpiece, or on the back if space does not permit.
• Write "Return Receipt Requested" on the mailpiece below the article number.
• The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

STUART D HANSON
P O BOX 723
ROSWELL NM 88202-0723

4a. Article Number
P 561 867 068

4b. Service Type
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11/16/92

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

Signature — Addressee

Signature — Agent

PS Form 3811, December 1991 * U.S. GPO: 1992-323-402 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:

PIERCE IRREVOCABLE TRUST #2
6201 UPTOWN BLVD NE #201
ALBUQUERQUE NM 87110

4. Article Number
P 111 338 763

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X Lynette M. Wilkins

7. Date of Delivery
11 16 92

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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:

MARY G SOLDOW
P O BOX 1627
SANTA FE NM 87504-1627

4. Article Number
P 111 338 762

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
11/16/92

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

NOV 16 1992 USPS

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN REC

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

FRANCIS G TRACY III
P O BOX 868
CARLSBAD NM 88221

4a. Article Number
P 561 828 799

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16

5. Signature (Addressee)

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

CHARLES MORRILL
P O BOX 5608
ROSWELL NM 88202-5608

4a. Article Number
P 561 858 8[illegible]

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-12-92

5. Signature (Addressee)

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

JACK V WALKER
P O BOX 10-2256
ANCHORAGE AK 99510

4a. Article Number
P 761 52 879

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16

5. Signature (Addressee)

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

6. Signature (Agent)
J V Walker

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BILLY G UNDERWOOD JR
1000 LOUISIANA SUITE 6770
HOUSTON TX 77002

4a. Article Number
P 561 858 80[illegible]

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 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:

DUANE E BROWN
1313 MARQUETTE PL NE
ALBUQUERQUE NM 87106

4. Article Number
P 111 338 592

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery

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

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:

JOSE E RODRIGUEZ
10418 CRESCENT MOON DRIVE
HOUSTON TX 77064

4. Article Number
P 111 338 5[illegible]

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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:

PETE T & GAIL BALOG
3822 LOCARNO DRIVE
ANCHORAGE AK 99508

4. Article Number
P 111 338 594

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Gail Balog

6. Signature — Agent
X

7. Date of Delivery

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

NOV 20 1992 AZ

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:

HARRY D BLAKE JR
1000 MOORE AVENUE
ROSWELL NM 88201

4. Article Number
P 111 338 593

Type of Service:
☒ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X Harry D Blake

6. Signature — Agent
X

7. Date of Delivery
11-14-92

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

RECEIVED
NOV 16 1992

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

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece next to the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

HANSON OPERATING COMPANY INC
P O BOX 1515
ROSWELL NM 88202-1515

4a. Article Number
P 561 867 075

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
12-4-92

5. Signature (Addressee)

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

6. Signature (Agent)
X

PS Form 3811, December 1991 * U.S.G.P.O. 1991-287-865 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

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

PERMIAN BASIN INVESTMENT
[illegible] BUILDING
[illegible] NM 88201

4. Article Number
P 111 338 [illegible]

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X [illegible]

6. Signature — Agent
X

7. Date of Delivery

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece next to the article number.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

MICHAEL J NORTON III
688 COUNTY STREET
NEW BEDFORD MA 02740

4a. Article Number
P 111 338 577

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-17

5. Signature (Addressee)
Madeline C. Perry

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

6. Signature (Agent)

PS Form 3811, October 1990 *U.S. GPO: 1990—273-861 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 L. SCHULTZ
809 TWIN DIAMOND ROAD
ROSWELL NM 88201

4. Article Number
P 111 338 6[illegible]

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X [illegible]

6. Signature — Agent
X

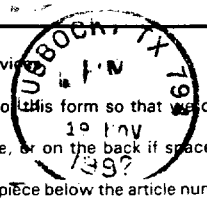
7. Date of Delivery
11-24-92

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.



I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

GARON GAGLE
2202 AVENUE Q
LUBBOCK TX 79400

4a. Article Number P 111 339 859

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery 11-19-97

5. Signature (Addressee) M Vaughn

6. Signature (Agent)

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

PS Form 3811, December 1991 *U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

PERMIAN BASIN INVESTMENT CORPORATION
500 PETROLEUM BUILDING
ROSWELL NM 88201

4a. Article Number P 111 339 845

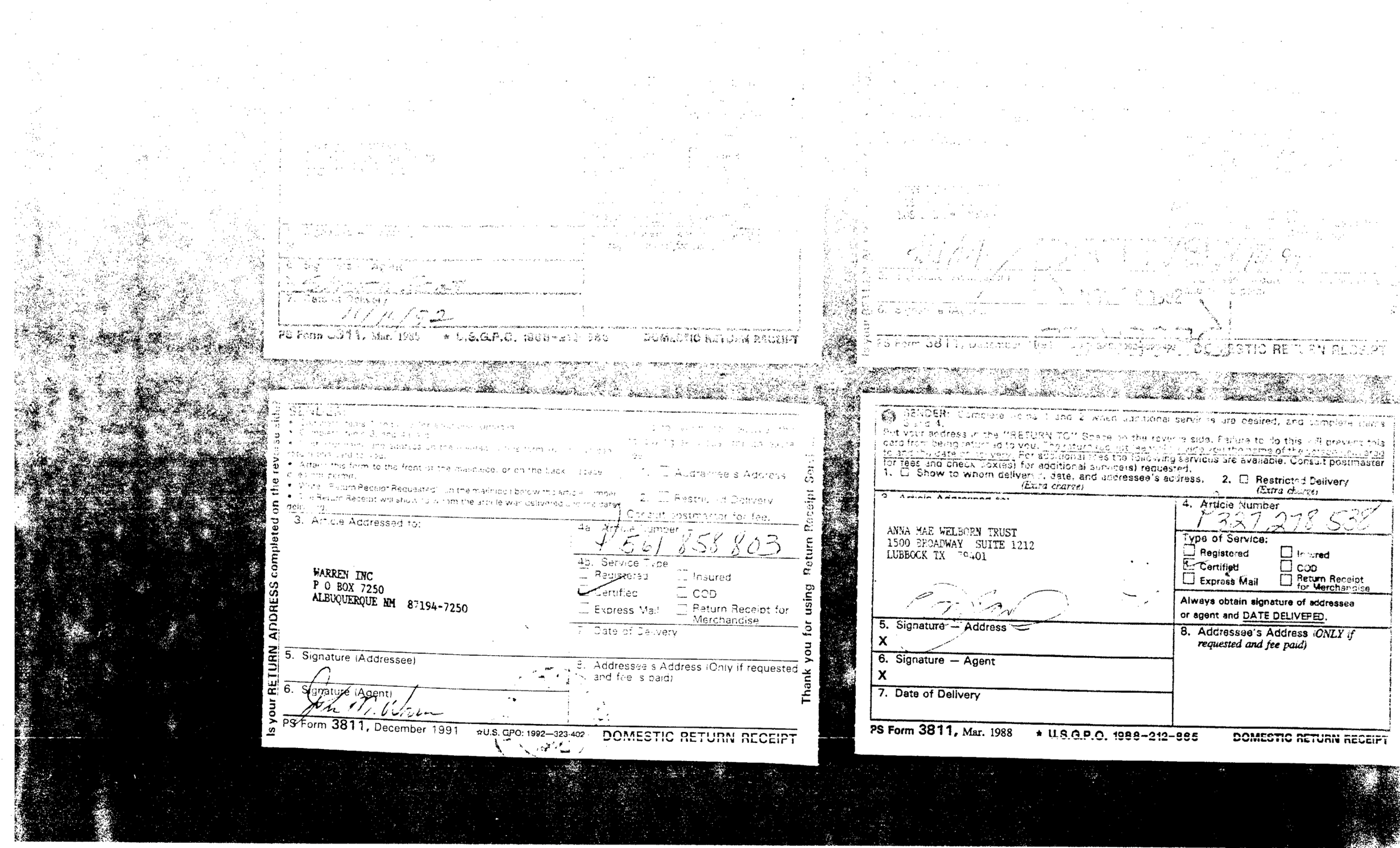
4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery 11/19/97

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

6. Signature (Agent)

Thank you for using Return Receipt Service.



PS Form 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

PS Form 3811, December 1991 ★U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

WARREN INC
P O BOX 7250
ALBUQUERQUE NM 87194-7250

4a. Article Number
P 561 858 803

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)
John M. Warren

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

PS Form 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 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:

ANNA MAE WELBORN TRUST
1500 BROADWAY SUITE 1212
LUBBOCK TX 79401

4. Article Number
P 327 278 538

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

3. Article Addressed to:

J M WELBORN
1500 BROADWAY SUITE 1212
LUBBOCK TX 79401

4. Article Number
P 327 278 525

Type of Service:
- ☐ Registered
- ☐ Insured
- ☑ Certified
- ☐ COD
- ☐ Express Mail
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

3. Article Addressed to:

C P WINN
P O BOX 6832
HOUSTON TX 77265

4. Article Number
P 327 278 529

Type of Service:
- ☐ Registered
- ☐ Insured
- ☑ Certified
- ☐ COD
- ☐ Express Mail
- ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

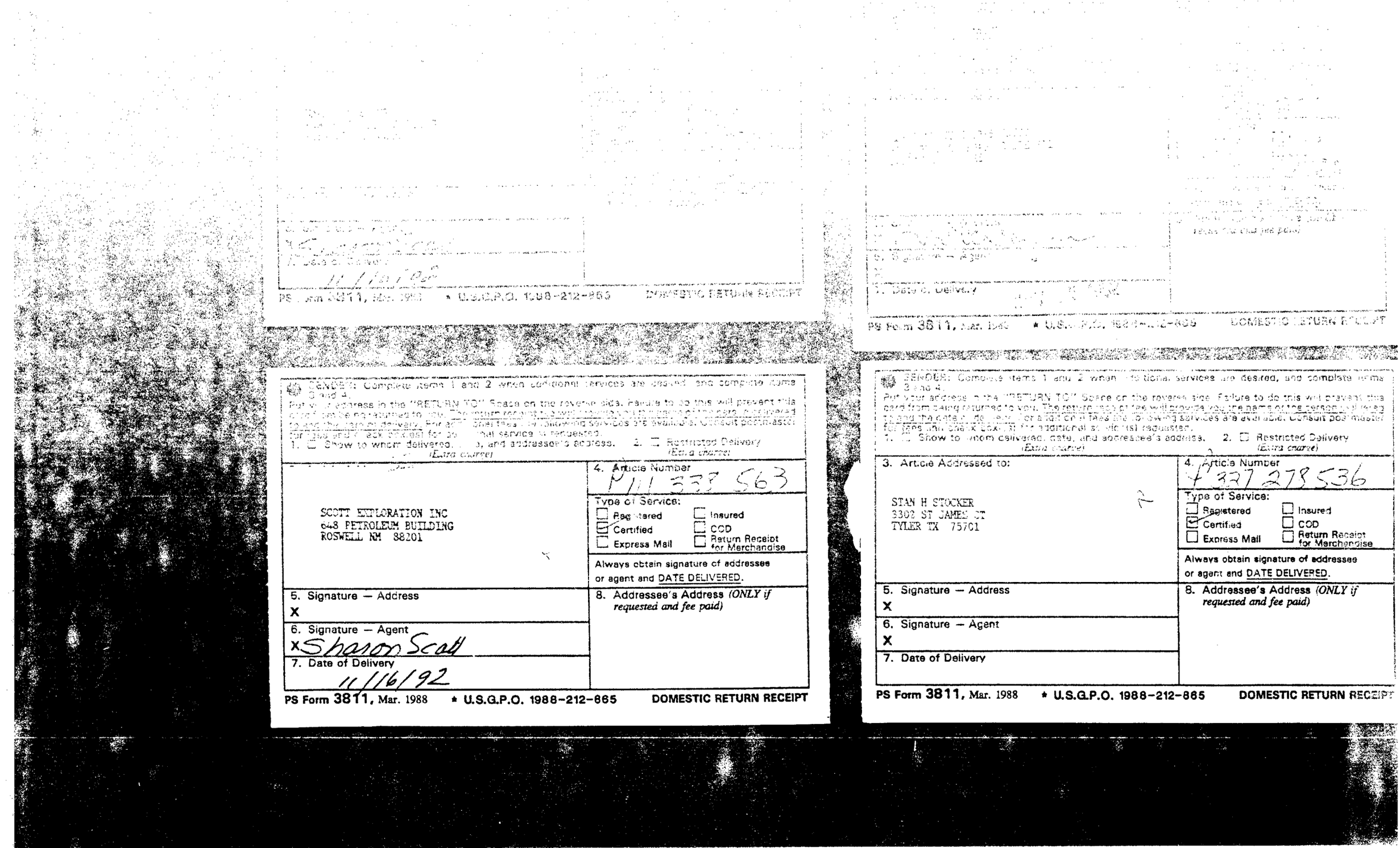
5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery
NOV 17 19

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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:

SCOTT EXPLORATION INC
648 PETROLEUM BUILDING
ROSWELL NM 88201

4. Article Number
P 111 338 563

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X Sharon Scott

7. Date of Delivery
11/16/92

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

PS Form **3811**, Mar. 1988 * U.S.G.P.O. 1988-212-865 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:

STAN H STOCKER
3302 ST JAMES CT
TYLER TX 75701

4. Article Number
P 327 278 536

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

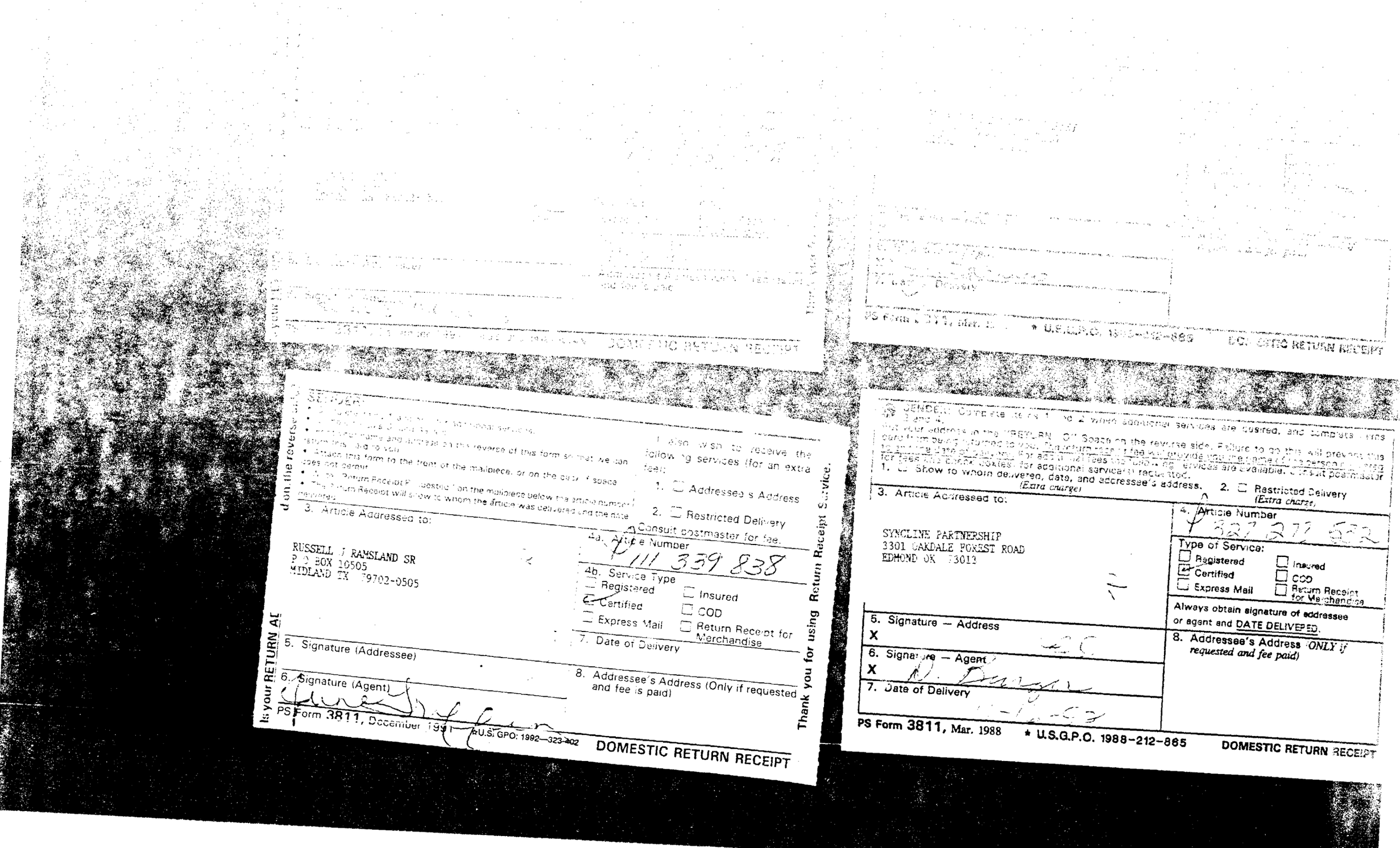
5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form **3811**, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT



DOMESTIC RETURN RECEIPT

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

RUSSELL J RAMSLAND SR
P O BOX 10505
MIDLAND TX 79702-0505

4a. Article Number
P 111 339 838

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

5. Signature (Addressee)

6. Signature (Agent)

7. Date of Delivery

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

PS Form 3811, December 1991 *U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN AD

Thank you for using Return Receipt Service.

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:

SYNCLINE PARTNERSHIP
3301 OAKDALE FOREST ROAD
EDMOND OK 73013

4. Article Number
P 327 272 522

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

JANE BARNES RAMSLAND
P O BOX 10505
MIDLAND TX 79702-0505

4a. Article Number
P 111 339 848

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

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

Signature (Addressee)

Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

RONADERO COMPANY INC
P O BOX 430
ROSWELL NM 88202-0430

4a. Article Number
P 111 339 850

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
4/17/92

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

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

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

3. Article Addressed to:

MCKAY OIL CORPORATION
P O BOX 2014
ROSWELL NM 88202-2014

4. Article Number
P 111 232 551

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Address
X

6. Signature – Agent
X

7. Date of Delivery
11-16-92

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

PS Form **3811**, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 **DOMESTIC RETURN RECEIPT**

1. ☐ Addressee's Address 2. ☐ Restricted Delivery

• Consult postmaster for fee.

3. Article Addressed to:

RED OAK CATTLE COMPANY
P O BOX 998
ARDMORE OK 73402

4a. Article Number
P 111 339 349

4b. Service Type
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16-92

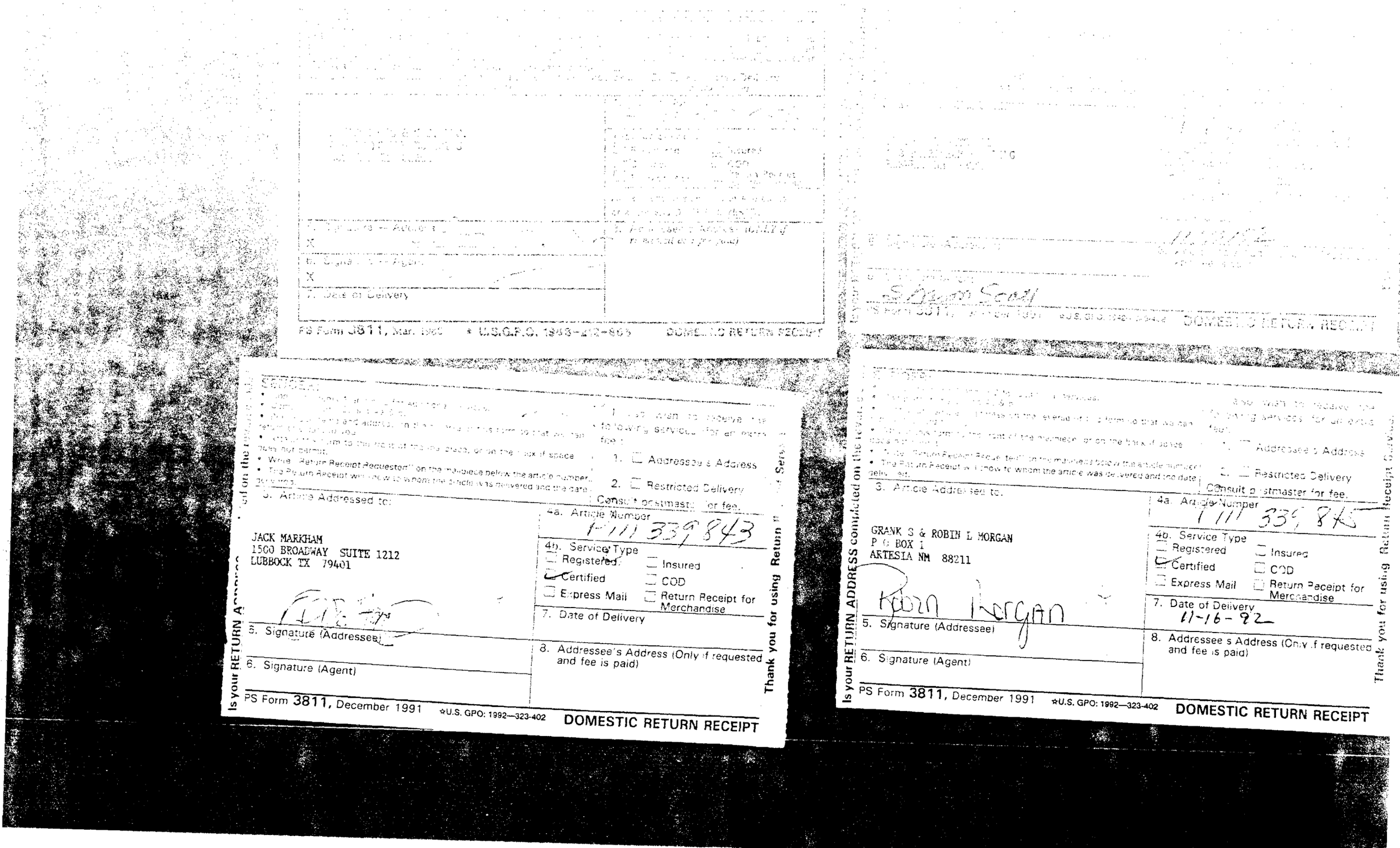
5. Signature (Addressee)

6. Signature (Agent)

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

Thank you for using Return Receipt Service.

PS Form **3811**, December 1991 ★U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**



PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

X

X

7. Date of Delivery

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address in the space below. Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

JACK MARKHAM
1500 BROADWAY SUITE 1212
LUBBOCK TX 79401

4a. Article Number
P 111 339 843

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

S Morgan Scott

PS Form 3811 ☆U.S.G.P.O. DOMESTIC RETURN RECEIPT

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address in the space below. Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

GRANK S & ROBIN L MORGAN
P O BOX 1
ARTESIA NM 88211

4a. Article Number
P 111 339 845

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16-92

5. Signature (Addressee)
Robin Morgan

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

DOMESTIC RETURN RECEIPT

DOMESTIC RETURN RECEIPT

SENDER:

- Complete items 1, 2, 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

☐ Consult postmaster for fee.

3. Article Addressed to:

MONAGAN LIVING TRUST
P O BOX 2066
MIDLAND TX 79702-2066

4a. Article Number P 327 278 546

4b. Service Type
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER:

- Complete items 1, 2, 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

☐ Consult postmaster for fee.

3. Article Addressed to:

ELAINE MURPHY
P O BOX 505
MIDLAND TX 79702-0505

4a. Article Number P 327 278 547

4b. Service Type
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery 11-17-92

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

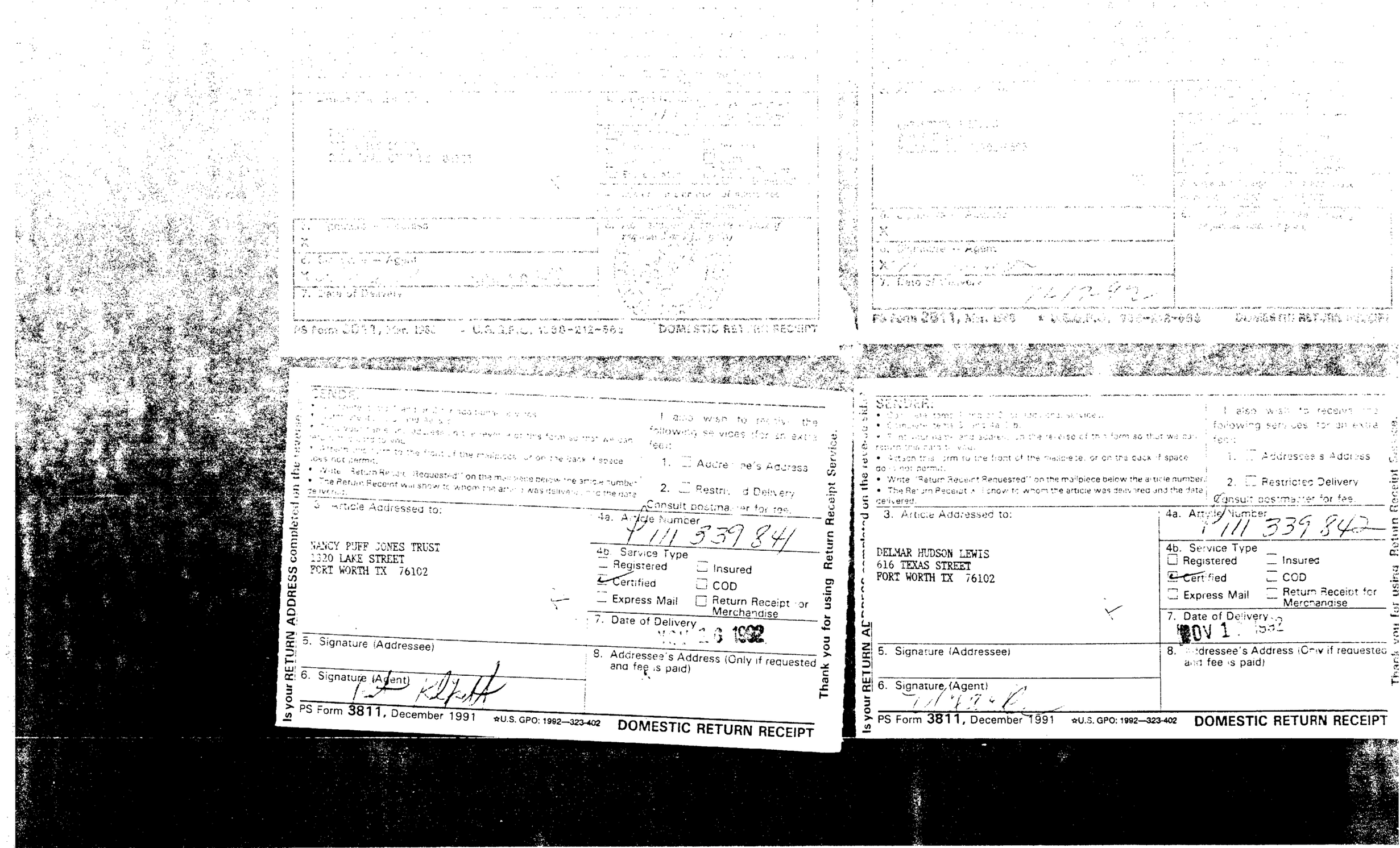
Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RE...

Thank you for using Return Receipt Service.



SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3 and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

NANCY PUFF JONES TRUST
1320 LAKE STREET
FORT WORTH TX 76102

4a. Article Number
P 111 339 841

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
NOV 16 1992

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3 and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

DELMAR HUDSON LEWIS
616 TEXAS STREET
FORT WORTH TX 76102

4a. Article Number
P 111 339 842

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
NOV 1 1992

5. Signature (Addressee)

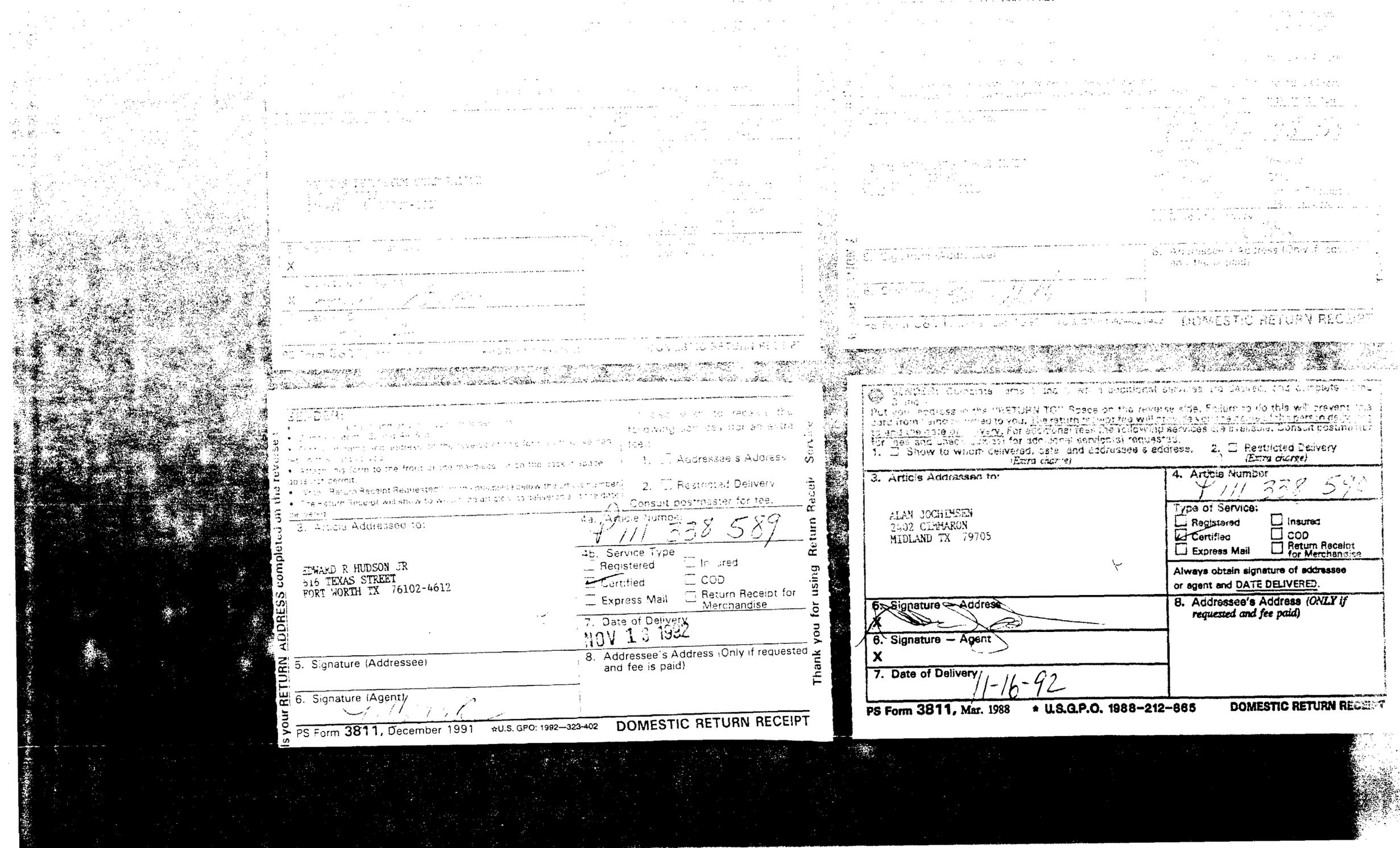
6. Signature (Agent)

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

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.



Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1, 2, and 3.
- Print your name and address in the space provided below the article number.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The return receipt will show to whom the article was delivered and the date delivered.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

EDWARD R HUDSON JR
516 TEXAS STREET
FORT WORTH TX 76102-4612

4a. Article Number
P 111 338 589

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
NOV 13 1992

5. Signature (Addressee)

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

6. Signature (Agent)
X

PS Form 3811, December 1991 *U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, and 4a & b.
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 delivered. For additional fees the following services are available. Consult postmaster for fee 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:

ALAN JOCHEMSEN
2402 CIMMARON
MIDLAND TX 79705

4. Article Number
P 111 338 590

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

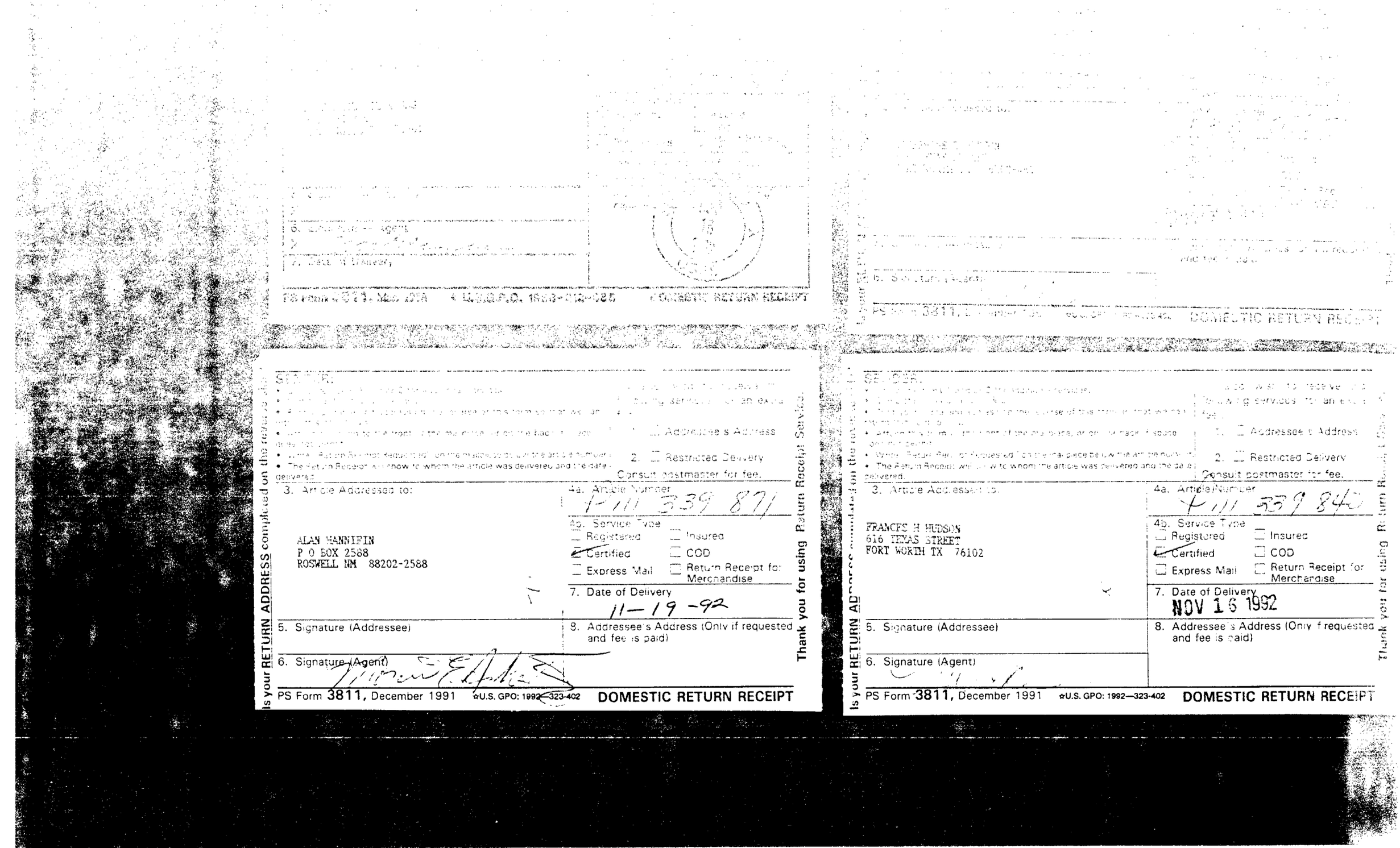
5. Signature — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
11-16-92

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT



6. [illegible]

7. Date of Delivery

PS Form [illegible] [illegible] ☆U.S.G.P.O. [illegible] DOMESTIC RETURN RECEIPT

6. Signature (Agent)

PS Form 3811, [illegible] DOMESTIC RETURN RECEIPT

SENDER:

- [illegible]
- [illegible]
- [illegible]
- [illegible]
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

ALAN HANNIFIN
P O BOX 2588
ROSWELL NM 88202-2588

4a. Article Number
P 111 339 871

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-19-92

5. Signature (Addressee)

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- [illegible]
- [illegible]
- [illegible]
- [illegible]
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

FRANCES H HUDSON
616 TEXAS STREET
FORT WORTH TX 76102

4a. Article Number
P 111 339 840

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
NOV 16 1992

5. Signature (Addressee)

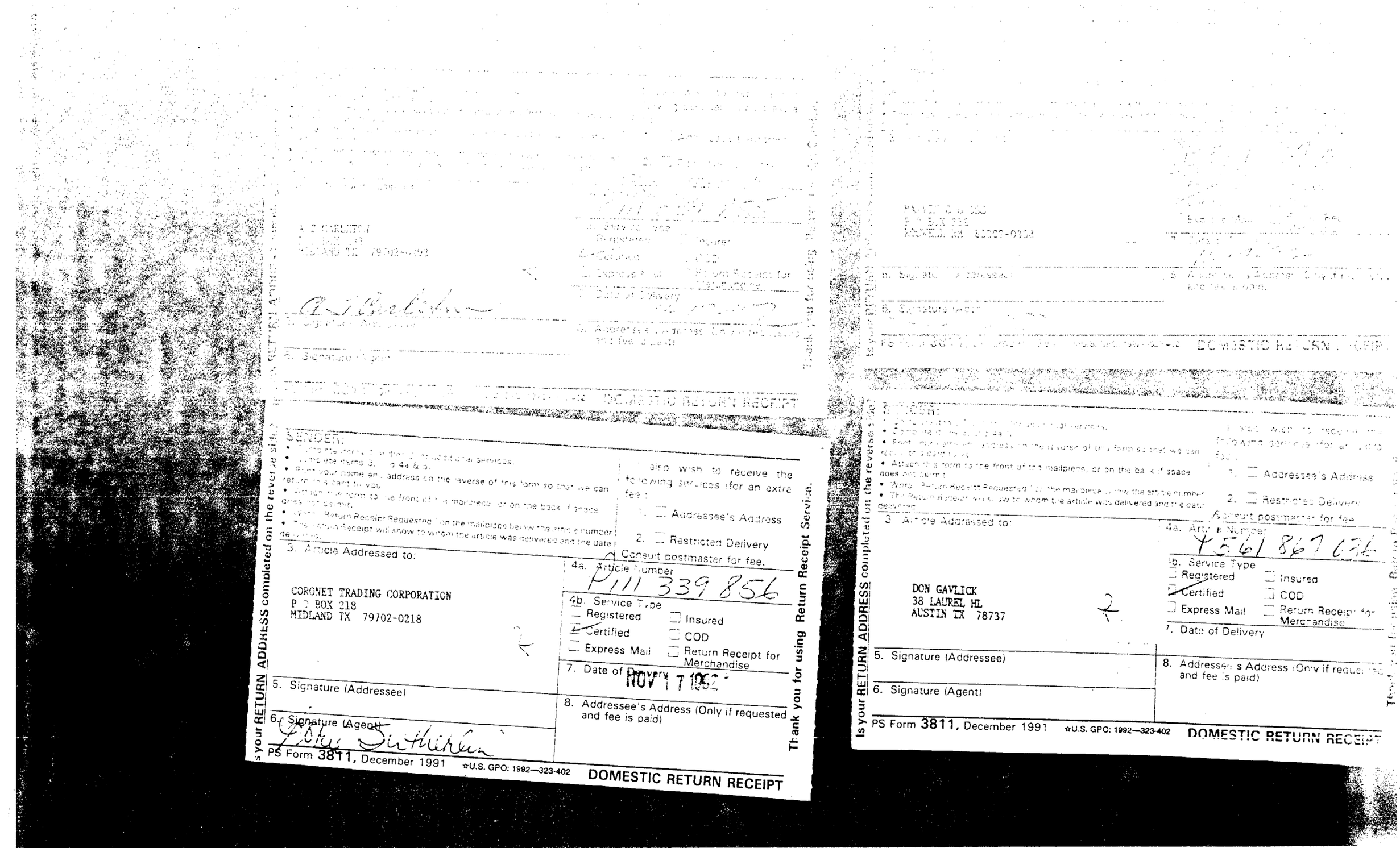
8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?



SENDER:

- Complete items 3, 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

CORONET TRADING CORPORATION
P O BOX 218
MIDLAND TX 79702-0218

4a. Article Number
P111 339 856

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
NOV 17 1992

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 3, 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

DON GAVLICK
38 LAUREL HL
AUSTIN TX 78737

4a. Article Number
Y561 867 034

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

J CLEM BARNES ESTATE
P O BOX 673
MIDLAND TX 79702-0673

4a. Article Number
P 111 339 852

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-17-92

5. Signature (Addressee)

6. Signature (Agent)
[signature]

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

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BLACKSTONE ENERGY CORPORATION
P O BOX 1715
MIDLAND TX 79702-1715

4a. Article Number
P 111 339 853

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
NOV 16 1992

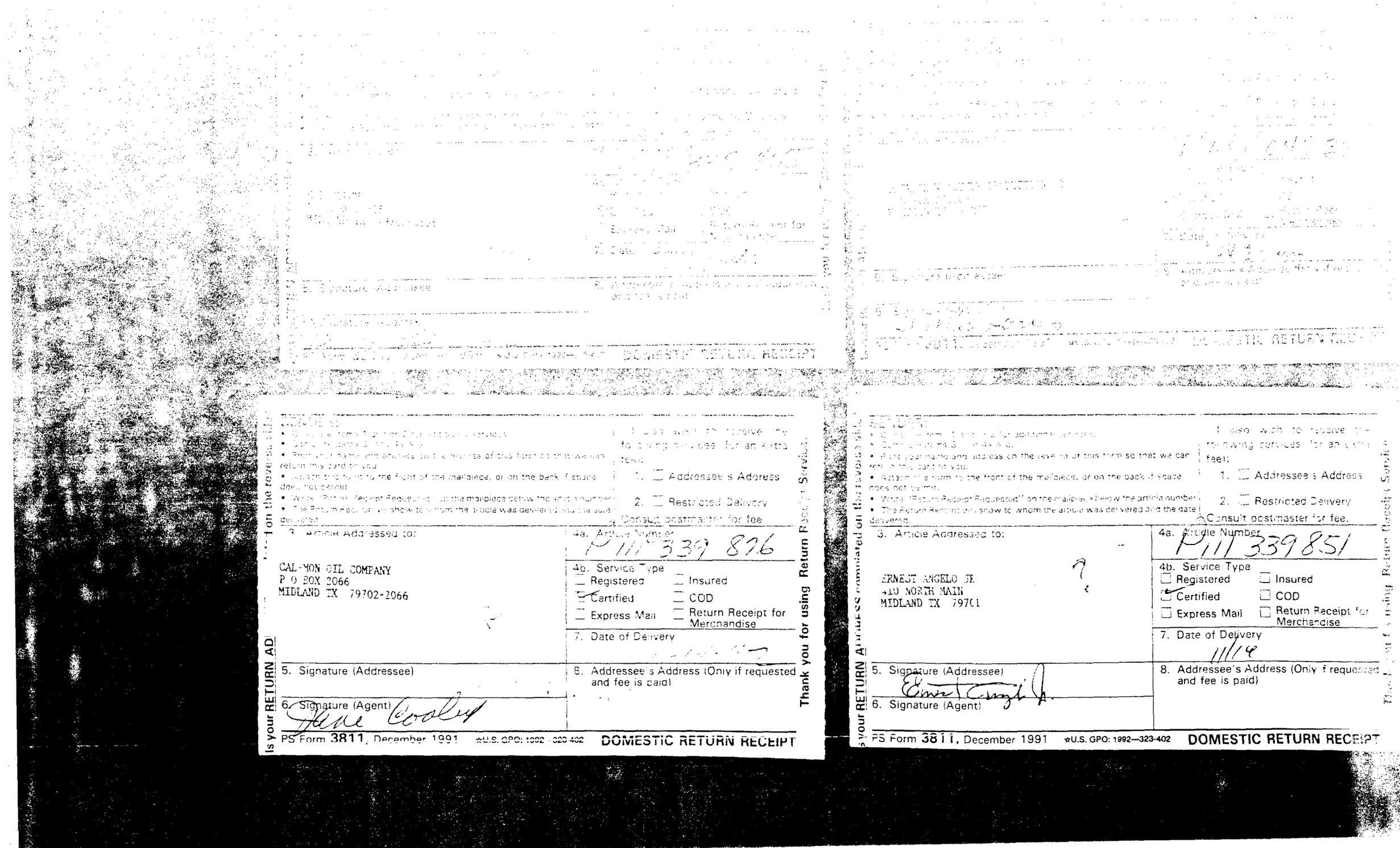
5. Signature (Addressee)

6. Signature (Agent)
[signature]

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

PS Form **3811**, December 1991 ☆U.S. GPO: 1992—323-402 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.



• Print your name and address on the reverse of this form so that we can return this card to you.
• Attach this form to the front of the mailpiece, or on the back if space does not permit.
• Write "Return Receipt Requested" on the mailpiece below the article number.
• The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

(Consult postmaster for fee)

3. Article Addressed to:

CAL-MON OIL COMPANY
P O BOX 2066
MIDLAND TX 79702-2066

4a. Article Number
P 111 339 816

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

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

6. Signature (Agent)
Steve Cooley

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

• Print your name and address on the reverse of this form so that we can return this card to you.
• Attach this form to the front of the mailpiece, or on the back if space does not permit.
• Write "Return Receipt Requested" on the mailpiece below the article number.
• The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

ERNEST ANGELO JR
410 NORTH MAIN
MIDLAND TX 79701

4a. Article Number
P 111 339 851

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11/19

5. Signature (Addressee)
Ernest Angelo Jr.

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

FORREST DUNLAP III
7267 STEFONI
DALLAS TX 75225

4a. Article Number
P 111 339 865

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
NOV 19 1992

5. Signature (Addressee)

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

ESTORIL PRODUCING CORPORATION
INDEPENDENCE PLAZA SUITE 1600
MIDLAND TX 79701

4a. Article Number
P 111 339 867

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16-92

5. Signature (Addressee)

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

6. Signature (Agent)
Connie Barnes

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

is your RETURN ADDRESS completed on the reverse side?

Is your RETURN ADDRESS completed on the reverse side?

- Complete items 1, 2, and 3. Add your address in the RETURN ADDRESS space on the reverse side.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. ☐ Consult postmaster for fee.

4a. Article Number P 111 339 880

4b. Service Type
☐ Registered ☐ Insured
~~☐ Certified~~ ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

3. Article Addressed to:

MILDRED RUTH FERGESON
P O BOX 532
CROWELL TX 79227

7. Date of Delivery 11-19-92

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

5. Signature (Addressee) Mildred Ruth Fergeson

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

- Complete items 1, 2, and 3. Add your address in the RETURN ADDRESS space on the reverse side.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. ☐ Consult postmaster for fee.

4a. Article Number P 111 339 878

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

3. Article Addressed to:

RODERICK & MARIAN DAVIS
2803 WEST 9TH STREET
LAWRENCE KS 66049

7. Date of Delivery 11-1992

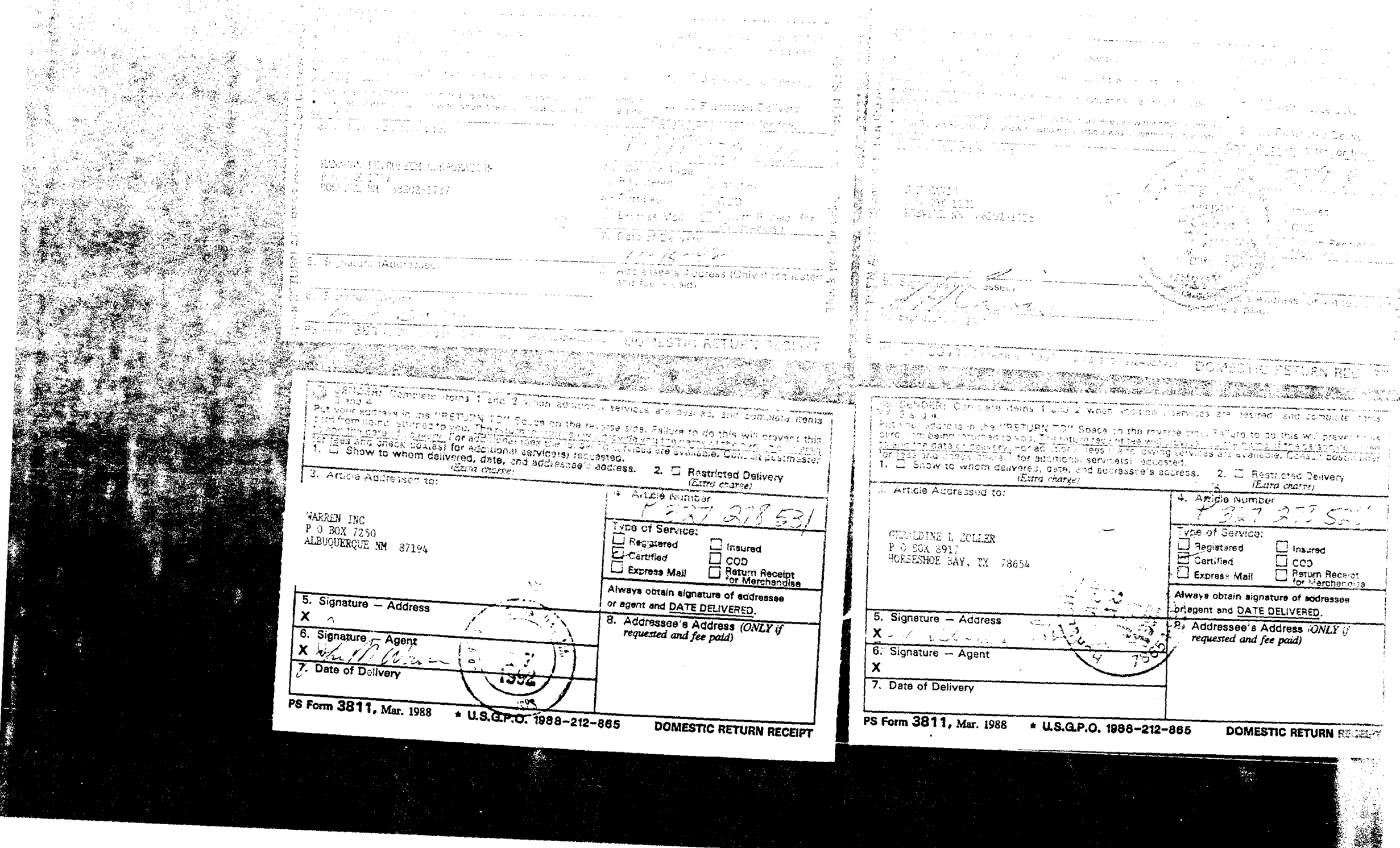
8. Addressee's Address (Only if requested and fee is paid)

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.



GENERAL: 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:

WARREN INC
P O BOX 7250
ALBUQUERQUE NM 87194

4. Article Number
P 287 218 531

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form **3811**, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

GENERAL: 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:

GERALDINE L ZOLLER
P O BOX 8917
HORSESHOE BAY, TX 78654

4. Article Number
P 287 272 561

Type of Service:
☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

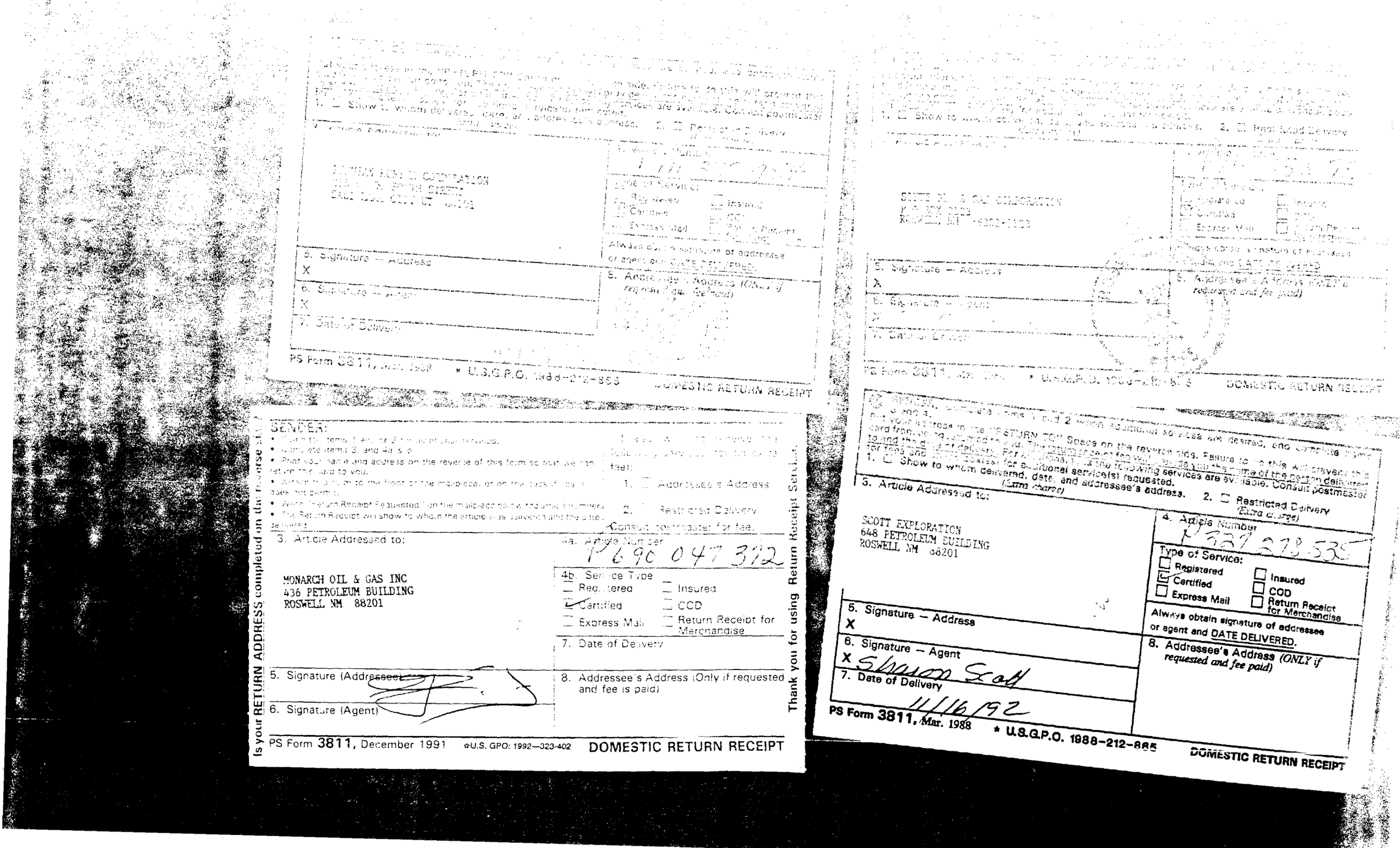
5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

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

PS Form **3811**, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT



PS Form 3811, Jan. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

MONARCH OIL & GAS INC
436 PETROLEUM BUILDING
ROSWELL NM 88201

4a. Article Number P 690 047 312

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

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

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

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

3. Article Addressed to:

SCOTT EXPLORATION
648 PETROLEUM BUILDING
ROSWELL NM 88201

4. Article Number P 327 278 535

Type of Service:
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

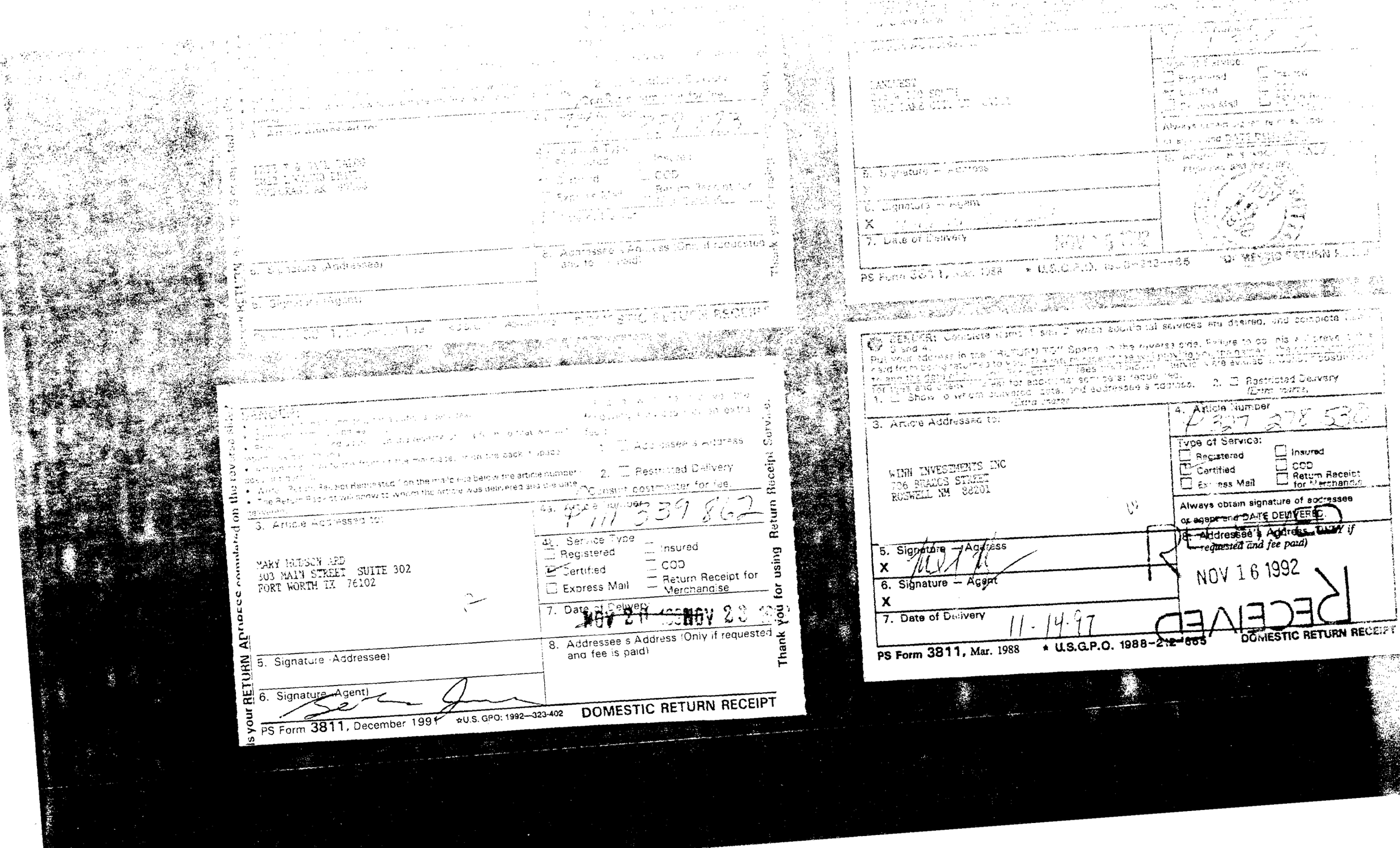
5. Signature — Address
X

6. Signature — Agent
X Shawn Scott

7. Date of Delivery
11/16/92

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

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT



MARY HUDSON ARD
303 MAIN STREET SUITE 302
FORT WORTH TX 76102

P 111 339 862

Registered — Insured
Certified — COD
Express Mail — Return Receipt for Merchandise

NOV 21 1992

Thank you for using Return Receipt Service.

DOMESTIC RETURN RECEIPT

PS Form 3811, December 1991 *U.S. GPO: 1992—323-402

WINN INVESTMENTS INC
726 BRADOS STREET
ROSWELL NM 88201

P 327 378 538

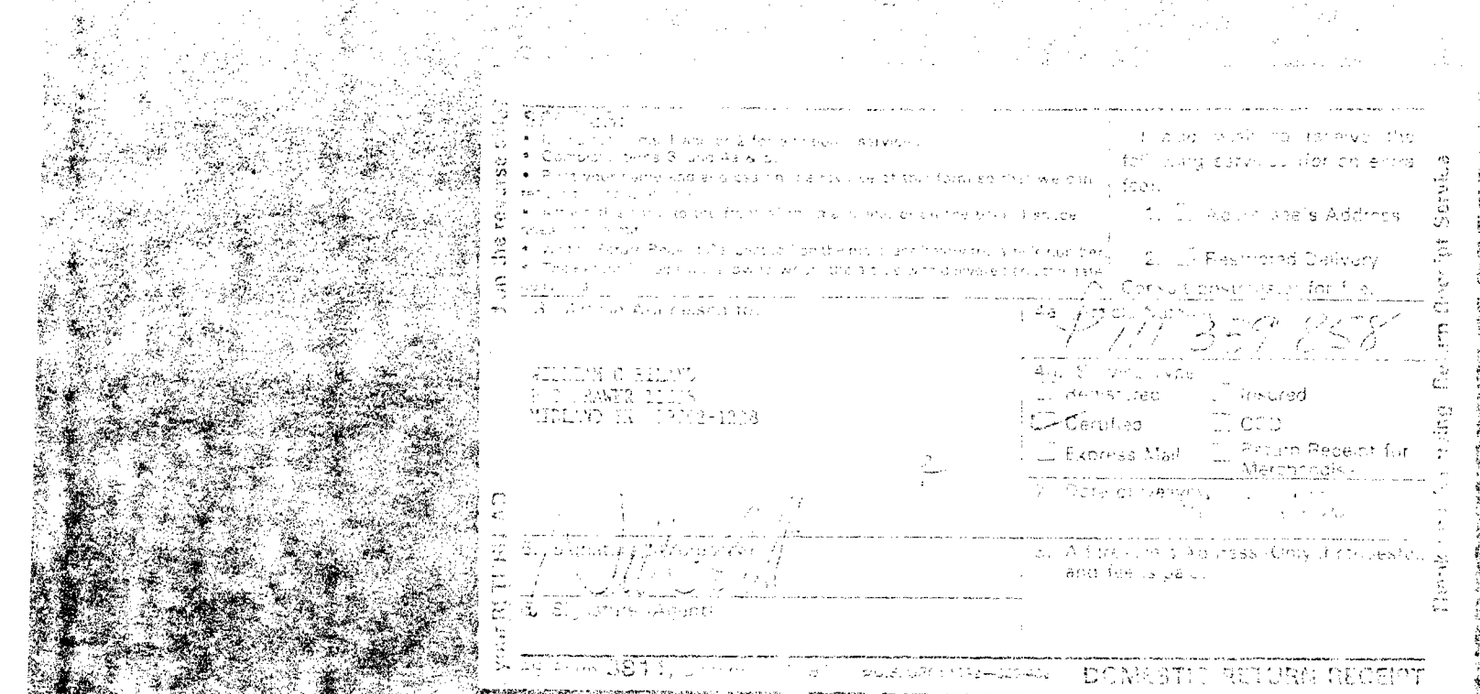
Registered — Insured
Certified — COD
Express Mail — Return Receipt for Merchandise

NOV 16 1992

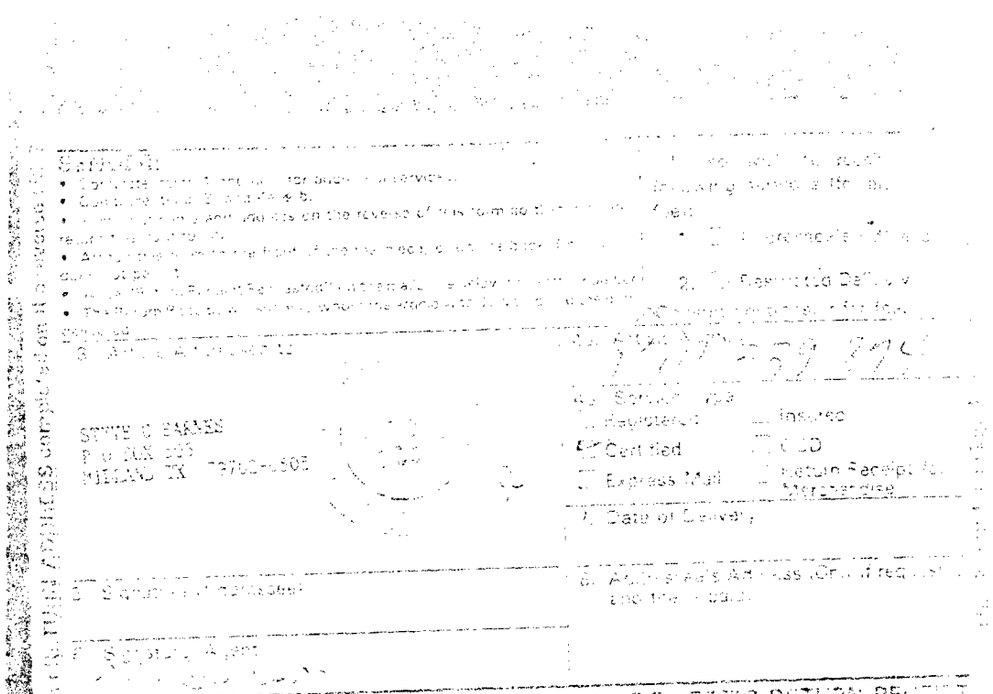
11-14-92

DOMESTIC RETURN RECEIPT

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865



DOMESTIC RETURN RECEIPT



DOMESTIC RETURN RECEIPT

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

HILL REVOCABLE TRUSTS
7706 ALBERT AVENUE
FORT WORTH TX 76116

4a. Article Number P 111 339 872

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery 11-23

5. Signature (Addressee)

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

6. Signature (Agent) X

PS Form 3811, December 1991 ☆U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and
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 L & PAM SCHULTZ
809 TWIN DIAMOND ROAD
ROSWELL NM 88201

4. Article Number P 337 273 534

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

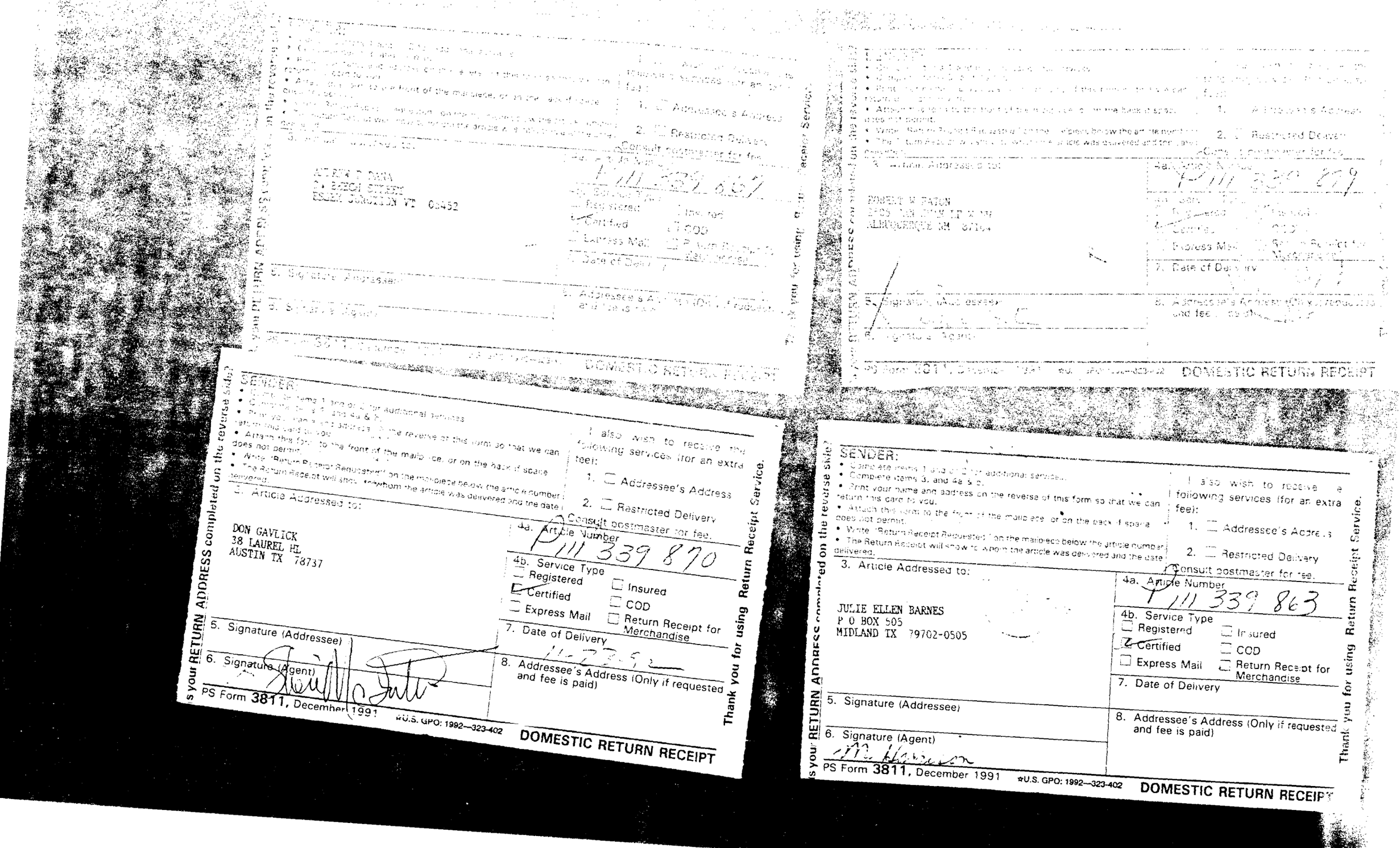
5. Signature — Address X

6. Signature — Agent X

7. Date of Delivery 11-24-92

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

PS Form 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT



SENDER:
• Complete items 1 and/or 2 for additional services.
• Complete items 3, and 4a & b.
• Print your name and address on the reverse of this form so that we can return this card to you.
• Attach this form to the front of the mailpiece, or on the back if space does not permit.
• Write "Return Receipt Requested" on the mailpiece below the article number.
• The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

DON GAVLICK
38 LAUREL HL
AUSTIN TX 78737

4a. Article Number
P 111 339 870

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

5. Signature (Addressee)

6. Signature (Agent)

7. Date of Delivery
11-22-93

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

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 *U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

SENDER:
• Complete items 1 and/or 2 for additional services.
• Complete items 3, and 4a & b.
• Print your name and address on the reverse of this form so that we can return this card to you.
• Attach this form to the front of the mailpiece, or on the back if space does not permit.
• Write "Return Receipt Requested" on the mailpiece below the article number.
• The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

JULIE ELLEN BARNES
P O BOX 505
MIDLAND TX 79702-0505

4a. Article Number
P 111 339 863

4b. Service Type
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

5. Signature (Addressee)

6. Signature (Agent)

7. Date of Delivery

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

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 *U.S. GPO: 1992—323-402 DOMESTIC RETURN RECEIPT

PADILLA & SNYDER
ATTORNEYS AT LAW
200 W. MARCY, SUITE 216
P.O. BOX 2523
SANTA FE, NEW MEXICO 87504-2523

FACSIMILE: (505) 988-7592
TELEPHONE: (505) 988-7577

December 4, 1992

HAND-DELIVERED

David Catanach
Hearing Examiner
Oil Conservation Division
State Land Office Building
Santa Fe, New Mexico 87501

Re: Siete Oil & Gas Corporation
Cases No. 10618 and 10619

Dear Mr. Catanach:

Enclosed are two corrected copies of Exhibit 1 which were presented at yesterday's hearing.

Please let me know if you require additional information or it we can be of further assistance.

Very truly yours,

Ernest L. Padilla

ELP/pmc
Enclosure
xc: Siete Oil & Gas Corporation

PADILLA & SNYDER
ATTORNEYS AT LAW
200 W. MARCY, SUITE 216
P.O. BOX 2523
SANTA FE, NEW MEXICO 87504-2523
FACSIMILE: (505) 988-7592
TELEPHONE: (505) 988-7577

November 12, 1992

CERTIFIED MAIL

TO: ALL WORKING AND ROYALTY INTEREST OWNERS
WITHIN PROPOSED UNIT BOUNDARIES
(See attached list)

Case 10618

RE: Application of Siete Oil & Gas Corporation for Statutory Unitization, Eddy County, New Mexico

Pursuant to the Rules and Regulations of the General Rules of the Oil Conservation Division of New Mexico, notice is given of the above-referenced application. You may protest the enclosed application by appearing at the hearing of this application which will be heard on December 3, 1992 beginning at the hour of 8:15 a.m., at the offices of the Oil Conservation Division, State Land Office Building, 310 Old Santa Fe Trail, Santa Fe, New Mexico.

Very truly yours,

Ernest L. Padilla

ELP:pmc
Enclosures as stated
xc: Siete Oil & Gas Corporation

WORKING INTEREST

708 VISTA PARKWAY
ROSWELL NM 88201

1107 NORTH KENTUCKY
ROSWELL NM 88202-5024

1001 BE BERNARD
ROSWELL NM 88201

DEAN KINSOLVING
P O BOX 325
TATUM NM 88267

LANWEST
215 W 100 SOUTH
SALT LAKE CITY UT 84101

LARUE & MUNCY
P O BOX 470
ARTESIA NM 88210-0470

ROBERT J LEONARD
P O BOX 400
ROSWELL NM 88202-0400

MCKAY OIL CORPORATION
P O BOX 2014
ROSWELL NM 88202-2014

MANZANO OIL CORPORATION
P O BOX 2107
ROSWELL NM 88202-2107

MARINE & GAS INTERNATIONAL INC
436 PETROLEUM BUILDING
ROSWELL NM 88201

MERIDIAN OIL
P O BOX 51810
MIDLAND TX 79710-1810

MONARCH OIL & GAS, INC.
436 PETROLEUM BUILDING
ROSWELL NM 88201

PATRICK J MORELLO
598 WOODLAND DRIVE
PADUCAH KY 42001

FRANK S & ROBIN L MORGAN
P O BOX 1
ARTESIA NM 88211-0001

MOUNTAIN APPLE COMPANY
P O BOX 386
ALAMOGORDO NM 88310

MICHAEL J MORTON III
688 COUNTY STREET
NEW BEDFORD MA 02740

PERMIAN BASIN INVESTMENT
648 PETROLEUM BUILDING
ROSWELL NM 88201

PERMIAN HUNTER CORPORATION
215 W 100 SOUTH STREET
SALT LAKE CITY UT 84101

PETROLUX INC
P O BOX 569
ROSWELL NM 88202-0569

PIERCE IRREVOCABLE TRUST #2
6201 UPTOWN BLVD NE #201
ALBUQUERQUE NM 87110

POLO OIL & GAS COMPANY
P O BOX 699
ROSWELL NM 88202-0699

RADMACHER FAMILY TRUST
4294 N LIMBERLOST PLACE
TUCSON AZ 85705

RED OAK CATTLE COMPANY
P O BOX 998
ARDMORE OK 73402

DAMON RICHARDS
P O BOX 550
ROSWELL NM 88202-0550

JOSE E RODRIGUEZ
10418 CRESCENT MOON DRIVE
HOUSTON TX 77064

SANTA FE ENERGY RESOURCES INC
500 WEST ILLINOIS SUITE 500
MIDLAND TX 79701

JAMES L. SCHULTZ
809 TWIN DIAMOND ROAD
ROSWELL NM 88201

SCOTT EXPLORATION INC
648 PETROLEUM BUILDING
ROSWELL NM 88201

WARREN C SCOTT
648 PETROLEUM BUILDING
ROSWELL NM 88201

GENE SHUMATE
3002 DIAMOND A
ROSWELL NM 88201

SIETE OIL & GAS CORPORATION
P O BOX 2523
ROSWELL NM 88202-2523

MARY G SOLDOW
P O BOX 1627
SANTA FE NM 87504-1627

SOUTHLAND ROYALTY COMPANY
P O BOX 51810
MIDLAND TX 79710-1810

[illegible] PETROLEUM BUILDING
ROSWELL NM 88201

[illegible] INDIAN SCHOOL ROAD NE APT 302
ALBUQUERQUE NM 87110

P O BOX [illegible]
SANTA FE NM 87502-6699

BYRON A BACHSCHMID
2508 YORKTOWN
HOUSTON TX 77056

PETE T & GAIL BALOG
3822 LOCARNO DRIVE
ANCHORAGE AK 99508

VIOLA S BARNES
P O BOX 714
MIDLAND TX 79702-0714

LAURIE B BARR
P O BOX 8098
ASHEVILLE NC 28814-8098

HARRY D BLAKE JR
1000 MOORE AVENUE
ROSWELL NM 88201

BLAKEFIELD ENERGY COMPANY
P O BOX 2725
ROSWELL NM 88202-2725

BORICA OIL INC
P O DRAWER H
FORT SUMNER NM 88119

DUANE E BROWN
1313 MARQUETTE PL NE
ALBUQUERQUE NM 87106

L NEIL & MARILYN BURCHAM
114 KAY LANE
LAS CRUCES NM 88005

T K CAMPBELL
P O BOX 846
LAS CRUCES NM 88004-0846

THOMAS K CAMPBELL II
P O BOX 1018
ROSWELL NM 88202-1018

S H CAVIN
P O BOX 1125
ROSWELL NM 88202-1125

SEALY H CAVIN JR
P O BOX 1125
ROSWELL NM 88202-1125

CONOCO INC
10 DESTA DRIVE WEST
MIDLAND TX 79705

ROBERT L DALE
15419 PEACH HILL ROAD
SARATOGA CA 95070

ANDREW P DANA
24 BEECH STREET
ESSEX JUNCTION VT 05452

AUBREY L OR BETTY JO DUNN SR
P O BOX 386
ALAMOGORDO NM 88310

ROBERT W EATON
2505 SAN JUAN LP W NW
ALBUQUERQUE NM 87104

MILDRED RUTH FERGUSON
P O BOX 532
CROWELL TX 79227

DON GAVLICK
38 LAUREL HL
AUSTIN TX 78737

CHARLES GREER
P O BOX 1627
SANTA FE NM 87504-1627

NATHAN C GREER
P O BOX 1627
SANTA FE NM 87504-1627

MARVIN C GROSS
P O BOX 358
ROSWELL NM 88202-0358

HANAGAN OIL PROPERTIES INC
P O BOX 430
ROSWELL NM 88202-0430

HANAGAN PETROLEUM CORPORATION
P O BOX 1737
ROSWELL NM 88202-1737

HANSON OPERATING COMPANY INC
P O BOX 1515
ROSWELL NM 88202-1515

STUART D HANSON
P O BOX 723
ROSWELL NM 88202-0723

GERALD & EMMA HARRINGTON TRUST
P O BOX 216
ROSWELL NM 88202-0216

WILLIAM & LORETA HUNKER TRUST
327 EAST DEVARGAS
SANTA FE NM 87501

JIM IKARD
P O BOX 331
CARLSBAD NM 88220-0331

3302 ST JAMES CT
TYLER TX 75701

700 PETROLEUM BUILDING
ROSWELL NM 88201

P O BOX 668
CARLSBAD NM 88221

UMC PETROLEUM CORPORATION
1200 LOUISIANA SUITE 1400
HOUSTON TX 77002

BILLY G UNDERWOOD JR
1000 LOUISIANA SUITE 6770
HOUSTON TX 77002

JACK V WALKER
P O BOX 10-2256
ANCHORAGE AK 99510

WARREN EMC
P O BOX 7250
ALBUQUERQUE NM 87194-7250

WINN INVESTMENTS INC
706 BRAZOS STREET
ROSWELL NM 88201

LORI SCOTT WORRALL
648 PETROLEUM BUILDING
ROSWELL NM 88201

CHARLES WORRELL
P O BOX 5608
ROSWELL NM 88202-5608

ROYALTY INTEREST

[illegible]
[illegible] MAIN
MIDLAND TX [illegible]

MARY HUDSON ALD
303 MAIN STREET SUITE 302
FORT WORTH TX 76102

PETE T & GAIL BALES
2922 LOCKHILO DRIVE
ANCHORAGE AK 99503

J CLEM BARNES ESTATE
P O BOX 673
MIDLAND TX 79702-0673

JULIE ELLEN BARNES
P O BOX 505
MIDLAND TX 79702-0505

STEVE C BARNES
P O BOX 505
MIDLAND TX 79702-0505

BLACKSTONE ENERGY CORPORATION
P O BOX 1715
MIDLAND TX 79702-1715

HARRY D BLAKE JR
1000 MOORE AVENUE
ROSWELL NM 88201

DUANE E BROWN
1313 MARQUETTE PL NE
ALBUQUERQUE NM 87106

KATHLEEN BULLARD
P O BOX 182
ROSWELL NM 88202-0182

C R BURCH
P O BOX 10505
MIDLAND TX 79702-0505

CAL-MON OIL COMPANY
P O BOX 2066
MIDLAND TX 79702-2066

A T CARLETON
P O BOX 293
MIDLAND TX 79702-0293

S H CAVIN
P O BOX 1125
ROSWELL NM 88202-1125

SEALY H CAVIN JR
P O BOX 1125
ROSWELL NM 88202-1125

CORONET TRADING CORPORATION
P O BOX 218
MIDLAND TX 79702-0218

ANDREW P DANA
24 BEECH STREET
ESSEX JUNCTION VT 05452

RODERICK & MARIAN DAVIS
2803 WEST 9TH STREET
LAWRENCE KS 66049

DOROTHY D DUNLAP
7267 STEFONI
DALLAS TX 75225

FORREST DUNLAP III
7267 STEFONI
DALLAS TX 75225

ROBERT W EATON
2505 SAN JUAN LF W NW
ALBUQUERQUE NM 87104

WILLIAM C EILAND
P O DRAWER 11228
MIDLAND TX 79702-1228

ESTORIL PRODUCING CORPORATION
INDEPENDENCE PLAZA SUITE 1600
MIDLAND TX 79701

MILDRED RUTH FERGESON
P O BOX 532
CROWELL TX 79227

GARON GAGLE
2202 AVENUE Q
LUBBOCK TX 79401

DON GAVLICK
38 LAUREL HL
AUSTIN TX 78737

MARVIN C GROSS
P O BOX 358
ROSWELL NM 88202-0358

HANAGAN PETROLEUM CORPORATION
P O BOX 1737
ROSWELL NM 88202-1737

ALAN HANNIFIN
P O BOX 2588
ROSWELL NM 88202-2588

JOHN H HENDRIX
223 W WALL SUITE 525
MIDLAND TX 79701

J H HERD
P O BOX 130
MIDLAND TX 79702-0130

HILL REVOCABLE TRUSTS
7708 ALBERT AVENUE
FORT WORTH TX [illegible]

JOE S HILL
P O BOX 1568
CEDAR PARK TX [illegible]

[illegible] TX 79701

FORT WORTH TX 76102-4612

FORT WORTH TX 76102

JOSEPHINE T HUDSON
616 TEXAS STREET
FORT WORTH TX 76102-4612

ALAN JOCHIMSEN
2402 CIMARRON
MIDLAND TX 79705

NANCY PUFF JONES TRUST
1320 LAKE STREET
FORT WORTH TX 76102

THOMAS HILL PUFF JONES TRUST
1320 LAKE STREET
FORT WORTH TX 76102

LANDWEST
215 W 100 SOUTH
SALT LAKE CITY UT 84101

DELMAR HUDSON LEWIS
616 TEXAS STREET
FORT WORTH TX 76102

MOLAY OIL CORPORATION
P O BOX 2014
ROSWELL NM 88202-2014

CHRISTINE MALLAMS
P O BOX 505
MIDLAND TX 79702-0505

JACK MARKHAM
1500 BROADWAY SUITE 1212
LUBBOCK TX 79401

MARSHALL & WINSTON INC
P O BOX 50880
MIDLAND TX 79710-0880

STEPHEN T MITCHELL
648 PETROLEUM BUILDING
ROSWELL NM 88201

MOBIL PRODUCING TX & [illegible] INC
P O BOX 2080
DALLAS TX 75221-2080

MONAGAN LIVING TRUST
P O BOX 2066
MIDLAND TX 79702-2066

MONARCH OIL & GAS INC
436 PETROLEUM BUILDING
ROSWELL NM 88201

GRANK S & ROBIN L MORGAN
P O BOX 1
ARTESIA NM 88211

V ELAINE MURPHY
P O BOX 505
MIDLAND TX 79702-0505

PATRICK W ARTHUR PRODUCTION CO
P O BOX 271668
HOUSTON TX 77277

PERMIAN BASIN INVESTMENT CORPORATION
648 PETROLEUM BUILDING
ROSWELL NM 88201

PERMIAN HUNTER CORPORATION
215 W 100 SOUTH STREET
SALT LAKE CITY UT 84101

BRUCE J PIERCE
6201 UPTOWN BLVD NE #201
ALBUQUERQUE NM 87110

POLO OIL & GAS COMPANY
P O BOX 699
ROSWELL NM 88202-0699

RADMACHER FAMILY TRUST
4294 N LIMBERLOST PLACE
TUCSON AZ 85705

ELIZABETH ANN RAMSLAND
P O BOS 10505
MIDLAND TX 79702-0505

JANE BARNES RAMSLAND
P O BOX 10505
MIDLAND TX 79702-0505

R J RAMSLAND JR
P O BOS 10505
MIDLAND TX 79702-0505

RUSSELL J RAMSLAND SR
P O BOX 10505
MIDLAND TX 79702-0505

RED OAK CATTLE COMPANY
P O BOX 998
ARDMORE OK 73402

DAMON RICHARDS
P O BOX 550
ROSWELL NM 88202-0550

RANDOLPH M RICHARDSON
P O BOX 2423
ROSWELL NM 88202-2423

RONADERO COMPANY INC
P O BOX 430
ROSWELL NM 88202-0430

MIDLAND TX 7[illegible]

ROSWELL NM 88201

ROSWELL NM 88201

WARREN C SCOTT
648 PETROLEUM BUILDING
ROSWELL NM 8820[illegible]

SIETE OIL & GAS CORPORATION
P O BOX 2523
ROSWELL NM 88202-2523

STAN H STOCKER
3302 ST JAMES CT
TYLER TX 75701

STRATA PRODUCTION COMPANY
648 PETROLEUM BUILDING
ROSWELL NM 8820[illegible]

SYNCLINE PARTNERSHIP
3301 OAKDALE FOREST ROAD
EDMOND OK 73013

JACK V & EDNA MAE WALKER
P O BOX10-2256
ANCHORAGE AK 99510

ESTATE OF TIM C VANTY
2040 LAKESIDE DRIVE SE
GRAND RAPIDS MI 49506

WARREN INC
P O BOX 7250
ALBUQUERQUE NM 87194

ANNA MAE WELBORN TRUST
1500 BROADWAY SUITE 1212
LUBBOCK TX 79401

J M WELBORN
1500 BROADWAY SUITE 1212
LUBBOCK TX 79401

WINN INVESTMENTS INC
706 BRAZOS STREET
ROSWELL NM 88201

LORI SCOTT WORRALL
648 PETROLEUM BUILDING
ROSWELL NM 88201

ADRIENNE WYNN 1985 TRUST
8111 PRESTON ROAD SUITE 811
DALLAS TX 75225

C F WYNN
P O BOX 6332
HOUSTON TX 77265

SHIRLEY B WYNN
5949 SHERRY LANE SUITE 510 LB #100
DALLAS TX 75225

SLEEPY WYNN
8111 PRESTON ROAD SUITE 811
DALLAS TX 75225

GERALDINE L ZOLLER
P O BOX 8917
HORSESHOE BAY, TX 78654

STATE OF NEW MEXICO
DEPARTMENT OF ENERGY AND MINERALS
OIL CONSERVATION DIVISION

RECEIVED
NOV 1 1989
OIL CONSERVATION DIVISION

APPLICATION OF SIETE OIL & GAS CORPORATION FOR STATUTORY UNITIZATION, PARKWAY DELAWARE UNIT, EDDY COUNTY, NEW MEXICO

NO. _____

APPLICATION

SIETE OIL & GAS CORPORATION ("Siete") hereby applies to the New Mexico Oil Conservation Division for an order pursuant to the New Mexico Statutory Unitization Act (70-7-1 through 70-7-21 N.M.S.A. 1978) providing for the unitized management, operation and further development of the area and formation known as the Parkway Delaware Unit, Eddy County, New Mexico, and in support of its application states:

1. Siete is a New Mexico corporation and is engaged in the business of, among other things, producing and selling oil and gas as defined by the New Mexico Statutory Unitization Act (70-7-1 through 70-7-21 N.M.S.A. 1978, hereinafter referred to as the "Act").

2. The proposed area for which application is made for unitized operations, pursuant to the Act, is known as Parkway Delaware Unit, Eddy County, New Mexico (the "Unit Area"), and consists of 920 acres, more or less, in Eddy County, New Mexico, being more particularly described in

Exhibit "B" attached hereto and incorporated herein by reference. A map of the Unit Area is attached hereto and incorporate herein by reference as Exhibit "A".

3. The "Unitized Formation" shall mean that interval underlying the Unit Area, commonly known as the Parkway Delaware Pool, including fifty (50) feet above and below the upper and lower limits, respectively, of said pool, which is indicated in the electric log of the Osage Federal No. 1, 1980' FSL and 1980' FEL Sec. 35, T19S, R29E Eddy County, New Mexico.

4. The portion of the Unitized Formation included within the Unit Area has been reasonably defined by development.

5. Siete proposes to institute a project for the secondary recovery of oil and gas from the Unitized Formation within the Unit Area.

6. The proposed plan of unitization is embodied in the Unit Agreement, a true and correct copy of which is attached hereto and incorporated herein by reference as Exhibit "C", and said plan is fair, reasonable and equitable.

7. The proposed operating plan covering the manner in which the unit will be supervised and managed and costs allocated and paid as embodied in the Unit Operating Agreement, a true and correct copy of which is attached hereto and incorporated herein by reference as Exhibit "D".

8. Siete projects that the unitized management, operation and further development of the Unitized Formation will increase reserves by approximately 4,525,000 barrels of oil and will improve the producing rate of this reservoir. It is therefore evident that the unitized management, operation and further development of the Unitized Formation is reasonably necessary in order to effectively carry on secondary recovery operations to substantially increase the ultimate recovery of oil and gas from the Unitized Formation within the Unit Area.

9. The method of operation which is proposed in the Unit Operating Agreement is feasible, will prevent waste and will result, with reasonable probability, in the increased recovery of substantially more oil and gas from the Unitized Formation than would otherwise be recovered.

10. The estimated additional costs of conducting unitized operations will not exceed the estimated value of the additional oil and gas to be recovered plus a reasonable profit.

11. The proposed unitization and adoption of the methods of operation embodied in the Unit Operating Agreement will benefit the working interest owners and royalty owners of the oil and gas rights within the Unitized Formation of the Unit Area.

12. Siete has made a good faith effort to secure voluntary unitization within the Unitized Formation of the Unit Area.

13. Pursuant to Division rules, a copy of this application was mailed by certified mail, return-receipt requested, to all parties listed on Exhibit "E" notifying them of the hearing set for December 3, 1992.

14. The participation formula contained in the Unit Agreement allocates the produced and saved unitized hydrocarbons to the separately owned tracts in the Unit Area on a fair, reasonable and equitable basis, and protects the correlative rights of all owners of interest within the Unit area.

15. The statutory unitization of the Unitized Formation within the Unit Area in accordance with the plan embodied in the Unit Agreement and Unit Operating Agreement will prevent waste and protect correlative rights.

WHEREFORE, Siete Oil & Gas Corporation respectfully requests that this application be set for hearing before the Oil Conservation Division at the earliest practicable date and that the Division enter its order approving the Unit Agreement and Unit Operating Agreement and providing for the unitized management, operation and further development of the Unitized Formation and the Unit Area in accordance with the Act.

Respectfully submitted,

PADILLA & SNYDER

By: _____
Ernest L. Padilla
Post Office Box 2523
Santa Fe, New Mexico 87504
(505) 988-7577

Attorneys for Siete Oil & Gas Corporation

JIM BACA
COMMISSIONER

State of New Mexico

OFFICE OF THE

Commissioner of Public Lands

Santa Fe

10618
Case No

P.O. BOX 1148
SANTA FE, NEW MEXICO 87504-1148

August 20, 1992

Slete Oil and Gas Corporation
P. O. Box 2523
Roswell, New Mexico 88202

Attn: Mr. Robert Lee

Re: Proposed Parkway Delaware Unit
Eddy County, New Mexico

Dear Mr. Lee:

This office has reviewed the additional data submitted with your letter of August 13, 1992 and the unexecuted copy of unit agreement for the proposed Parkway Delaware Unit, Eddy County, New Mexico. This agreement meets the general requirements of the Commissioner of Public Lands and has this date granted you preliminary approval as to form and content.

Preliminary approval shall not be construed to mean final approval of this agreement in any way and will not extend any short term leases until final approval and an effective date are given.

When submitting your agreement for final approval, please submit the following:

1. Final approval will be conditional upon our understanding that no fresh water will be used in this operation. (water containing 10,000 milligrams per liter or less of total dissolved solids).

2. Initial Plan of Operation.

3. Re-Designation of well names and numbers.

4. Application for final approval by the Commissioner setting forth the tracts that have been committed and the tracts that have not been committed.

5. All ratifications from Lessees of Record and Working Interest Owners. All signatures should be acknowledged before a Notary. One set must contain original signatures.

6. Certificate of Determination by the Bureau of Land Management.

7. Order of the New Mexico Oil Conservation Division. Our approval will be conditioned upon subsequent favorable approval by the New Mexico Oil Conservation Division and the Bureau of Land Management.

8. Two copies of the Unit Operating Agreement.

9. Two copies of the Unit Agreement including Exhibits "A", "B", and "C". The Exhibits as submitted in your preliminary draft will be acceptable.

If you have any questions, or if we may be of further help, please contact Pete Martinez at (505) 827-5791.

Very truly yours,

JIM BACA
COMMISSIONER OF PUBLIC LANDS

BY: Jami Bailey for FOP
FLOYD O. PRANDO, Director
Oil/Gas and Minerals Division
(505) 827-5744
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cc: Reader File
OCD-Santa Fe
BLM-Roswell Attn: Mr. Armando Lopez

State of New Mexico

OFFICE OF THE

Commissioner of Public Lands

Santa Fe

JIM BACA
COMMISSIONER

P.O. BOX 1148
SANTA FE, NEW MEXICO 87504-1148

July 13, 1992

Siete Oil and Gas Corporation
P. O. Box 2523
Roswell, New Mexico 88202

Attn: Mr. Robert Lee

Re: Proposed Parkway Delaware Unit
Eddy County, New Mexico

Dear Mr. Lee:

This office is in receipt of your application letter of June 23, 1992 together with an engineering and geologic report for the proposed Parkway Delaware Field unit area, Eddy County, New Mexico

Before preliminary approval can be granted by the Commissioner of Public Lands, we would like the following additional data submitted.

1. Exhibit "B" should show the Lessees of Record, Working Interest Owners, and Overriding Royalty Owners for each tract;

2. Please submit a table confirming the tract participation factors as reflected in your Exhibit "C";

3. The initial form of unit agreement and the initial plan of operation;

4. Re-Designation of all well names and numbers;

5. The filing fee for a unit agreement is thirty dollars ($30.00) for every section or partial section thereof;

6. On Exhibit "B", Tract No. 1, our records reflect that the Halcon State Well No. 2 is located in the SW¼SE¼ Sec. 26-19S-29E. Please change your records to reflect Tract No. 1 as being in Section 26 not Section 27;

7. On Exhibit "C", Tract No. 1, please correct the description from Section 27 to Section 26;

8. On Exhibit "A", Township 19 South, Range 29 East, the labeling of the section numbers should be corrected to read Section 25 instead of Section 26, Section 26 instead of Section 27 and Section 27 instead of Section 28 as noted on your copy;

7. On Exhibits "A" and "B", Tract No. 6, please describe this tract as Lot 2, Sec. 2-20S-29E. The acreage should also be changed to reflect 40.77 acres. This change will affect the total acreage in the unit and the acreage of State Trust Lands in the unit;

8. According to page iii of your engineering study, the B sand has nearly as much oil in place as the C sand, yet it appears that there are no real plans to recover this. Please clarify your plans for the B sand.

Please also be advised that in all future reviews for waterflood unit approvals, the State Land Office has a new policy barring the use of fresh water in State waterflood units except where the operator can demonstrate that the use of salt water poses an excessive technological or financial burden; If you plan to use fresh water in your proposed unit, the following specific information should also be provided:

A. Laboratory analyses of water compatibility tests (fresh vs. salt water);

B. Reservoir analyses for swelling clays and soluble salts;

C. Estimate of monthly makeup water required for operations;

D. Location and depth of area fresh water supplies and aquifer formation name;

E. Location and depth of area salt water wells or quantities of produced water available for injection;

F. Treatment/pumping/delivery costs of fresh water vs. salt water;

G. Total cost of fresh water vs. treated water compared to total cost of project;

H. Any other factors specific to the exception request;

If you have any questions, or if we may be of further help, please contact Pete Martinez at (505) 827-5791.

Very truly yours,

JIM BACA
COMMISSIONER OF PUBLIC LANDS

BY: Floyd O Prando

FLOYD O. PRANDO, Director
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