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

IN THE MATTER OF THE APPLICATION	:	
OF SEELY OIL COMPANY TO EXPAND	:	CASE NO. 12740
THE VERTICAL LIMITS OF THE	:	
UNITIZED FORMATION FOR THE	:	
CENTRAL EK QUEEN UNIT,	:	
LEA COUNTY, NEW MEXICO	:	

CERTIFICATE OF MAILING AND COMPLIANCE WITH RULE 1207

In accordance with Division Rule 1207, I hereby certify that on September 10, 2001,

correspondence transmitting copies of the application filed in and providing notice of the

above-referenced case, were mailed to the following offset operators:

State of New Mexico Commissioner of Public Lands Attn: Mr. Ray Powell P.O. Box 1148 Santa Fe, NM 87504-1148

Armstrong Energy Corporation P.O. Box 1973 Roswell, NM 88202

Patricia Dean Boswell, Trustee 1320 Lake Street Fort Worth, TX 76102

Burnett Oil Co, Inc. Burnett Plaza, Ste 1500, Unit #9 801 Cherry Street Fort Worth, TX 76102-6881

New Mexico Oil Conservation Division SEELY OIL COMPANY Case No. 12740 - 10/18/01 Examiner Michael Stogner EXHIBIT NO. 11 John E. Casey P.O. Box 10533 Midland, TX 79702

CEB Oil Company 1320 Lake Street Fort Worth, TX 76102

Merlyn W. Dahlin 3220 North Freeway Fort Worth, TX 76111

Shirley Davis 5022 South Point Dr. Arlington, TX 76107

EAB Oil Company 1320 Lake Street Fort Worth, TX 76102

Express Air Drilling, Inc. 3838 Oak Lawn Ave. Two Turtle Creek Village Dallas, TX 75219-4516

Avis J. Fletcher P.O. Box 852 Artesia, NM 88211-0852

Dr. Mary Moore Free Exec. Estate of Da Free, Jr. 4356 Edmondson Dallas, TX 75205

Jeannine B. Googins P.O. Box 2591 Midland, TX 79701

James E. Guy P.O. Box 100 Artesia, NM 88211

Michael J. Havel 7607 Chalkstone Dallas, TX 75248 David Henderson 815 W. 10th Street Fort Worth, TX 76102

Bobby Hicks 15 Stutz Ct. Midland, TX 79705

Houston & Emma Hill Trust Estate 500 W. 7th St., Suite 1802 Fort Worth, TX 76102-4740

J.T. Jackson P.O. Box 100 2302 Sierra Vista Artesia, NM 88211

John P. Oil Company 1320 Lake Street Fort Worth, TX 76102

Marc H. Lowrance, Jr. P.O. Box 9016 Fort Worth, TX 76147

J.C. Maddux 3425 Riverstone Way, #913 Fort Worth, TX 76116

Thomas J. Maddux 3425 Riverstone Way, #913 Fort Worth, TX 76116

Marathon Oil Company P.O. Box 890882 Dallas, TX 75289-0882

McInnes Resources Company P.O. Box 527 Artesia, NM 88211-0527

Bradley A. Pomeroy 7514 E. Hinsdale Ave. Englewood, CO 80112 **Hand Delivered**

PVB Oil Company 1320 Lake Street Fort Worth, TX 76102

•

John Saleh 502 North 1st Street Lamesa, TX 79331

Bill M. Scales 4709 Oak Trail Fort Worth, TX 76109-1804

C.W. Seely 815 W. 10th Street Fort Worth, TX 76102

Linda W. Smith P.O. Box 9112 Midland, TX 79708-9112

Thomas R. Smith 1409 S. Co. Rd. 1130 Midland, TX 79706

C.W. & F.T. Stumhoffer P.O. Box 100416 Fort Worth, TX 76185

SSV&H Associates 815 W. 10th Street Fort Worth, TX 76102

Windell A. Thomason P.O. Box 411 Midland, TX 79702-0411

J. Cleo Thompson 325 N. St. Paul, Suite 4300 Dallas, TX 75201-3993

WES-TEX Drilling Company, L.P. P.O. Box 3739 Abilene, TX 79604 Wolfberry Royalty, Ltd. P.O. Box 35287 Dallas, TX 75235-0287

.

as reflected by copies of Return Receipt cards, attached as Exhibit "A" hereto.

Respectfully submitted,

LOSEE, CARSON, HAAS & CARROLL, P.A.

By:

Ernest L. Carroll P. O. Box 1720 Artesia, New Mexico 88211-1720 (505)746-3505

Attorneys for Yates Petroleum Corp.

STATE OF NEW MEXICO)

: ss. COUNTY OF EDDY)

SUBSCRIBED AND SWORN TO before me this October 10, 2001.

My commission expires:

06/14/2003

Notary Public

SENDER: COMPLETE THIS SECTION	COMPLETENIISSEGNONORODANA
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature X
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State of New Mexico Commissioner of Public Lands Attn: Mr. Ray Powell P.O. Box 1148	SEP 1 4 2001
Santa Fe,1NM 87504-1148	3. Service Type Certified Mail C Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
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1. Article Addressed to: Patricia Dean Boswell, Trustee 1320 Lake Street Fort Worth, TX 76102	If YES, enter delivery address below:
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2 Article Number (Conv from service labol)	4. Restricted Delivery? (Extra Fee)
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so that we can return the card to you.	C/Signature
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Burnett Plaza, Ste 1500, Unit	G
801 Cherry Street	3. Service Type
Fort Worth, TX 76102-6881	🖾 Certified Mail 🛛 Express Mail
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John E. Casey	
P.O. Box 10533	
Midland, Tx 79702	
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4356 Edmondson	
4356 Edmondson Dallas, TX 75205	3. Service Type Cartified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

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Artesia, NM 88211	
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	Ar Received by (Please Print Clearly) B Gate of Belivery
1. Article Addressed to: David Henderson 815 W. 10th Street Fort Worth, TX 76102	D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below: □ No
	3. Service Type ^I Certified Mail Registered Insured Mail Lostroited Delivery? (Extra Fee)
2. Article Number (Copy from service label) 7000 1530 0000 1627 4336	
PS Form 3811, July 1999 Domestic Re	turn Receipt 102595-00-M-0952
	and the second
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Deliver Q-(7-c) C. Signature Addresse
1. Article Addressed to:	If YES, enter delivery address below: □ No
Bobby Hicks 15 Stutz Ct. Midland, TX 79705	
	Service Type Solution Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Copy from service label) 7000 1530 0000 1627 4343	
PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0952
 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery CLENDANELS C. Signature X Complexity Addressee
1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Houston & Emma Hill Trust Estate 500 W. 7th St., Suite 1802 Fort Worth, TX 76102	3. Service Type X Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label) 7000 1530 0000 1627 4350	

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. 	A. Received by (Please Print Clearly) B. Date of Denver
Attach this card to the back of the mailpiece, or on the front if space permits.	X Agent
I. Article Addressed to:	D. As delivery address different from item 10
J. T. Jackson	
P.O. Box 100	
2302 Sierra Vista	L
Artesia, NM 88211	3. Service Type
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label) 7000 1530 0000 1627 4381	
S Form 3811, July 1999 Domestic F	Return Receipt 102595-00-M-0952
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A Received by (Flease Print Clearly) B. Date of Deliver
item 4 if Restricted Delivery is desired.	Kent Killatick 9.17
Print your name and address on the reverse so that we can return the card to you.	C. Signature
Attach this card to the back of the mailpiece, or on the front if space permits.	X X X A Addresse
1. Article Addressed to:	 D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
	If FES, enter delivery address below.
John P. Oil Company 1320 Lake Street	
Fort Worth, TX 76102	
	3. Service Type
	Certified Mail Express Mail Registered Return Receipt for Merchandis
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label) 7000 1530 0000 1627 4374	
	Return Receipt 102595-00-M-095
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	an a
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1.2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Received by (Please Print Clearly) B. Date of Deliver
Print your name an address on the reverse	C. Signature
Print your name an address on the reverse to that we can reput the card to you. Attach this card to the back of the mailpiece, or on the front if as the permits.	X/OILCHERCLEROND Addressed
or on the kont if an its permits.	D. Is delivery address different from item 1? Yes
Article Addressed to:	If YES, enter delivery address below: 🛛 No 🔭
Marc H. Lowrance, Jr. R.O. Box 9016	
Fort Worth, TX 76147	
ng kina Ng kina	3. Service Type
	Registered Return Receipt for Merchandise
	Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)

PS:Form 3811, July 1999

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Received by (Please Print Clearly) B. Date of Delivery
 Attach this card to the back of the mailpiece, or on the front if space permits. 	C. Signature Agent
 Article Addressed to: J.C. Maddux 3425 Riverstone Way, #913 Fort Worth, TX 76116 	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
2. Article Number (Copy from service label) 7000 1530 0000 1627 4404	4. Restricted Delivery? (Extra Fee)
	eturn Receipt 102595-00-M-0952
SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete	A. Received by (Please Print Clearly) B. Date of Delivery
 item 4 if Restricted Delivery-is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	C. Signature X. Schurm, Michaeling Addressee D. Is delivery address different from item 12 Yes
1. Article Addressed to:	D. Is delivery address different from item 1? U Yes If YES, enter delivery address below: No
Thomas J. Maddux 3425 Riverstone Way, #913 Fort Worth, TX 76116	
·	3. Service Type ☑ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Copy from service label) 7000 1530 0000 1627 4398	
PS Form 3811, July 1999 Domestic Rel	turn Receipt 102595-00-M-0952
SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery Complete Complete Clearly
 Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	C. Signature
1. Article Addressed to: Marathon Oil Company P.O. Box 890882	If YES, enter delivery address below:
Dallas, TX 75289-0882	3. Service Type
	XXCertified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
2 Acticle Number (Conv from and the labor	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Copy from service label) 7000 1530 0000 1627 4411	

PS Form 3811, July 1999

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Received by (Please Print Clearly) B. Date of Delivery
 a Hint your mane and address of the reverse so that we can return the card to you. Attach this card to the back of the mailpiece or on the front if space permits. 	X Agent Addressee
1. Article Addressed to:	D. Is delivery address different from item 12/ D Yes If YES, enter delivery address below:
Bradley A. Pomeroy 7514 E. Hinsdale Ave. Englewood, CO 80112	
	3. Service Type
2. Article Number (Copy from service label)	4. Restricted Delivery? (Extra Fee) Yes Yes
7000 1530 0000 1627 4428 PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0952
	الا الم الم الم الم الم الم الم الم الم
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, 	A. Received by (Plasser Frint Clearly) B. Date of Delivery A. P. A. H. A. P. A. G. A. C. Signature, X. A.
or on the front if space permits.	D. Is delivery address different from item 1?
1. Article Addressed to: PVB Oil Company 1320 Lake Street Fort Worth, TX 76102	If YES, enter delivery address below:
	3. Service Type ▲ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label) 7000 1530 0000 1627 4435	
PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0952
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Delivery M. Kinnison 9-13-01 C. Signature X. M. Kinnison 🛛 Agent Addressee
1. Article Addressed to:	 D. Is delivery address different from item 1? If YES, enter delivery address below: No
John Saleh 502 N. 1st Street Lamesa, TX 79331	
	3. Service Type ▲ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
2 Article Number (Conv from convict 1-1-7)	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label) 7000 1530 0000 1627 4442	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Delivery A. R. 5. B. L. L. M. SCALESG-/3 C. Signature X M. Bull M. Scher Agent Addressee
1. Article Addressed to: Bill M. Scales 4709 Oak Trail Fort Worth, TX 76109-1804	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
	 3. Service Type 3. Certified Mail Express Mail Registered Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Copy from service label) 7000 1530 0000 1627 4459	
	eturn Receipt 102595-00-M-0952
 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: C.W. Seely 815 W. 10th Street Fort Worth, TX 76102. 	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery G-1 <
2. Article Number (Copy from service label)	4. Restricted Delivery? (Extra Fee) Yes Yes
7000 1530 0000 1627 4466 PS Form 3811, July 1999 Domestic Ref	turn Receipt 102595-00-M-0952
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Thomas R. Smith 1409 S. Co. Rd. 1130 Midland, TX 79706 	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature Agent Addressee Is delivery address otherent from item 1? Yes If YES, enter delivery address below: No
	3. Service Type ⁽¹⁾ Certified Mail ⁽¹⁾ Registered ⁽¹⁾ Insured Mail ⁽¹⁾ Insured Mail ⁽¹⁾ Restricted Delivery? (Extra Fee) ⁽¹⁾ Yes
2. Article Number (Copy from service label) 7000 1530 0000 1627 4480	1

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SENDER: COMPLETE THIS SECTION	
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Received by (Please Print Clearly) C. W. Srum Hoffic 9-29-0/
 Attach this card to the back of the mailpiece, or on the front if space permits. 	C. Signature X C June Agent Address D. Is delivery address different from item 12 Yes
1. Article Addressed to:	 ☐ D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
C.W. & F.T. Stumhoffer P.O. Box 100416 Fort Worth, TX 76185	
	3. Service Type 3. Certified Mail Express Mail Registered Return Receipt for Merchand Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Copy from service label) 7000 1530 0000 1627 4503	
PS Form 3811, July 1999 Domestic R	Return Receipt 102595-00-M-099
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Received by (Please Print Clearly) B. Bate of Deliver G. Signature 4
 so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	D. Is delivery address different from item 1? Yes
. Article Addressed to:	If YES, enter delivery address below:
SSV&H Associates	
815 W. 10th Street Fort Worth, TX 76102	
	3. Service Type Image: Certified Mail Express Mail Image: Certified Registered Return Receipt for Merchandis Image: Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label) 7000 1530 0000 1627 4497	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
PS Form 3811, July 1999 Domestic Re	
	eturn Receipt 102595-00-M-0952
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery F-full F-full
 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece. 	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Deliv G-14-0 G-14-0 C. Signature G. Agent X A. Monodul/
 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. 	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Delivery C. Signature A. Agent
 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece or on the front if space permits. 	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Deliver C. Signature Image: Colspan="2">Image: Colspan="2" Image: Colspan=
 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece or on the front if space permits. 1. Article Addressed to: Windell A. Thomason P.O. Box 411 	COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) B. Date of Deliver C. Signature Image: Colspan="2">Image: Colspan="2" Image: Colspan=

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, 	A. Received by (Please Print Clearly) B. Date of Delivery. 9/15/01 C. Signature X A. Received by (Please Print Clearly) B. Date of Delivery. 9/15/01
or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item 1?
J. Cleo Thompson 325 N. St. Paul, Ste 4300 Dallas, TX 75201-3993	
	3. Service Type X Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label) 7000 1530 0000 1627 4527	
	eturn Receipt 102595-00-M-0952
	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete items 4 if Restricted Delivery is desired. 	A. Received by (Please Print Clearly) B. Date of Delivery
 Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	C. Signature
1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
WES-TEX Drilling Company, LP P.O. Box 3739 Abilene, TX 79604	
	3. Service Type Image: Certified Mail Express Mail Image: Certified Mail Repress Mail Image: Certified Mail Receipt for Merchandise Image: Certified Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Copy from service label) 7000 1530 0000 1627 4534	
PS Form 3811, July 1999 Domestic R	leturn Receipt 102595-00-M-0952
SENDER: COMPLETE THIS SECTION	
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Received by (Please Print Clearly) B. Date of Deliver
Complete items 1, 2, and 3. Also complete	A. Received by (Please Print Clearly) B. Date of Deliver G. Signature A. Received by (Please Print Clearly) B. Date of Deliver G. Signature Agent Addressee
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, 	A. Received by (Please Print Clearly) B. Date of Deliver G. Signature A. Received by (Please Print Clearly) B. Date of Deliver G. Signature D. Is delivery address different from item 1? Yes
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Deliver G-ZZV C. Signature Agent Addressee
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Wolfberry Royalty, Ltd. P.O. Box 35287 	A. Received by (Please Print Clearly) B. Date of Delivery G-ZZ-0 C. Signature D. Is delivery address different from item 1? Yes

AFFIDAVIT

STATE OF NEW MEXICO) : ss. COUNTY OF EDDY)

I, JAMES E. HAAS, President of MCINNES RESOURCES COMPANY, being duly sworn, on oath, state that I am over the age of 18 years and that I had hand delivered to me McInnes Resources Company's original notice letter together with a copy of Seely Oil Company's Application signed by Ernest L. Carroll, on the 10th day of September, 2001.

DATED this October 10th, 2001.

JAMES E. HAAS

SUBSCRIBED AND SWORN TO before me this October 10th, 2001.

My commission expires: (6-14-03)

Notary Public

