



STATE OF NEW MEXICO  
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION  
HOBBS DISTRICT OFFICE

1/23/98

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

GOVERNOR

SWD-696

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

RE: Proposed:

MC \_\_\_\_\_  
DHC \_\_\_\_\_  
NSL \_\_\_\_\_  
NSP \_\_\_\_\_  
SWD X \_\_\_\_\_  
WFX \_\_\_\_\_  
PMX \_\_\_\_\_

Gentlemen:

I have examined the application for the:

Nadel & Gussman Permian State H # 12-H-36-19-32  
Operator Lease & Well No. Unit S-T-R

and my recommendations are as follows:

None

Yours very truly,

*Chris Williams*

Chris Williams  
Supervisor, District 1

/ed

*1/26/98  
JW*

# LEE ENGINEERING

P.O. BOX 10523, MIDLAND, TX 79702 (915) 682-1251

January 16, 1998

Oil Conservation Division  
P. O. Box 1980  
Hobbs, NM. 88241

Attn: Mr. Chris Williams

Re: Request for Administrative Approval  
for Salt Water Disposal.  
State HH #12  
1980' FNL & 350' FEL  
Section 36 T-19-S, R-32-E  
Lea County, New Mexico

Dear Mr. Williams:

Please find attached a Form C-108 requesting approval to convert the State HH #12 well to a salt water disposal well. If all attachments are satisfactory and no offset Working Interest Owners object, Nadel & Gussman Permian, LLC respectfully requests approval be granted administratively. I have already sent two copies of this C-108 to Mr. Catanach in Santa Fe.

Nadel & Gussman plans to dispose of water from the Geronimo Field into the Delaware Formation (7270'-7592'). The new perforations will not be stimulated initially. The Delaware zone proposed as the injection interval is productive in the area. The maximum anticipated injection rate will be 750 BWPD at an injection pressure not to exceed 1040 PSI. If injection pressures need to be increased, a State witnessed step-rate test will be performed.

If you have any questions, or if I can be of any assistance please do not hesitate to call me at (915) 682-1251 or Joel Martin at (915)-682-4429.

Sincerely,



Robert Lee P. E. #11341

APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: Secondary Recovery Pressure Maintenance X Disposal Storage  
Application qualifies for administrative approval? Yes No
- II. OPERATOR: Nadel & Gussman Permian, LLC  
ADDRESS: 601 North Marienfeld, Suite 508, Midland, Tx. 79701  
CONTACT PARTY: Mr. Joel Martin PHONE: (915)-682-4429
- III. WELL DATA: Complete the data required on the reverse side of this form for each well processed for injection. Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project: Yes X No  
If yes, give the Division order number authorizing the project \_\_\_\_\_
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
  2. Whether the system is open or closed;
  3. Proposed average and maximum injection pressure;
  4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
  5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- \*VIII. Attach appropriate geological data on the injection zone including appropriate lithologic detail, geological name, thickness and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.
- IX. Describe the proposed stimulation program, if any.
- \* X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted.)
- \* XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.
- NAME: Robert Lee, PE TITLE: Consulting Engineer  
SIGNATURE: Robert Lee DATE: 12/29/97
- If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstance of the earlier submittal. \_\_\_\_\_

STATE HH #12  
CONVERT TO INJECTION  
NMOCD Form C-108 Section III

III. Data on injection well(s)

A. Injection well information (see attached schematic)

Tabular data

1. Lease: State HH  
Well No: 12  
Location: 1980' FNL & 350' FEL, Sec 36 T19S  
R32E, Lea County, NM
2. Casing: 13 3/8", 48 #/ft, H-40 surface @ 457' in  
15 3/4" hole , cemented w/625 sx. TOC @  
surface.  
  
8 5/8", 32 #/ft, K-55 intermediate @ 2909'  
in 12 1/4" hole, cemented w/1000 sx. TOC  
@ surface.  
  
5 1/2", 17 #/ft, J-55 and N-80 production  
@ 7909' in 7 7/8" hole, cemented w/ 1370  
sx. TOC @ 1720' based on CBL.
3. Injection tubing: + or - 225 jts 2 3/8", 4.7 lb/ft,  
J-55 internally plastic coated tubing.:
4. Packer: An internally plastic coated Baker Model  
R Lok-set injection packer set @ +/- 7200'.

B. Other well information

1. Injection formation: Delaware  
Field: Geronimo
2. Existing perforations: 7270-90' , 7502-12 and  
7580-92'.  
  
Proposed perfs: 7313,19,26,31,36 & 40' W/ 2 JSPF
3. This well was drilled as a Delaware oil well.
4. There are no other perfed or tested intervals in  
this well.
5. Within the area of this well the Yates formation  
is productive at a depth of 3000' and the Bone  
Spring is productive at a depth of 9000'.

# NADEL & GUSSMAN PERMIAN, LLC

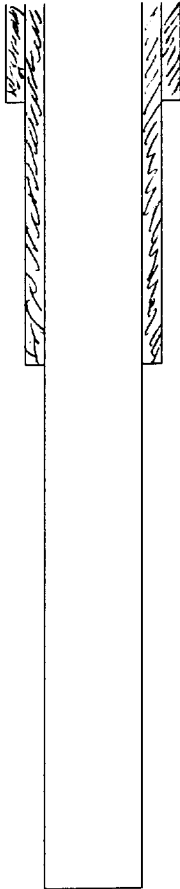
## CURRENT CONFIGURATION

WELL: STATE HH #12  
 FIELD: GERONIMO  
 INTERVAL: DELAWARE  
 COMP: 8/3/93  
 IP: 15 BOPD & 47 BWPD  
 Spudded: 5/5/93

LOCATION:  
 1980' FNL & 350' FEL  
 SEC 36, TWP-19-S, RNG-32-E  
 LEA COUNTY, NM

API #: 30-025-31950

ELEVATION: 3586' KB



### SURFACE CASING:

RAN 457' 48 #/FT. 13 3/8" H-40 CSG, CMT W/625 SXS  
 TOC @ SURF., CIRC 98 SXS TO PIT.

### INTERMEDIATE CASING:

RAN 2909' 32 #/FT. 8 5/8" K-55 CSG, CMT W/1000 SXS  
 TOC @ SURF., CIRC 175 SXS TO PIT.

### PRESENT COMPLETION INTERVAL:

PERFORATIONS @ 7270-90, 7502-12 & 7580-92

### PRODUCTION CASING:

RAN 7909' 17 #/FT. 5 1/2" J-55 & N-80 CSG,  
 CMT FIRST STAGE W/400 SXS,  
 CMT SECOND STAGE W/ 600SX.  
 SQUEEZE 370 SXS DOWN ANNULUS, TOC @ 1720'  
 BASED ON CBL.

DV @ 5737'

TD: 7911'  
 PBTD: 7900'

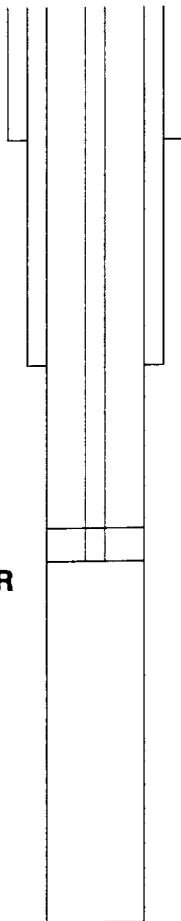
**NADEL & GUSSMAN PERMIAN, LLC**  
**PROPOSED CONFIGURATION**

WELL: STATE HH #12  
FIELD: GERONIMO  
INTERVAL: DELAWARE  
COMP: 8/3/93  
IP: 15 BOPD & 47 BWPD  
Spudded: 5/5/93

LOCATION:  
1980' FNL & 350' FEL  
SEC 36, TWP-19-S, RNG-32-E  
LEA COUNTY, NM

API #: 30-025-31950

ELEVATION: 3586' KB



PLASTIC  
COATED PKR  
SET @  
+/- 7200'

DV @ 5737'

TD: 7911'  
PBD: 7900'

SURFACE CASING:

RAN 457' 48 #/FT. 13 3/8" H-40 CSG, CMT W/625 SXS  
TOC @ SURF., CIRC 98 SXS TO PIT.

INTERMEDIATE CASING:

RAN 2909' 32 #/FT. 8 5/8" K-55 CSG, CMT W/1000 SXS  
TOC @ SURF., CIRC 175 SXS TO PIT.

PRESENT COMPLETION INTERVAL:

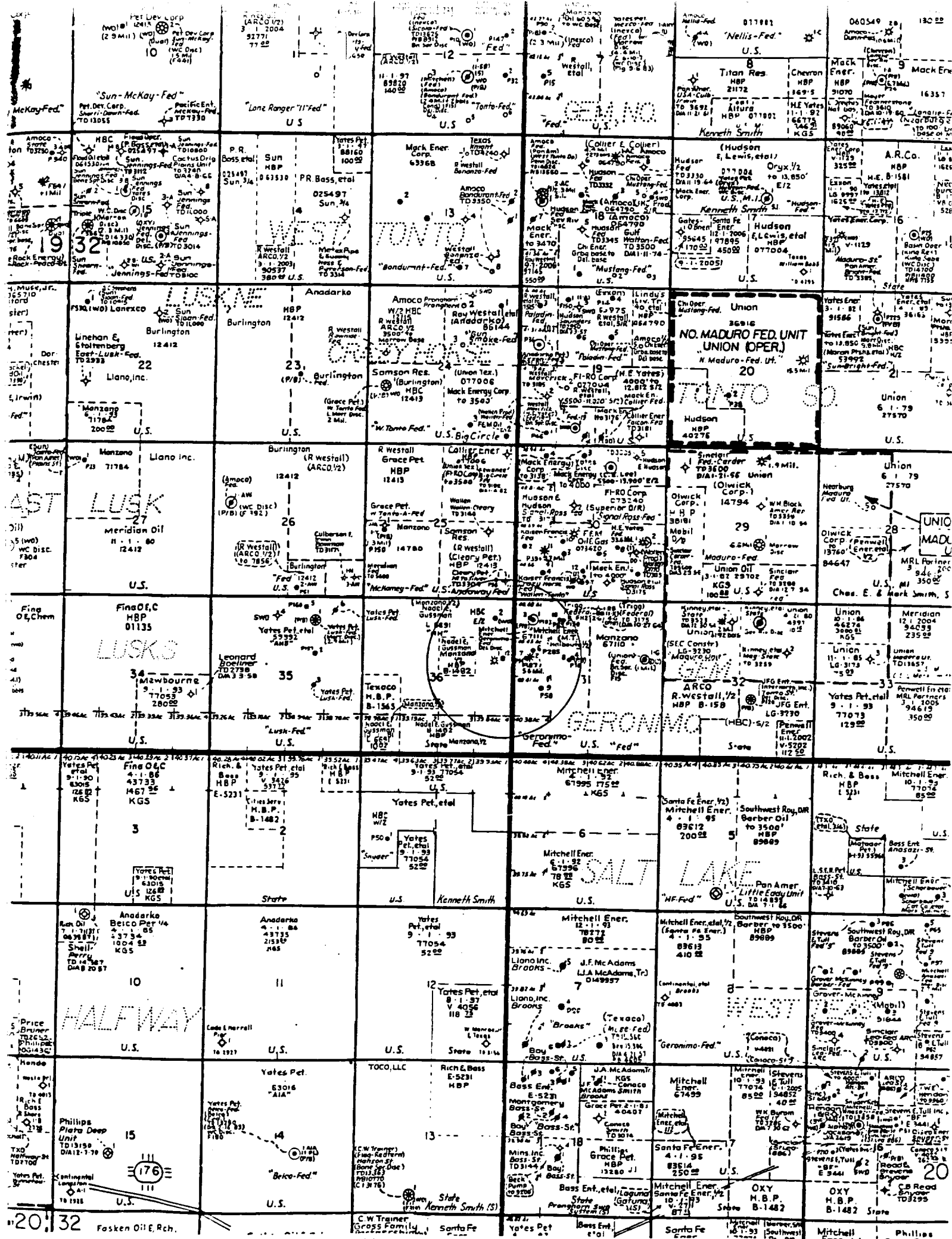
PERFORATIONS @ 7270-90, 7502-12 & 7580-92

PROPOSED PERFORATIONS:

7313, 19, 26, 31, 36 & 40'

PRODUCTION CASING:

RAN 7909' 17 #/FT. 5 1/2" J-55 & N-80 CSG,  
CMT FIRST STAGE W/400 SXS  
CMT SECOND STAGE W/ 600 SXS.  
SQUEEZE 370 SXS DOWN ANNULUS, TOC @ 1720'  
BASED ON CBL.



WELLS WITHIN THE AREA OF REVIEW FOR STATE HH #12

OPERATOR	CURRENT WELL NAME	API #	LOCATION	S-T-R	STATUS	SRUD DATE	COMP. DATE	TD	PBTD	FORMATION	CASING PROGRAM	TOP OF CEMENT	COMP. INTERVAL	TREATMENT	IP
MITCHELL ENERGY	GERONIMO #5	31312	660' FNL 1650' FWL	31-T185-R32E	PROD. OIL	9/9/91	11/7/91	10500	10408	BONE SPRING	13 3/8" @ 538' W/ 525 SX 8 5/8" @ 4198' W/ 1900 SX 5 1/2" @ 10491' W/ 2650 SX	2700'	5632-9063	NA	150 BOPD 278 BWPD
MITCHELL ENERGY	GERONIMO #9	32133	2275' FSL 960' FWL	31-T185-R32E	PROD. OIL	8/22/93	10/11/93	7665	7675	DELAWARE	13 3/8" @ 505' W/ 525 SX 8 5/8" @ 4205' W/ 1950 SX 5 1/2" @ 7965' W/ 1000 SX	3180'	7727-42 7591-7600	1500 GAL ACID SWFR 45 MGAL & 109.36 M# 1000 GAL ACID SWFR 6.9 MGAL & 8 M#	69 BOPD 225 BWPD
MITCHELL ENERGY	GERONIMO #6	31376	1725' FNL 660' FWL	31-T185-R32E	PROD. OIL	9/24/91	12/15/91	7900	7616	DELAWARE	13 3/8" @ 518' W/ 475 SX 8 5/8" @ 2608' W/ 1175 SX 5 1/2" @ 7500' W/ 650 SX	3283'	7570-658	NA	285 BOPD 158 BWPD
MITCHELL ENERGY	GERONIMO #2	30962	1660' FNL 660' FWL	31-T185-R32E	PROD. GAS	9/27/90	12/11/90	13770	13691	MORROW	13 3/8" @ 3064' W/ 1800 SX 8 5/8" @ 5074' W/ 1200 SX 5 1/2" @ 13796' W/ 2250 SX	3180'	13233-824	NATURAL	5676 MCFPD
MITCHELL ENERGY	GERONIMO #1	30945	660' FNL 660' FWL	31-T185-R32E	PROD. OIL	10/25/89	12/19/89	10564	10491	BONE SPRING	13 3/8" @ 1298' W/ 730 SX 8 5/8" @ 3335' W/ 1050 SX 5 1/2" @ 10562' W/ 1225 SX	4745'	9852-10002	2160 GAL ACID SWFR 84 MGAL & 280.34 M#	108 BOPD 70 BWPD
MITCHELL ENERGY	GERONIMO #4	31315	1960' FNL 1960' FWL	31-T185-R32E	PROD. OIL	7/10/91	9/26/91	10500	10295	BONE SPRING	13 3/8" @ 538' W/ 525 SX 8 5/8" @ 2817' W/ 1100 SX 5 1/2" @ 10497' W/ 1650 SX	3630'	9004-78 9004-270	1500 GAL ACID SWFR 42 MGAL & 105 M# 2000 GAL ACID SWFR 36.5 MGAL & 77 M#	20 BOPD 300 BWPD
GRACE PETROLEUM	ANDAWAY 25 FED. #1	31327	660' FSL 660' FEL	25-T185-R32E	PROD. OIL	8/3/91	2/2/92	7920	5510	DELAWARE	13 3/8" @ 500' W/ 450 SX 8 5/8" @ 4510' W/ 2650 SX 5 1/2" @ 7918' W/ 1100 SX	SURF.	5112-498	NA	58 BOPD 259 BWPD
SPIRIT ENERGY 76	STATE HH #1	27417	1960' FNL 660' FEL	36-T185-R32E	PROD. GAS	6/11/81	9/16/81	13800	13584	MORROW	13 3/8" @ 1355' W/ 1200 SX 9 5/8" @ 5101' W/ 3100 SX 5 1/2" @ 13800' W/ 1100 SX	7280'	13584-824 13390-398	4000 GAL ACID NATURAL SWFR 10 MGAL & 45 M#	624 MCFPD 2250 MCFPD 14 BOPD 450 BWPD
NADEL & GUSSMAN	STATE HH #2	31803	660' FNL 660' FEL	36-T185-R32E	PROD. OIL	3/1/83	5/23/83	7901	7857	DELAWARE	13 3/8" @ 503' W/ 400 SX 9 5/8" @ 2900' W/ 1100 SX 7" @ 7888' W/ 1110 SX	SURF.	7772-87	NA	15 BOPD 47 BWPD
NADEL & GUSSMAN	STATE HH #12	31950	1960' FNL 350' FEL	36-T185-R32E	SHUT-IN OIL	5/5/83	8/3/83	7911	7800	DELAWARE	13 3/8" @ 457' W/ 375 SX 8 5/8" @ 2809' W/ 1000 SX 5 1/2" @ 7909' W/ 1000 SX	1700'	7580-92 7502-12 7270-90	NA	15 BOPD 47 BWPD

WELLS WITHIN THE AREA OF REVIEW FOR STATE HH #12  
BUT DO NOT PENETRATE THE PROPOSED INJECTION ZONE

OPERATOR	CURRENT WELL NAME	API #	LOCATION	S-T-R	STATUS	SRUD DATE	COMP. DATE	TD	PBTD	FORMATION	CASING PROGRAM	TOP OF CEMENT	COMP. INTERVAL	TREATMENT	IP
MITCHELL ENERGY	GERONIMO #3		660' FNL 565' FNL	31-T185-R32E	PROD.			3250							
MITCHELL ENERGY	GERONIMO #10		660' FNL 1575' FWL	31-T185-R32E	PROD.			3250							
MITCHELL ENERGY	GERONIMO #8		1960' FNL 1905' FWL	31-T185-R32E	PROD.			3150							
MITCHELL ENERGY	GERONIMO #7		1960' FNL 565' FNL	31-T185-R32E	PROD.			3250							
CLEARY PETROLEUM	HI-YO SILVER		660' FSL 330' FEL	25-T185-R32E	P&A			3304							



STATE HH #12

CONVERT TO INJECTION

NMOCD Form C-108 Sections VII thru XII

VII. Data on proposed operation.

1. Proposed average injection rate: 375 BWP  
Proposed maximum injection rate: 750 BWP
2. The system will be a closed system.
3. Proposed average injection pressure: 500 PSI  
Proposed maximum injection pressure: 1040 PSI
4. The proposed injection fluid is compatible with the fluids in the proposed injection horizon. This is shown on the attached compatibility analysis.
5. A chemical analysis of the formation water in the proposed injection horizon is attached.

VIII. The proposed disposal interval is located in the Delaware Sand formation. This Permian age horizon is nearly 2700' thick in this area. The top of the Delaware formation is at a depth of about 5170' with the base at a depth of about 7870'.

The nearest water well is over two mile away in the SW/4 of the SE/4 of the SW/4 in Section 5 TWP-20-S, RNG-33-E. This well was drilled in 1966 and produced water from a brown sand at a depth of 675'. No test is available on the water from this well. There are no fresh water zones underlying the proposed injection zone.

- IX. There is no stimulation work proposed for this conversion.
- X. Logs have previously been submitted to the OCD.
- XI. There are no fresh water wells of record within one mile of the proposed injection well.
- XII. An examination of this area has determined there are no open faults or other hydrologic connection between the disposal zone and any underground drinking water.

601 N. Marienfeld, Ste 503, Midland, TX 79701 RESULTS REPORTED 12-17-97

COMPANY Nadel & Gussman Permian LEASE State HH #2

FIELD OR POOL

SECTION BLOCK SURVEY COUNTY Lea STATE NM

SOURCE OF SAMPLE AND DATE TAKEN:

NO. 1 Commingled water - taken from Mitchell Energy's Geronimo Fed. water tank. 12-15-97

NO. 2 Produced water - taken from State HH #2. 12-15-97

NO. 3

NO. 4

REMARKS: 1. Sec. 31 - T19S-R33E 2. Sec. 36 - T19S-R32E

CHEMICAL AND PHYSICAL PROPERTIES				
	NO. 1	NO. 2	NO. 3	NO. 4
Specific Gravity at 60° F.	1.1404	1.1652		
pH When Sampled	7.0			
pH When Received	6.12	5.32		
Bicarbonate as HCO <sub>3</sub>	403	85		
Supersaturation as CaCO <sub>3</sub>	30	14		
Undersaturation as CaCO <sub>3</sub>	--	--		
Total Hardness as CaCO <sub>3</sub>	46,000	81,000		
Calcium as Ca	14,000	22,800		
Magnesium as Mg	2,673	5,832		
Sodium and/or Potassium	63,986	67,108		
Sulfate as SO <sub>4</sub>	498	488		
Chloride as Cl	130,675	160,503		
Iron as Fe	37.0	9.7		
Barium as Ba	0			
Turbidity, Electric	205			
Color as Pt	46			
Total Solids, Calculated	212,235	256,817		
Temperature °F.	80			
Carbon Dioxide, Calculated	64			
Dissolved Oxygen,	0.020			
Hydrogen Sulfide	0.0	0.0		
Resistivity, ohms/m at 77° F.	0.055	0.050		
Suspended Oil	99			
Filtrable Solids as mg/l	35.7			
Volume Filtered, ml	1,560			

Results Reported As Milligrams Per Liter

Additional Determinations And Remarks The objective herein is to evaluate compatibility between these two waters. A very careful study has revealed no evidence of any incompatibility. This is to say that any combination of these two waters would not be expected to cause any scaling potential or precipitation.

7

AFFIDAVIT OF PUBLICATION

State of New Mexico,  
County of Lea.

I, KATHI BEARDEN

Publisher

of the Hobbs Daily News-Sun, a  
daily newspaper published at  
Hobbs, New Mexico, do solemnly  
swear that the clipping attached  
hereto was published once a  
week in the regular and entire  
issue of said paper, and not a  
supplement thereof for a period.

of 1

                     weeks.

Beginning with the issue dated

December 14 1997

and ending with the issue dated

December 14 1997

Kathi Bearden by JH

Publisher

Sworn and subscribed to before

me this 23rd day of

December 1997

God Jensen

Notary Public.

My Commission expires  
October 18, 2000  
(Seal)

LEGAL NOTICE

December 14, 1997

This is to advise all parties  
concerned, Nadel & Gussman  
Permian, LLC intends to con-  
vert the following well to a  
Salt Water Disposal well:

State HH #12  
1980' FNL & 350' FEL  
Section 36, T-19-S, R-32-E  
Lea County, New Mexico

The formation to be injected  
into is the Delaware at a  
depth of 5190 to 7592. The  
maximum expected injection  
rate is 750 BWPD at a maxi-  
mum injection pressure of  
1040 psi. Questions can be  
addressed to:

Nadel & Gussman  
Permian, LLC  
601 North Marienfeld  
Suite 508  
Midland, Texas 79701  
Attention: Mr. Joel Martin  
Phone # (915) 682-4429

Interested parties must file  
objections or requests for  
hearing within 15 days of this  
notice to the:

Oil Conservation Division  
P.O. Box 2088  
Sante Fe, N.M. 87504-2088

#15604

This newspaper is duly qualified  
to publish legal notices or adver-  
tisements within the meaning of  
Section 3, Chapter 167, Laws of  
1937, and payment of fees for  
said publication has been made.

02102084000

02511731

Nadel & Gussman Permian, LLC  
601 North Marienfeld  
MIDLAND, TX 79701

- 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 the 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.

3. Article Addressed to:

Mitchell Energy & Development  
P.O. Box 4000  
2001 Timberloch Place  
The Woodlands, Tx. 77381-4000  
Attn: Mr. Brad Hansen

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Shelly Preston*

PS Form 3811, December 1994

102595-97-B-0179

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 the 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.

3. Article Addressed to:

Samson Resources Company  
Samson Plaza  
Two West Second Street  
Tulsa, OKla. 74103  
Attn: Mr. Steven Area

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Steven Area*

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

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

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

4a. Article Number

Z 100 620 623

4b. Service Type

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

7. Date of Delivery

JAN 15 1998

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

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

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

4a. Article Number

Z 100 620 622

4b. Service Type

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

7. Date of Delivery

JAN 5 1998

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

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

- 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 the 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.

3. Article Addressed to:

Kaiser-Francis Oil Company  
Box 21468  
6733 South Yale (74136)  
Tulsa, OK. 74121-1468  
Attn: Mr. Eric Lowe

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Eric Lowe*

PS Form 3811, December 1994

102595-97-B-0179

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 the 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.

3. Article Addressed to:

Manzano Oil Corporation  
Box 2107  
1801 West Second Street  
Roswell, NM. 88202-2107  
Attn: Mr. Donnie Brown

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Donnie Brown*

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

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

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

4a. Article Number

Z 100 620 625

4b. Service Type

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

7. Date of Delivery

JAN - 5 1998

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

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

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

4a. Article Number

Z 100 620 621

4b. Service Type

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

7. Date of Delivery

1-5-98

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

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

3. Article Addressed to: Spirit Energy 76 Box 3100 1004 North Big Spring Suite 300 Midland, Tx. 79702 Attn: Ms. Diane Van Deventer		4a. Article Number Z 100 620 624	
5. Received By: (Print Name) Alice		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
6. Return: (Addressed or Agent) Alice		7. Date of Delivery JAN 05 1990	
8. Addressee's Address (Only if requested and fee is paid)		9. Addressee's Address <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Certified <input type="checkbox"/> Insured	

<b>SENDER:</b> <ul style="list-style-type: none"> <li>Complete items 1 and/or 2 for additional services.</li> <li>Complete items 3, 4a, and 4b.</li> <li>Print your name and address on the reverse of this form so that we can return this card to you.</li> <li>Attach this form to the front of the mailpiece, or on the back if space does not permit.</li> <li>Write "Return Receipt Requested" on the mailpiece below the article number.</li> </ul>		<b>1</b> Article Number <b>2</b> Article Description <b>3</b> Article Addressed to:	
<b>4a.</b> Article Number Z 100 620 633		<b>4b.</b> Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
<b>5.</b> Date of Delivery 12-5-98		<b>6.</b> Addressee's Address (Only if requested and fee is paid)	
<b>7.</b> Date of Delivery 12-5-98		<b>8.</b> Addressee's Address (Only if requested and fee is paid)	
<b>9.</b> Date of Delivery 12-5-98		<b>10.</b> Addressee's Address (Only if requested and fee is paid)	

<p><b>SENDER:</b></p> <ul style="list-style-type: none"> <li>■ Complete items 1 and/or 2 for additional services.</li> <li>■ Complete items 3, 4a, and 4b.</li> <li>■ Print your name and address on the reverse of this form so that we can return the card to you.</li> <li>■ Attach this form to the front of the mailpiece, or on the back if space does not permit.</li> <li>■ Write "Return Receipt Requested" on the mailpiece below the article number.</li> <li>■ The Return Receipt will show to whom the article was delivered and the date delivered.</li> </ul>		<p><b>I also wish to receive the following services (for an extra fee):</b></p> <p>1. <input type="checkbox"/> Addressee's Address</p> <p>2. <input type="checkbox"/> Restricted Delivery</p> <p>Consult postmaster for fee.</p>	
<p><b>3. Article Addressed to:</b></p> <p>Commissioner of Public Lands</p> <p>P.O. Box 1148</p> <p>Santa Fe, NM 87504-1148</p> <p>Attn: Mr. Pete Martinez</p>		<p><b>4a. Article Number</b></p> <p>Z 100 620 629</p>	
<p><b>4b. Service Type</b></p> <p><input type="checkbox"/> Registered</p> <p><input type="checkbox"/> Express Mail <b>FE</b></p> <p><input type="checkbox"/> Registered for Merchandise <input type="checkbox"/> COD</p> <p><input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured</p>		<p><b>7. Date of Delivery</b></p> <p>JAN 15 1998</p>	
<p><b>5. Received By: (Print Name)</b></p> <p><i>[Signature]</i></p>		<p><b>8. Addressee's Address (Only if requested and fee is paid)</b></p> <p>USPS - 87501-9666</p>	
<p><b>6. Signature: (Addressee or Agent)</b></p> <p>X</p>		<p><b>9. PS Form 3811, December 1994</b></p>	

<b>SENDER:</b> <input type="checkbox"/> Complete items 1 and/or 2 for additional services. <input type="checkbox"/> Complete items 3, 4a, and 4b. <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you. <input type="checkbox"/> Attach the form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> 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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
<b>3. Article Addressed to:</b>  F & M Oil and Gas Company Box 891 1508 North Big Spring Midland, Tx. 79702		<b>4a. Article Number</b> Z 100 620 632	
<b>4b. Service Type</b> <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD		<b>5. Rate of Delivery</b> <input type="checkbox"/> Certified <input type="checkbox"/> Insured	
<b>Attn:</b> Mr. Greg Mauzy <b>5. Received By:</b> (Print Name)		<b>6. Addressee's Address (Only if requested and fee is paid)</b>	
<b>6. Signature:</b> (Addressee or Agent) X <i>Greg Mauzy</i>		<b>7. Date of Delivery</b> JAN 15 1988 MIDTOWN ST. A	
<b>PS Form 3811, December 1984</b>		<b>Domestic Return Receipt</b>	

**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:**

Harvey E. Yates Company  
Box 1933  
500 N. Main, Ste. #1  
Roswell, NM 88201

Attn: Mr. Steve Yates

**4a. Article Number**

7-100-620-626

**4b. Service Type**

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

**7. Date of Delivery**

1-8-98

**5. Received By: (Print Name)**

Heber Crump

**6. Signature: (Addressee or Agent)**

X Heber Crump

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

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

Is your **RETURN ADDRESS** completed on the reverse side?

Thank you for using Return Receipt Service.