

## NEW MEXICO DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES

CASE NO. 9514

STATE OF NEW MEXICO) ss.  
COUNTY OF SANTA FE )

William F. Carr  
WILLIAM F. CARR

Michael J. Jure  
Notary Public

August 19, 1991

BEFORE EXAMINER STOGNER  
OIL CONSERVATION DIVISION  
0x4 EXHIBIT NO. 5  
CASE NO. 9514 + 9515

EXHIBIT A

Estate of Mrs. Michael Harrell  
c/o Mervin Harrell  
Route 1, Box 142  
Tremont, Mississippi 38876

Apparent Heirs:

Mervin Harrell  
Route 1, Box 142  
Tremont, Mississippi 38876

W. M. Harrell  
207 Lake Street  
Trussville, AL 35173

O. U. Harrell Estate  
c/o Joyce Windham  
115 Woodglen Place  
Brandon, Mississippi 39042  
Heirs:  
Joyce Windham  
Joan Harrell  
Dr. Rebecca Harrell

Vera L. Chism  
Route 1, Box 461  
Fulton, Mississippi 38843

Michele Alverson  
Route 5, Box 91  
Haleyville, AL 35565

Margie H. Pounders  
Route 2, Box 249  
Golden, Mississippi 38847

Enola F. Pounders  
Post Office Box 251  
Haleyville, AL 35565

Estate of Mellie Stanford  
Charles B. Stanford and  
Harold P. Stanford, heirs  
Route 4  
Sulligent, AL 35586

Coleman Jackson  
Route 5, Box 71  
Lawrenceberg, TN 38464

Estate of Edna Davis  
c/o Bill Davis  
Route 1, Box 72  
Bina, AL 35593

Hal Jackson  
Route 11, Box 350  
Jasper, OK 35501

John C. Jackson  
1180 North Pine  
Marshfield, MO 65706

Joseph T. Jackson  
12553 Mantilla Road  
San Diego, CA 92128

H. T. Stanford  
Post Office Box 3392  
Oxford, AL 36201

Dorothy L. Jackson  
Post Office Box 764  
Winter Haven, FL 33884

Estate of Orbery Jackson  
c/o Mrs. Orbery Jackson  
Route 2, Box 97  
Prospect, TN 38477

## NEW MEXICO DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES

CASE NO. 9515

STATE OF NEW MEXICO )  
 ) ss.  
COUNTY OF SANTA FE )

William F. Carr  
WILLIAM F. CARR

Michael Yune  
Notary Public

August 19, 1991

**Apparent Heirs:**

Marvin Harrell  
Route 1, Box 142  
Tremont, Mississippi 38876

W. M. Harrell  
207 Lake Street  
Trussville, AL 35173

O. U. Harrell Estate  
c/o Joyce Windham  
115 Woodglen Place  
Brandon, Mississippi 39042  
Heirs:  
Joyce Windham  
Joan Harrell  
Dr. Rebecca Harrell

Vera L. Chism  
Route 1, Box 461  
Fulton, Mississippi 38843

Michele Alverson  
Route 5, Box 91  
Haleyville, AL 35565

Margie H. Pounders  
Route 2, Box 249  
Golden, Mississippi 38847

Enola F. Pounders  
Post Office Box 251  
Haleyville, AL 35565

Estate of Mellie Stanford  
Charles B. Stanford and  
Harold P. Stanford, heirs  
Route 4  
Sulligent, AL 35586

Coleman Jackson  
Route 5, Box 71  
Lawrenceberg, TN 38464

**ILLEGIBLE**

Estate of Edna Davis  
c/o Bill Davis  
Route 1, Box 72  
Bina, AL 35593

Hal Jackson  
Route 11, Box 350  
Jasper, OK 35501

John C. Jackson  
1180 North Pine  
Marshfield, MO 65706

Joseph T. Jackson  
12553 Mantilla Road  
San Diego, CA 92128

H. T. Stanford  
Post Office Box 3392  
Oxford, AL 36201

Dorothy L. Jackson  
Post Office Box 764  
Winter Haven, FL 33884

Estate of Orbery Jackson  
c/o Mrs. Orbery Jackson  
Route 2, Box 97  
Prospect, TN 38477

CAMPBELL & BLACK, P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Estate of Mrs. Michael Harrell  
c/o Mervin Harrell  
Route 1, Box 142  
Tremont, Mississippi 38876

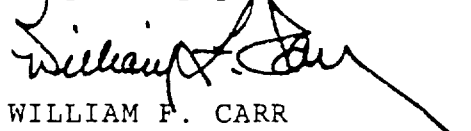
Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico

To Whom it May Concern:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

This application has been set for hearing before a Division Examiner on October 26, 1988. You are not required to attend this hearing, but as an owner of an interest that may be subject to pooling, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging this application at a later date.

Very truly yours,

  
WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

**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 boxes for additional services requested.

1. <input checked="" type="checkbox"/> Show to whom delivered, date, and addressee's address.		2. <input type="checkbox"/> Restricted Delivery.	
3. Article Addressed to: Estate of Mrs. Michael Harrell c/o Mervin Harrell Rt. 1, Box 142 Tremont, Mississippi 38876		4. Article Number: <u>LP 784 192 780</u>	
5. Signature - Addressee <i>X- Mervin Harrell</i>		Type of Service: <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD	
6. Signature - Agent <i>X</i>		Always obtain signature of addressee or agent and DATE DELIVERED.	
7. Date of Delivery <u>10-8-88</u>		8. Addressee's Address (ONLY if requested and fee paid)	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 784 192 780  
 RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
 NOT FOR INTERNATIONAL MAIL  
 (See Reverse)

Sent to c/o Mervin Harrell Est. of Mrs. Michael Harrell	
Street and No. Rt. 1, Box 142	
P.O., State and ZIP Code Tremont, Miss 38876	
Postage	\$ <u>1.45</u>
Certified Fee	\$ <u>.85</u>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	\$ <u>.90</u>
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <u>2.20</u>
Postmark or Date <u>October 4, 1988</u>	

PS Form 3800, June 1985

CAMPBELL & BLACK, P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Mervin Harrell  
Route 1, Box 142  
Tremont, Mississippi 38876

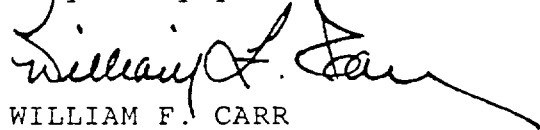
Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico.

Dear Mr. Harrell:

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Very truly yours,



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

**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. <input checked="" type="checkbox"/> Show to whom delivered, date, and addressee's address.		2. <input type="checkbox"/> Restricted Delivery.	
3. Article Addressed to: Mervin Harrell Rt. 1, Box 142 Tremont, Mississippi 38876		4. Article Number P 784 192 790	
5. Signature - Addressee <i>Mervin Harrell</i>		Type of Service: <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> COD <input type="checkbox"/> Express Mail	
6. Signature - Agent X		Always obtain signature of addressee or agent and DATE DELIVERED.	
7. Date of Delivery 10-8-88		8. Addressee's Address (ONLY if requested and fee paid)	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 784 192 790  
 RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
 NOT FOR INTERNATIONAL MAIL  
 (See Reverse)

Sent to	
Mervin Harrell	
Street and No.	
Rt. 1, Box 142	
P.O., State and ZIP Code	
Tremont, Miss 38876	
Postage	\$ 45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.20
Postmark or Date	
October 4, 1988	

PS Form 3800, June 1985

CAMPBELL & BLACK, P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
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GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

W. M. Harrell  
207 Lake Street  
Trussville, AL 35173

Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico.

Dear Mr. Harrell:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

This application has been set for hearing before a Division Examiner on October 26, 1988. You are not required to attend this hearing, but as an owner of an interest that may be subject to pooling, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging this application at a later date.

Very truly yours,



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

**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 boxes for additional service(s) requested.

1. <input checked="" type="checkbox"/> Show to whom delivered, date, and addressee's address.		2. <input type="checkbox"/> Restricted Delivery.	
3. Article Addressed to: W. M. Harrell 207 Lake Street Trussville, AL 35173		4. Article Number P 784 192 791	
5. Signature — Addressee <i>W. M. Harrell</i>		Type of Service: <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD	
6. Signature — Agent X		Always obtain signature of addressee or agent and DATE DELIVERED.	
7. Date of Delivery X		8. Addressee's Address (ONLY if requested and fee paid) TRUSSVILLE, AL 35173 OCT 8 1988 USPS	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 784 192 791  
 RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
 FOR INTERNATIONAL MAIL  
 (See Reverse)

Sent to W. M. Harrell	
Street and No. 207 Lake Street	
P.O. State and ZIP Code Trussville, AL 35173	
Postage	\$ .45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.20
Postmark or Date October 4, 1988	

PS Form 3800, June 1985

CAMPBELL & BLACK, P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

O. U. Harrell Estate  
c/o Joyce Windham  
115 Woodglen Place  
Brandon, Mississippi 39042

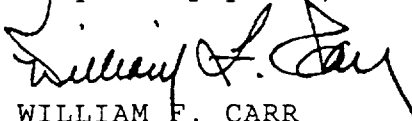
Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico

Dear Ms Windham:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

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Very truly yours,

  
WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

P 784 192 792  
**RECEIPT FOR CERTIFIED MAIL**  
NO INSURANCE COVERAGE PROVIDED  
 NOT FOR INTERNATIONAL MAIL  
 (See Reverse)

Sent to <u>O. U. Harrell Estate</u>	
Street and No <u>115 Woodglen Place</u>	
P.O., State and ZIP Code <u>Brandon, Miss 39042</u>	
Postage	\$ <u>.45</u>
Certified Fee	\$ <u>.85</u>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	\$ <u>.90</u>
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <u>2.20</u>
Postmark or Date <u>October 4, 1988</u>	

PS Form 3800, June 1985

**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. 2. ☐ Restricted Delivery.

3. Article Addressed to:  
O. U. Harrell Estate  
c/o Joyce Windham  
115 Woodglen Place  
Brandon, Mississippi 39042

4. Article Number P 784 192 792  
 Type of Service:  
☒ Registered  
☒ Certified  
☐ Express Mail  
☐ Insured  
☐ COD

5. Signature - Addressee  
☒

6. Signature - Agent  
☒

7. Date of Delivery  
October 4, 1988

8. Addressee's Address (on back)  
 Always obtain signature of addressee or agent and DATE DELIVERED.

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

CAMPBELL & BLACK, P.A.

LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Vera L. Chism  
Route 1, Box 461  
Fulton, Mississippi 38843

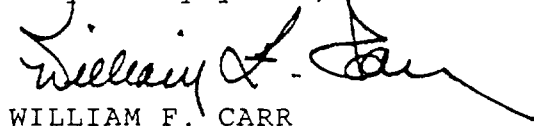
Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico.

Dear Ms Chism:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

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Very truly yours,



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

1. ☒ Show to whom delivered, date, and addressee's address. ☐ Restricted Delivery.

2. ☐ Restricted Delivery.

3. Article Addressed to:

Vera L. Chism  
Rt. 1, Box 461  
Fulton, Mississippi 38843

4. Article Number

P 784 192 793

Type of Service:

☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

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

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery

10/8/88

PS Form 3811, Feb. 1986

DOMESTIC RETURN RE

0 784 192 793  
RECEIPT FOR CERTIFIED MAIL  
NO INSURANCE COVERAGE PROVIDED  
FOR INTERNATIONAL MAIL  
See Reverse

Sender Vera L. Chism	
Street and No. Rt. 1, Box 461	
P.O. State and ZIP Code Fulton, Miss 38843	
Postage	\$ .45
Certified Fee	\$ .85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	\$ .90
Return Receipt showing to whom Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.20
Postmark or Date October 4, 1988	

PS Form 3800, June 1985

CAMPBELL & BLACK, P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Michele Alverson  
Route 5, Box 91  
Haleyville, AL 35565

Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico.

Dear Ms Alverson:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

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Very truly yours,



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

P 784 192 794  
**RECEIPT FOR CERTIFIED MAIL**  
NO INSURANCE COVERAGE PROVIDED  
 NOT FOR INTERNATIONAL MAIL  
 (See Reverse)

Sent to <b>Michele Alverson</b>	
Street and No. <b>Rt. 5, Box 91</b>	
P.O. State and ZIP Code <b>Haleyville, AL 35565</b>	
Postage	<b>.45</b>
Certified Fee	<b>.85</b>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	<b>.90</b>
Return Receipt showing to whom Date and Address of Delivery	
TOTAL Postage and Fees	<b>2.20</b>
Postmark or Date <b>October 4, 1988</b>	

PS Form 3800, June 1985

**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. <input checked="" type="checkbox"/> Show to whom delivered, date, and addressee's address.		2. <input type="checkbox"/> Restricted Delivery.	
3. Article Addressed to:  <b>Michele Alverson Rt. 5, Box 91 Haleyville, AL 35565</b>		4. Article Number <b>P 784 192 794</b>	
5. Signature - Addressee <b>X</b>		Type of Service: <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> COD <input type="checkbox"/> Express Mail	
6. Signature - Agent <b>X</b>		Always obtain signature of addressee or agent and <b>DATE DELIVERED</b> .	
7. Date of Delivery <b>10-7-88</b>		B. Addressee's Address (ONLY if requested and fee paid)	

PS Form 3811, Feb. 1986

**DOMESTIC RETURN RECEIPT**

CAMPBELL & BLACK, P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Margie F. Pounders  
Route 2, Box 249  
Golden, Mississippi 38847

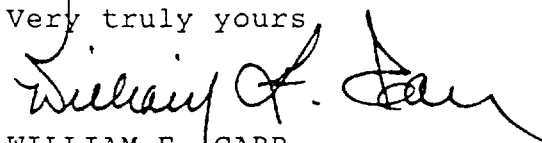
Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico

Dear Ms Pounders:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

This application has been set for hearing before a Division Examiner on October 26, 1988. You are not required to attend this hearing, but as an owner of an interest that may be subject to pooling, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging this application at a later date.

Very truly yours



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

**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 boxes for additional service(s) requested.

1. <input checked="" type="checkbox"/> Show to whom delivered, date, and addressee's address.		2. <input type="checkbox"/> Restricted Delivery.	
3. Article Addressed to:  Margie H. Pounders Rt. 2, Box 249 Golden, Mississippi 38847		4. Article Number P 784 192 795	
5. Signature — Addressee <i>Margie Pounders</i>		Type of Service: <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD	
6. Signature — Agent X		Always obtain signature of addressee or agent and DATE DELIVERED.	
7. Date of Delivery 10-7-88		8. Addressee's Address (ONLY if requested and fee paid) Rt. 2 Box 249 Golden, Mo 38847	

PS Form 3800, Feb. 1986

DOMESTIC RETURN RECEIPT

P 784 192 795  
RECEIPT FOR CERTIFIED MAIL

Sender Margie H. Pounders	
Street and No. Rt. 2, Box 249	
P.O. State and ZIP Code Golden, Miss	38847
Postage	.45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.70
Return Receipt showing to whom Date, and Address of Delivery	
TOTAL Postage and Fees	2.20
Postmark or Date October 4, 1988	

PS Form 3800, June 1985

CAMPBELL & BLACK, P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Enola F. Pounders  
Post Office Box 251  
Haleyville, AL 35565

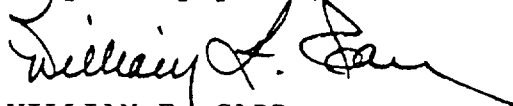
Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico.

Dear Ms Pounders:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

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Very truly yours,



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

**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 boxes for additional services requested.

1. <input checked="" type="checkbox"/> Show to whom delivered, date, and addressee's address.		2. <input type="checkbox"/> Restricted Delivery.	
3. Article Addressed to:  Enola F. Pounders Post Office Box 251 Haleyville, AL 35565		4. Article Number P 784 192 796	
5. Signature - Addressee <input checked="" type="checkbox"/> <i>Enola F. Pounders</i>		Type of Service: <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD	
6. Signature - Agent <input checked="" type="checkbox"/>		Always obtain signature of addressee or agent and DATE DELIVERED.	
7. Date of Delivery 10-7-88		8. Addressee's Address (ONLY if requested and fee paid)	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 784 192 796  
 RECEIPT FOR CERTIFIED MAIL  
NO INSURANCE COVERAGE PROVIDED  
 NOT FOR INTERNATIONAL MAIL  
 (See Reverse)

Sent to	
Enola F. Pounders	
Street and No.	
Post Office Box 251	
P.O., State and ZIP Code	
Haleyville, AL 35565	
Postage	\$ .45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.20
Postmark or Date	
October 4, 1988	

PS Form 3800, June 1985

CAMPBELL & BLACK, P.A.

LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Estate of Mellie Stanford  
Charles B. Stanford  
Harold P. Stanford, heirs  
Route 4  
Sulligent, AL 35586

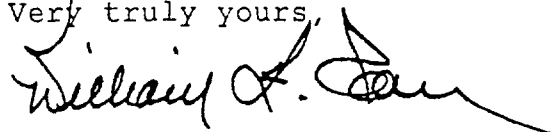
Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico

Gentlemen:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

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Very truly yours,



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

**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. <input checked="" type="checkbox"/> Show to whom delivered, date, and addressee's address.		2. <input type="checkbox"/> Restricted Delivery.	
3. Article Addressed to: Estate of Mellie Stanford Charles B. Stanford Harold P. Stanford, heirs Route 4 Sulligent, AL 35586		4. Article Number P 784 192 781	
5. Signature - Addressee <input checked="" type="checkbox"/> <i>C. B. Stanford</i>		Type of Service: <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD	
6. Signature - Agent <input checked="" type="checkbox"/>		Always obtain signature of addressee or agent and DATE DELIVERED.	
7. Date of Delivery 10-7-88		8. Addressee's Address (ONLY if requested and fee paid) Rt 1 Box 343 Sulligent, AL 35586	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 784 192 781  
 RECEIPT FOR CERTIFIED MAIL  
 NO INSURANCE COVERAGE PROVIDED  
 NOT FOR INTERNATIONAL MAIL  
 See Reverse

Return to: Estate of Mellie Stanford	
Street and No. Route 4	
P.O. Box and ZIP Code Sulligent, AL 35586	
Postage	.45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom Date, and Address of Delivery	
TOTAL Postage and Fees	2.20
Postmark or Date October 4, 1988	

5981 1986 3800 1986 PS

CAMPBELL & BLACK, P.A.

LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Coleman Jackson  
Route 5, Box 71  
Lawrenceberg, TN 38464

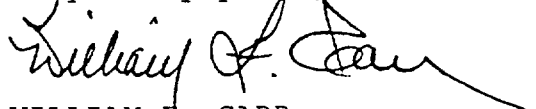
Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico

Dear Mr. Jackson:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

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Very truly yours,



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

P 784 192 782

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
(See Reverse)

Sent to Coleman Jackson	
Street and No Route 5, Box 71	
P.O., State and ZIP Code Lawrenceberg, TN 38464	
Postage	\$ .45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.20
Postmark or Date October 4, 1988	

PS Form 3800, June 1985

CAMPBELL & BLACK, P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Estate of Edna Davis  
c/o Bill Davis  
Route 1, Box 72  
Bina, AL 35593

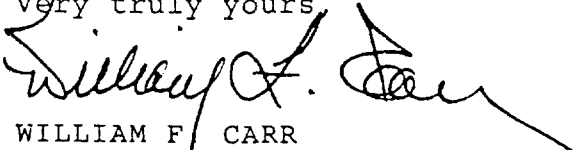
Re: Application of OXY USA, Inc. for Compulsory Pooling,  
Lea County, New Mexico

Dear Mr. Davis:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

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Very truly yours,

  
WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

**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. <input checked="" type="checkbox"/> Show to whom delivered, date, and addressee's address.		2. <input type="checkbox"/> Restricted Delivery.	
3. Article Addressed to: Estate of Edna Davis c/o Bill Davis Route 1, Box 71 Bina, AL 35593		4. Article Number P 784 192 783	
5. Signature - Addressee X		Type of Service: <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> Express Mail <input type="checkbox"/> COD	
6. Signature - Agent X <i>Edna Davis</i>		Always obtain signature of addressee or agent and DATE DELIVERED.	
7. Date of Delivery 10-7-88		8. Addressee's Address (ONLY if requested and fee paid)	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 784 192 783  
 RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to c/o Bill Davis Estate of Edna Davis	
Street and No. Route 1, Box 72	
P.O., State and ZIP Code Bina, AL 35593	
Postage	\$ .45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.20
Postmark or Date <i>October 4, 1988</i>	

PS Form 3800, June 1985

CAMPBELL & BLACK, P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Hal Jackson  
Route 11, Box 350  
Jasper, OK 35501

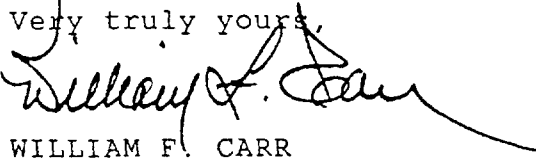
Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico.

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WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

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1. ☒ Show to whom delivered, date, and addressee's address.

2. ☐ Restricted Delivery.

3. Article Addressed to:

Hal Jackson  
Route 11, Box 350  
Jasper, OK 35501

4. Article Number

P 784 192 784

Type of Service:

☐ Registered  
☒ Certified  
☐ Insured  
☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

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

5. Signature — Addressee

6. Signature — Agent

7. Date of Delivery

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 784 192 784  
RECEIPT FOR CERTIFIED MAIL  
NO INSURANCE COVERAGE PROVIDED  
FOR LOSS OR DAMAGE IN TRANSIT  
(See Reverse)

Service	
Hal Jackson	
Street and No.	
Rt. 11, Box 350	
P.O., State and ZIP Code	
Jasper, OK 35501	
Postage	\$ .45
Certified Fee	.55
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.20
Postmark or Date	
October 4, 1988	

PS Form 3800, June 1985

CAMPBELL & BLACK, P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

John C. Jackson  
1180 North Pine  
Marshfield, MO 65706

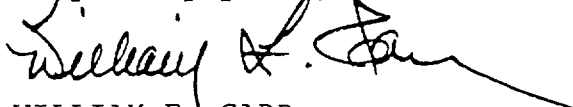
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Very truly yours,



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

CAMPBELL & BLACK, P.A.

LAWYERS

POST OFFICE BOX 2208

SANTA FE, NEW MEXICO 87504-2208

**CERTIFIED**

P 784 192 785

**MAIL**

1988

John C. Jackson

1180 North Pine

Marshfield, MO 65706

*10/11/88  
one page  
OK 1/25*

P 784 192 785  
**RECEIPT FOR CERTIFIED MAIL**  
NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
(See Reverse)

Sent to <b>John C. Jackson</b>	
Street and No. <b>1180 North Pine</b>	
P.O., State and ZIP Code <b>Marshfield, MO 65706</b>	
Postage	\$ <b>.45</b>
Certified Fee	<b>.85</b>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	<b>.90</b>
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <b>2.20</b>
Postmark or Date <b>October 4, 1988</b>	

PS Form 3800, June 1985

Claim Check

No.

**789488**

☐ Hold

Date

**10/17**

1st Notice

2nd Notice

Return

Detached from  
PS Form 3849-A,  
Oct. 1985

CAMPBELL & BLACK, P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Joseph T. Jackson  
12553 Mantilla Road  
San Diego, CA 92128

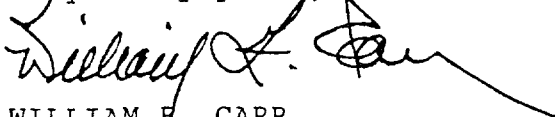
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Lea County, New Mexico.

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Very truly yours,



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

**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. 2. ☐ Restricted Delivery.

3. Article Addressed to:

Joseph T. Jackson  
12553 Mantilla Road  
San Diego, CA 92128

4. Article Number  
P 784 192 786

Type of Service:

☒ Registered  
☒ Certified  
☐ Insured  
☐ COD  
Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

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

5. Signature - Addressee

6. Signature - Agent

X

7. Date of Delivery

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 784 192 786  
RECEIPT FOR CERTIFIED MAIL  
NO INSURANCE COVERAGE PROVIDED  
FOR INTERNATIONAL MAIL  
See Reverse

Sent to Joseph T. Jackson	
Street and No. 12553 Mantilla Rd.,	
P.O., State and ZIP Code San Diego, CA 92128	
Postage	\$ .45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.20
Postmark or Date October 4, 1988	

PS Form 3800, June 1985

CAMPBELL & BLACK, P.A.

LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
PETER N. IVES  
JOHN H. BEMIS  
MARTE D. LIGHTSTONE

GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

H. T. Stanford  
Post Office Box 3392  
Oxford, AL 36201

Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico

Dear Mr. Stanford:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.F.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

This application has been set for hearing before a Division Examiner on October 26, 1988. You are not required to attend this hearing, but as an owner of an interest that may be subject to pooling, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging this application at a later date.

Very truly yours,



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.

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.

3. Article Addressed to: H. T. Stanford Post Office Box 3392 Oxford, AL 36201		4. Article Number P 784 192 787	
5. Signature — Addressee X		Type of Service: <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> COD <input type="checkbox"/> Express Mail	
6. Signature — Agent X <i>H. T. Stanford</i>		Always obtain signature of addressee or agent and DATE DELIVERED.	
7. Date of Delivery 10-8-88		8. Addressee's Address (ONLY if requested and fee paid)	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 784 192 737  
 RECEIPT FOR CERTIFIED MAIL  
 NO INSURANCE COVERAGE PROVIDED  
 POSTAGE INTERNATIONAL MAIL  
 (See Reverse)

Sent to	
H. T. Stanford	
Street and No.	
P. O. Box 3392	
P.O. State and ZIP Code	
Oxford, AL 36201	
Postage	.45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom Date and Address of Delivery	
TOTAL Postage and Fees	2.20
Postmark or Date	
October 4, 1988	

**CAMPBELL & BLACK, P.A.**  
**LAWYERS**

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
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GUADALUPE PLACE  
SUITE 1 - 110 NORTH GUADALUPE  
POST OFFICE BOX 2208  
SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Dorothy L. Jackson  
Post Office Box 764  
Winter Haven, FL 33884

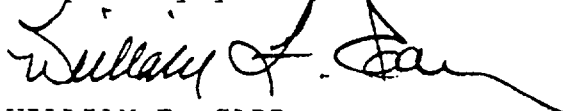
Re: Application of OXY USA Inc. for Compulsory Pooling,  
Lea County, New Mexico.

Dear Ms Jackson:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

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Very truly yours,



WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

CAMPBELL & BLACK, P.A.

LAWYERS

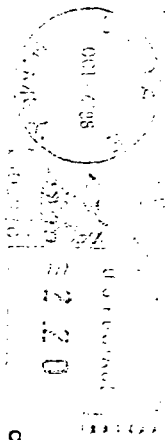
POST OFFICE BOX 2208

SANTA FE, NEW MEXICO 87504-0000

**CERTIFIED**

P 784 192 788

**MAIL**



Claim Check

No.

792933

☐ Hold

Date

OCT 24 1988

1ST Notice

2ND Notice

Return

Detached from  
PS Form 3849-A,  
Oct. 1985

Claim Check  
300861

TO ☒ Hold

REASON CHECKED

Unclaimed ☐ Sender

Addressed Incorrectly ☐ Refused

Insufficient Address ☐ Refused

No such street ☐ Refused

No such office in state ☐ Refused

Do not keep in this envelope ☐ Refused

Date OCT 0 1988

1ST Notice 10/15

2ND Notice 10-21

Return

**FINAL NOTICE**

P 784 192 788

**RECEIPT FOR CERTIFIED MAIL**

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
(See Reverse)

Sent to	
Dorothy L. Jackson	
Street and No.	
P. O. Box 764	
P.O., State and ZIP Code	
Winter Haven, FL 33884	
Postage	\$ .45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.20
Postmark or Date	
October 4, 1988	

PS Form 3800, June 1985

CAMPBELL & BLACK. P.A.  
LAWYERS

JACK M. CAMPBELL  
BRUCE D. BLACK  
MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
J. SCOTT HALL  
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SANTA FE, NEW MEXICO 87504-2208  
TELEPHONE: (505) 988-4421  
TELECOPIER: (505) 983-6043

October 4, 1988

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Estate of Orbery Jackson  
c/o Mrs. Orbery Jackson  
Route 2, Box 97  
Prospect, TN 38477


Re: Application of OXY USA, Inc. for Compulsory Pooling,  
Lea County, New Mexico

Dear Mrs. Jackson:

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests in two units in the Wolfcamp and Bone Springs formations and any and all other formations and/or pools developed on 40-acre spacing, in and under the SE/4 SE/4 and NE/4 SE/4 of Section 29, Township 19 South, Range 36 East, N.M.P.M., Lea County, New Mexico. OXY proposes to dedicate the referenced pooled units to wells which will be located at standard locations.

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Very truly yours,

  
WILLIAM F. CARR  
ATTORNEY FOR OXY USA INC.  
WFC:mlh

**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. <input checked="" type="checkbox"/> Show to whom delivered, date, and addressee's address.		2. <input type="checkbox"/> Restricted Delivery.	
3. Article Addressed to:  Estate of Orbery Jackson c/o Mrs. Orbery Jackson Route 2, Box 97 Prospect, TN 38477		4. Article Number  P 784 192 789  Type of Service: <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> COD <input type="checkbox"/> Express Mail	
5. Signature - Addressee <input checked="" type="checkbox"/> <i>Mrs. Orbery Jackson</i>		Always obtain signature of addressee or agent and DATE DELIVERED.	
6. Signature - Agent <input checked="" type="checkbox"/>		8. Addressee's Address (ONLY if requested and fee paid)	
7. Date of Delivery 10-7-88			

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 784 192 789  
 RECEIPT FOR CERTIFIED MAIL  
 NO RETURN DELIVERY REQUIRED  
 POST OFFICE INTERNATIONAL MAIL  
 See Reverse

Return to: Estate of Orbery Jackson Route 2, Box 97 Prospect, TN 38477	
Postage	.45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.90
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	2.20
Postmark or Date October 4, 1988	

PS Form 3800, June 1985