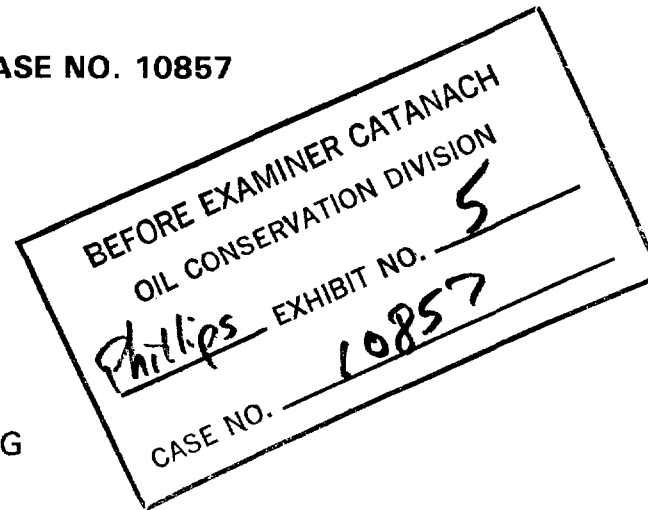


STATE OF NEW MEXICO  
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION

IN THE MATTER OF THE HEARING CALLED  
BY THE OIL CONSERVATION DIVISION  
FOR THE PURPOSE OF CONSIDERING:

CASE NO. 10857

APPLICATION OF PHILLIPS PETROLEUM COMPANY  
FOR AN UNORTHODOX GAS WELL LOCATION  
WEST RANGER LAKE-DEVONIAN GAS POOL  
LEA COUNTY, NEW MEXICO

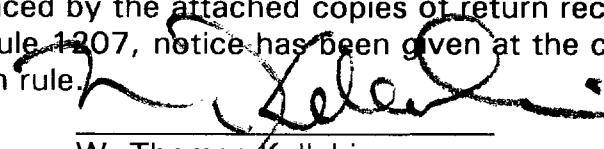


CERTIFICATE OF MAILING

AND

COMPLIANCE WITH ORDER R-8054

W. THOMAS KELLAHIN, attorney in fact and authorized representative of Phillips Petroleum Company, states that the notice provisions of Division Rule 1207 (Order R-8054) have been complied with, that Applicant has caused to be conducted a good faith diligent effort to find the correct addresses of all interested parties entitled to receive notice, that on October 8, 1993, I caused to be mailed by certified mail return-receipt requested notice of this hearing and a copy of the application for the above referenced case along with the cover letter, at least twenty days prior to the hearing set for November 4, 1993, to the parties shown in the application as evidenced by the attached copies of return receipt cards, and that pursuant to Division Rule 1207, notice has been given at the correct addresses provided by such rule.

  
W. Thomas Kellahin

SUBSCRIBED AND SWORN to before me this 1 day of NOVEMBER,  
1993.

  
Notary Public

My Commission Expires:  
June 9TH, 1997

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):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

**3. Article Addressed to:**

Yates Petroleum Company  
105 south fourth Street  
Artesia, New Mexico 88210

**4a. Article Number**

670 814 747

**4b. Service Type**

- |   |  |
|---|--|
| <input type="checkbox"/> Registered           | <input type="checkbox"/> Insured                                   |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD                                       |
| <input type="checkbox"/> Express Mail         | <input checked="" type="checkbox"/> Return Receipt for Merchandise |

**7. Date of Delivery**

10-11-93

**5. Signature (Addressee)**

*[Signature]*

**6. Signature (Agent)**

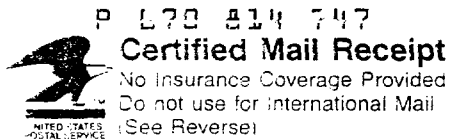
**8. Addressee's Address (Only if requested and fee is paid)**

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

**DOMESTIC RETURN RECEIPT**

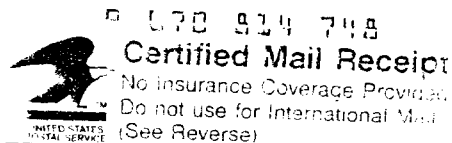
Thank you for using Return Receipt Service.



Yates Petroleum Company  
105 south fourth Street  
Artesia, New Mexico 88210

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, June 1990



Yates Drilling Company  
105 South Fourth Street  
Artesia, New Mexico 88210

PS Form 3800, June 1990

Certified Fee	\$
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom Date, & Address of Delivery	
TOTAL Postage & Fees	\$
Postmark or Date	

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:  
Yates Drilling Company  
105 South Fourth Street  
Artesia, New Mexico 88210

4a. Article Number  
670 814 748

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

7. Date of Delivery  
10-11-93

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 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):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

**3. Article Addressed to:**

Maralo, Inc  
223 West wall  
9th Floor  
Midland, Texas 79702

**4a. Article Number**

670 814 749

**4b. Service Type**

- |   |   |
|---|---|
| <input type="checkbox"/> Registered           | <input type="checkbox"/> Insured                        |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COB                            |
| <input type="checkbox"/> Express Mail         | <input type="checkbox"/> Return Receipt for Merchandise |

**7. Date of Delivery**

10/13/90

**5. Signature (Addressee)**

*[Signature]*

**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**



670 814 749

**Certified Mail Receipt**

No Insurance Coverage Provided  
Do not use for International Mail  
(See Reverse)

Maralo, Inc  
223 West wall  
9th Floor  
Midland, Texas 79702

PS Form 3800, June 1990

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom Date, & Address of Delivery	
TOTAL Postage & Fees	\$
Postmark or Date	

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:**

Myco Industries, Inc.  
015 South Fourth Street  
Artesia, New Mexico 88210

**4a. Article Number**

670 814 796

**4b. Service Type**

- ☐ Registered ☐ Insured
- ☒ Certified ☐ COD
- ☐ Express Mail ☒ Return Receipt for Merchandise

**7. Date of Delivery**

OCT 12 1993

**5. Signature (Addressee)**

*Cynthia Boyce*

**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**



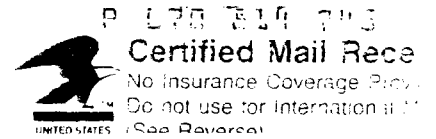
**Certified Mail Receipt**  
No Insurance Coverage Provided  
Do not use for international Mail

Myco Industries, Inc.  
015 South Fourth Street  
Artesia, New Mexico 88210

PS Form 3800, June 1990

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date & Address of Delivery	
TOTAL Postage & Fees	\$
Postmark or Date	

Thank you for using Return Receipt Service



ABO Petroleum Corp.  
105 South Fourth Street  
Artesia, New Mexico 88210

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, June 1990

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.
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- 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:

ABO Petroleum Corp.  
105 South Fourth Street  
Artesia, New Mexico 88210

4a. Article Number

670 814 74.5

4b. Service Type

- |                                       |   |
|---------------------------------------|---|
| <input type="checkbox"/> Registered   | <input type="checkbox"/> Insured                        |
| <input type="checkbox"/> Certified    | <input type="checkbox"/> COD                            |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt for Merchandise |

7. Date of Delivery

10-11-93

5. Signature (Addressee)

6. Signature (Agent)

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