

**BEFORE THE OIL CONSERVATION DIVISION  
EXAMINER HEARING OCTOBER 5, 2023**

CASE NOS. 23800-23803

Sapphire Fed Com 501H  
Sapphire Fed Com 502H  
Sapphire Fed Com 503H  
Sapphire Fed Com 504H

Lea County, New Mexico



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

**APPLICATION OF LEGACY RESERVES OPERATING LP  
TO AMEND ORDER NO. R-22336, LEA COUNTY, NEW MEXICO.**

**CASE NOS. 23800**  
(Formerly Case 22226)

**APPLICATION OF LEGACY RESERVES OPERATING LP  
TO AMEND ORDER NO. R-22337, LEA COUNTY, NEW MEXICO.**

**CASE NOS. 23801**  
(Formerly Case 22227)

**APPLICATION OF LEGACY RESERVES OPERATING LP  
TO AMEND ORDER NO. R-22338, LEA COUNTY, NEW MEXICO.**

**CASE NOS. 23802**  
(Formerly Case 22228)

**APPLICATION OF LEGACY RESERVES OPERATING LP  
TO AMEND ORDER NO. R-22339, LEA COUNTY, NEW MEXICO.**

**CASE NOS. 23803**  
(Formerly Case 22229)

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

**APPLICATION OF LEGACY RESERVES  
OPERATING LP TO AMEND ORDER NO. R-22336,  
LEA COUNTY, NEW MEXICO**

Case No. \_\_\_\_\_  
(Formerly Case 22226)

**APPLICATION**

Legacy Reserves Operating LP, OGRID No. 294281 (“Legacy” or “Applicant”), through its undersigned attorneys, hereby files this Application with the Oil Conservation Division (“Division”) to amend Order No. R-22336 to allow an additional year to commence drilling the proposed initial wells.

In support of its Application, Applicant states the following:

1. Division Order No. R-22336, entered on October 28, 2022, in Case No. 22226, pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the W $\frac{1}{2}$ W $\frac{1}{2}$  of Section 14 and W $\frac{1}{2}$ W $\frac{1}{2}$  of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and dedicated the unit to the proposed Sapphire Fed Com 501H well.
2. Paragraph 19 of Order No. R-22336 requires Applicant to commence drilling the wells “within one year after the date of this Order, and complete Well no later than one (1) year after the commencement of drilling the Well.” Paragraph 20 of Order No. R-22336 provides that the order will terminate if the well is not timely commenced, unless the operator “obtains an extension by an amendment of this Order for good cause shown.”

3. Good cause exists to extend the drilling deadline and Applicant requests that Order R-22336 be amended to allow an additional year to commence drilling the initial well under the Order. Applicant still plans to drill the Sapphire Fed Com 501H well but is revising its development plan based on proximate well data. Applicant needs additional time to plan and permit additional wells to be batch drilled. An extension will enable Applicant to maximize productivity, prevent economic waste, and minimize surface and environmental impacts with more efficient planning.

WHEREFORE, Applicant requests that this application be set for hearing before an Examiner of the Oil Conservation Division on October 5, 2023, and after notice and hearing as required by law, the Division enter an order extending the time for Applicant to commence drilling the proposed initial wells under Order No. R-22336 to October 28, 2024.

Respectfully submitted,

BEATTY & WOZNIAK, P.C.

By: 

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*Attorney for*  
Legacy Reserves Operating LP



***Application of Legacy Reserves Operating LP to Amend Order No. R-22336, Lea County, New Mexico.*** Applicant in the above-styled cause seeks an order amending Order No. R-22336, issued on October 28, 2022, to extend the well commencement deadline one year, to October 28, 2024. Order No. R-22336 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the W½W½ of Section 14 and W½W½ of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.

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

**APPLICATION OF LEGACY RESERVES  
OPERATING LP TO AMEND ORDER NO. R-22337,  
LEA COUNTY, NEW MEXICO**

Case No. \_\_\_\_\_  
(Formerly Case 22227)

**APPLICATION**

Legacy Reserves Operating LP, OGRID No. 294281 (“Legacy” or “Applicant”), through its undersigned attorneys, hereby files this Application with the Oil Conservation Division (“Division”) to amend Order No. R-22337 to allow an additional year to commence drilling the proposed initial wells.

In support of its Application, Applicant states the following:

1. Division Order No. R-22337, entered on October 28, 2022, in Case No. 22227, pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the E½W½ of Section 14 and E½W½ of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and dedicated the unit to the proposed Sapphire Fed Com 502H well.
2. Paragraph 19 of Order No. R-22337 requires Applicant to commence drilling the wells “within one year after the date of this Order, and complete Well no later than one (1) year after the commencement of drilling the Well.” Paragraph 20 of Order No. R-22337 provides that the order will terminate if the well is not timely commenced, unless the operator “obtains an extension by an amendment of this Order for good cause shown.”

3. Good cause exists to extend the drilling deadline and Applicant requests that Order R-22337 be amended to allow an additional year to commence drilling the initial well under the Order. Applicant still plans to drill the Sapphire Fed Com 502H well but is revising its development plan based on proximate well data. Applicant needs additional time to plan and permit additional wells to be batch drilled. An extension will enable Applicant to maximize productivity, prevent economic waste, and minimize surface and environmental impacts with more efficient planning.

WHEREFORE, Applicant requests that this application be set for hearing before an Examiner of the Oil Conservation Division on October 5, 2023, and after notice and hearing as required by law, the Division enter an order extending the time for Applicant to commence drilling the proposed initial wells under Order No. R-22337 to October 28, 2024.

Respectfully submitted,

BEATTY & WOZNIAK, P.C.

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*Attorney for*  
Legacy Reserves Operating LP

***Application of Legacy Reserves Operating LP to Amend Order No. R-22337, Lea County, New Mexico.*** Applicant in the above-styled cause seeks an order amending Order No. R-22337, issued on October 28, 2022, to extend the well commencement deadline one year, to October 28, 2024. Order No. R-22337 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the E½W½ of Section 14 and E½W½ of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.

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

**APPLICATION OF LEGACY RESERVES  
OPERATING LP TO AMEND ORDER NO. R-22338,  
LEA COUNTY, NEW MEXICO**

Case No. \_\_\_\_\_  
(Formerly Case 22228)

**APPLICATION**

Legacy Reserves Operating LP, OGRID No. 294281 (“Legacy” or “Applicant”), through its undersigned attorneys, hereby files this Application with the Oil Conservation Division (“Division”) to amend Order No. R-22338 to allow an additional year to commence drilling the proposed initial wells.

In support of its Application, Applicant states the following:

1. Division Order No. R-22338, entered on October 28, 2022, in Case No. 22228, pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the W $\frac{1}{2}$ E $\frac{1}{2}$  of Section 14 and W $\frac{1}{2}$ E $\frac{1}{2}$  of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and dedicated the unit to the proposed Sapphire Fed Com 503H well.
2. Paragraph 19 of Order No. R-22338 requires Applicant to commence drilling the wells “within one year after the date of this Order, and complete Well no later than one (1) year after the commencement of drilling the Well.” Paragraph 20 of Order No. R-22338 provides that the order will terminate if the well is not timely commenced, unless the operator “obtains an extension by an amendment of this Order for good cause shown.”

3. Good cause exists to extend the drilling deadline and Applicant requests that Order R-22338 be amended to allow an additional year to commence drilling the initial well under the Order. Applicant still plans to drill the Sapphire Fed Com 503H well but is revising its development plan based on proximate well data. Applicant needs additional time to plan and permit additional wells to be batch drilled. An extension will enable Applicant to maximize productivity, prevent economic waste, and minimize surface and environmental impacts with more efficient planning.

WHEREFORE, Applicant requests that this application be set for hearing before an Examiner of the Oil Conservation Division on October 5, 2023, and after notice and hearing as required by law, the Division enter an order extending the time for Applicant to commence drilling the proposed initial wells under Order No. R-22338 to October 28, 2024.

Respectfully submitted,

BEATTY & WOZNIAK, P.C.

By: 

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*Attorney for*  
Legacy Reserves Operating LP

***Application of Legacy Reserves Operating LP to Amend Order No. R-22338, Lea County, New Mexico.*** Applicant in the above-styled cause seeks an order amending Order No. R-22338, issued on October 28, 2022, to extend the well commencement deadline one year, to October 28, 2024. Order No. R-22338 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the W½E½ of Section 14 and W½E½ of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.

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

**APPLICATION OF LEGACY RESERVES  
OPERATING LP TO AMEND ORDER NO. R-22339,  
LEA COUNTY, NEW MEXICO**

Case No. \_\_\_\_\_  
(Formerly Case 22229)

**APPLICATION**

Legacy Reserves Operating LP, OGRID No. 294281 (“Legacy” or “Applicant”), through its undersigned attorneys, hereby files this Application with the Oil Conservation Division (“Division”) to amend Order No. R-22339 to allow an additional year to commence drilling the proposed initial wells.

In support of its Application, Applicant states the following:

1. Division Order No. R-22339, entered on October 28, 2022, in Case No. 22229, pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the E½E½ of Section 14 and E½E½ of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and dedicated the unit to the proposed Sapphire Fed Com 504H well.
2. Paragraph 19 of Order No. R-22339 requires Applicant to commence drilling the wells “within one year after the date of this Order, and complete Well no later than one (1) year after the commencement of drilling the Well.” Paragraph 20 of Order No. R-22339 provides that the order will terminate if the well is not timely commenced, unless the operator “obtains an extension by an amendment of this Order for good cause shown.”



3. Good cause exists to extend the drilling deadline and Applicant requests that Order R-22339 be amended to allow an additional year to commence drilling the initial well under the Order. Applicant still plans to drill the Sapphire Fed Com 504H well but is revising its development plan based on proximate well data. Applicant needs additional time to plan and permit additional wells to be batch drilled. An extension will enable Applicant to maximize productivity, prevent economic waste, and minimize surface and environmental impacts with more efficient planning.

WHEREFORE, Applicant requests that this application be set for hearing before an Examiner of the Oil Conservation Division on October 5, 2023, and after notice and hearing as required by law, the Division enter an order extending the time for Applicant to commence drilling the proposed initial wells under Order No. R-22339 to October 28, 2024.

Respectfully submitted,

BEATTY & WOZNIAK, P.C.

By: 

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*Attorney for*  
Legacy Reserves Operating LP

***Application of Legacy Reserves Operating LP to Amend Order No. R-22339, Lea County, New Mexico.*** Applicant in the above-styled cause seeks an order amending Order No. R-22339, issued on October 28, 2022, to extend the well commencement deadline one year, to October 28, 2024. Order No. R-22339 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the E½E½ of Section 14 and E½E½ of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.

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

**APPLICATION OF LEGACY RESERVES OPERATING LP  
TO AMEND ORDER NO. R-22336, LEA COUNTY, NEW MEXICO.**

**CASE NOS. 23800**  
(Formerly Case 22226)

**APPLICATION OF LEGACY RESERVES OPERATING LP  
TO AMEND ORDER NO. R-22337, LEA COUNTY, NEW MEXICO.**

**CASE NOS. 23801**  
(Formerly Case 22227)

**APPLICATION OF LEGACY RESERVES OPERATING LP  
TO AMEND ORDER NO. R-22338, LEA COUNTY, NEW MEXICO.**

**CASE NOS. 23802**  
(Formerly Case 22228)

**APPLICATION OF LEGACY RESERVES OPERATING LP  
TO AMEND ORDER NO. R-22339, LEA COUNTY, NEW MEXICO.**

**CASE NOS. 23803**  
(Formerly Case 22229)

**AFFIDAVIT OF TAYLOR THORESON**

Taylor Thoreson, being first duly sworn upon oath, deposes and states as follows:

1. My name is Taylor Thoreson, and I am employed by Legacy Reserves Operating LP ("Legacy") as a VP of Land and Business Development.

2. I have previously testified before the New Mexico Oil Conservation Division ("Division"), and my qualifications as an expert witness in petroleum land matters were accepted and made a matter of public record. I have several years of experience in petroleum land matters, and I have worked directly or in a supervisory role with the properties that are the subject of these matters.

3. I am submitting this affidavit in support of Legacy's applications in the above-referenced cases pursuant to 19.15.4.12.(A)(1) NMAC.

4. I am familiar with the applications filed by Legacy in these consolidated cases and the status of the lands in the subject lands.

5. I do not expect any opposition to the presentation of this case by affidavit because the affected interest owners have been contacted regarding the amending of the subject order, and any filed objections or entries of appearance have been withdrawn following a resolution.

6. Legacy seeks orders extending for an additional year the obligation to commence drilling under Division Orders R-22336, R-22337, R-22338, and R-22339, issued on October 28, 2022, in Case Nos. 22226, 22227, 22228, and 22229, respectively. These orders pooled all uncommitted interest owners in the Bone Spring formation underlying standard 320-acre horizontal spacing units in Sections 14 and 23, Township 19 South, Range 33 East, N.M.P.M., Lea County, New Mexico, as follows:

- Order R-22336 pooled the  $W\frac{1}{2}W\frac{1}{2}$  of Section 14 and the  $W\frac{1}{2}W\frac{1}{2}$  of Section 23 and dedicated the 320-acre spacing unit to the proposed Sapphire Fed Com 501H Well (API No. Pending);
- Order R-22337 pooled the  $E\frac{1}{2}W\frac{1}{2}$  of Section 14 and the  $E\frac{1}{2}W\frac{1}{2}$  of Section 23 and dedicated the 320-acre spacing unit to the proposed Sapphire Fed Com 502H Well (API No. Pending);
- Order R-22338 pooled the  $W\frac{1}{2}E\frac{1}{2}$  of Section 14 and the  $W\frac{1}{2}E\frac{1}{2}$  of Section 23 and dedicated the 320-acre spacing unit to the proposed Sapphire Fed Com 503H Well (API No. Pending); and
- Order R-22339 pooled the  $E\frac{1}{2}E\frac{1}{2}$  of Section 14 and the  $E\frac{1}{2}E\frac{1}{2}$  of Section 23 and dedicated the 320-acre spacing unit to the proposed Sapphire Fed Com 504H Well (API No. Pending).

Each order requires Applicant to commence drilling the wells “within one year after the date of this Order, and complete each Well no later than one (1) year after the commencement of drilling

the Well.” The orders further provide that the order will terminate if the well is not timely commenced, unless the operator “obtains an extension by an amendment of this Order for good cause shown.”

7. The subject orders are attached Exhibits B-1, B-2, B-3, and B-4.

8. Good cause exists for Legacy’s extension of time to commence drilling to allow for Legacy to revise its development plan based on proximate well data. Legacy intends to drill the initial proposed wells for the spacing units approved by Division Orders R-22336, R-22337, R-22338, and R-22339, but an extension will enable Applicant to maximize productivity, prevent economic waste, and minimize surface and environmental impacts with more efficient planning.

9. Applicant therefore requests that the Division amend the existing orders to extend the time to commence drilling the proposed wells to October 28, 2024.

10. I provided the law firm of Beatty & Wozniak, P.C. with the names and addresses for the working interest owners that remain subject to these pooling orders and instructed that each owner be provided notice of the hearing in these matters.

11. The granting of these applications is in the best interest of conservation, the prevention of waste and the protection of correlative rights.

12. I hereby swear that to the best of my knowledge and belief, all of the matters set forth herein are true, correct, and accurate.

*[Remainder of page left intentionally blank]*

FURTHER AFFIANT SAYETH NOT.

Dated this 2nd day of October, 2023.

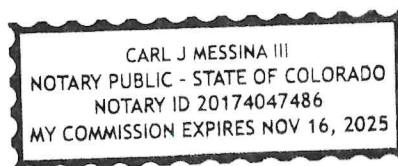
  
Taylor Thoreson  
Legacy Reserves Operating LP

STATE OF COLORADO )  
 ) ss.  
CITY AND COUNTY OF DENVER )

The foregoing instrument was subscribed and sworn to before me this 2nd day of October, 2023, by Taylor Thoreson, VP of Land and Business Development for Legacy Reserves Operating LP.

Witness my hand and official seal.

My commission expires: 11-16-2025



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

**APPLICATION OF LEGACY RESERVES  
OPERATING LP FOR A HORIZONTAL SPACING  
UNIT AND COMPULSORY POOLING, LEA  
COUNTY, NEW MEXICO**

Case No. \_\_\_\_\_

**APPLICATION**

Legacy Reserves Operating LP (“Legacy”) OGRID No. 294281 through its undersigned attorneys, hereby files this Application with the Oil Conservation Division (“Division”) pursuant to the provisions of NMSA 1978, Section 70-2-17, for an order (1) creating a standard 320-acre, more or less, spacing and proration unit comprised of the  $W\frac{1}{2}W\frac{1}{2}$  of Section 14 and  $W\frac{1}{2}W\frac{1}{2}$  of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and (2) pooling all uncommitted mineral interests in the Bone Spring formation, designated as an oil pool, underlying said unit.

In support of its Application, Legacy states the following:

1. Legacy is a working interest owner in the proposed horizontal spacing and proration unit (“HSU”) and has a right to drill a well thereon.
2. Legacy proposes and dedicates the Sapphire Fed Com 501H Well as an initial well to the HSU.
3. Legacy proposes the Sapphire Fed Com 501H Well, an oil well, to be horizontally drilled from a surface location in the  $NW\frac{1}{4}NW\frac{1}{4}$  of Section 14, Township 19 South, Range 33 East, N.M.P.M, to a bottom hole location in the  $SW\frac{1}{4}SW\frac{1}{4}$  of Section 23, Township 19 South, Range 33 East, N.M.P.M.

4. The well is orthodox in its location, and its take points and lateral comply with Statewide Rules for setbacks.

5. Legacy has sought in good faith, but has been unable to obtain, voluntary agreement from all interest owners to participate in the drilling of the well or in the commitment of their interests to the well for its development within the proposed HSU.

6. The pooling of all interests in the Bone Spring formation within the proposed HSU, and creation of the spacing unit, will avoid the drilling of unnecessary wells, prevent waste and protect correlative rights. In order to provide for its just and fair share of the oil and gas underlying the subject lands, Legacy requests that all uncommitted interests in this HSU be pooled and that Legacy be designated the operator of the proposed horizontal well and HSU.

WHEREFORE, Legacy requests that this Application be set for hearing on October 23, 2021, before an Examiner of the Oil Conservation Division, and after notice and hearing as required by law, the Division enter an order:

A. Approving the creation of a standard 320-acre, more or less, spacing and proration unit comprised of the  $W\frac{1}{2}W\frac{1}{2}$  of Section 14 and the  $W\frac{1}{2}W\frac{1}{2}$  of Section 23, Township 19 South, Range 33 East, Lea County, New Mexico;

B. Pooling all uncommitted mineral interests in the Bone Spring formation underlying the proposed HSU.

C. Approving the Sapphire Fed Com 501H Well as the well for the HSU.

D. Designating Legacy as operator of this HSU and the horizontal well to be drilled thereon;

E. Authorizing Legacy to recover its costs of drilling, equipping, and completing the well;



F. Approving actual operating charges and costs of supervision, to the maximum extent allowable, while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and

G. Setting a 200% charge for the risk assumed by Legacy in drilling and completing the well in the event a working interest owner elects not to participate in the well.

Respectfully submitted

BEATTY & WOZNIAK, P.C.

  
\_\_\_\_\_  
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***Application of Legacy Reserves Operating LP for a Horizontal Spacing Unit and Compulsory Pooling, Lea County, New Mexico.*** Applicant in the above-styled cause seeks an order from the Division: (1) creating a standard 320-acre, more or less, spacing and proration unit comprised of the  $W\frac{1}{2}W\frac{1}{2}$  of Section 14 and  $W\frac{1}{2}W\frac{1}{2}$  of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and (2) pooling all uncommitted mineral interests in the Bone Spring formation, designated as an oil pool, underlying said unit. The proposed well to be dedicated to the horizontal spacing unit is the Sapphire Fed Com 501H Well, an oil well, to be horizontally drilled from a surface location in the  $NW\frac{1}{4}NW\frac{1}{4}$  of Section 14, Township 19 South, Range 33 East, N.M.P.M, to a bottom hole location in the  $SW\frac{1}{4}SW\frac{1}{4}$  of Section 23, Township 19 South, Range 33 East, N.M.P.M. The well is orthodox in location and the take points and lateral comply with Statewide Rules for setbacks; also to be considered will be the cost of drilling and completing the well and the allocation of the costs thereof; actual operating costs and charges for supervision; the designation of the Applicant as Operator of the well and unit; and a 200% charge for the risk involved in drilling and completing the well. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.

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

**APPLICATION OF LEGACY RESERVES  
OPERATING LP FOR A HORIZONTAL SPACING  
UNIT AND COMPULSORY POOLING, LEA  
COUNTY, NEW MEXICO**

Case No. \_\_\_\_\_

**APPLICATION**

Legacy Reserves Operating LP (“Legacy”) OGRID No. 294281 through its undersigned attorneys, hereby files this Application with the Oil Conservation Division (“Division”) pursuant to the provisions of NMSA 1978, Section 70-2-17, for an order (1) creating a standard 320-acre, more or less, spacing and proration unit comprised of the E½W½ of Section 14 and E½W½ of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and (2) pooling all uncommitted mineral interests in the Bone Spring formation, designated as an oil pool, underlying said unit.

In support of its Application, Legacy states the following:

1. Legacy is a working interest owner in the proposed horizontal spacing and proration unit (“HSU”) and has a right to drill a well thereon.
2. Legacy proposes and dedicates the Sapphire Fed Com 502H Well as an initial well to the HSU.
3. Legacy proposes the Sapphire Fed Com 502H Well, an oil well, to be horizontally drilled from a surface location in the NW¼NW¼ of Section 14, Township 19 South, Range 33 East, N.M.P.M, to a bottom hole location in the SE¼SW¼ of Section 23, Township 19 South, Range 33 East, N.M.P.M.

4. The well is orthodox in its location, and its take points and lateral comply with Statewide Rules for setbacks.

5. Legacy has sought in good faith, but has been unable to obtain, voluntary agreement from all interest owners to participate in the drilling of the well or in the commitment of their interests to the well for its development within the proposed HSU.

6. The pooling of all interests in the Bone Spring formation within the proposed HSU, and creation of the spacing unit, will avoid the drilling of unnecessary wells, prevent waste and protect correlative rights. In order to provide for its just and fair share of the oil and gas underlying the subject lands, Legacy requests that all uncommitted interests in this HSU be pooled and that Legacy be designated the operator of the proposed horizontal well and HSU.

WHEREFORE, Legacy requests that this Application be set for hearing on October 23, 2021, before an Examiner of the Oil Conservation Division, and after notice and hearing as required by law, the Division enter an order:

A. Approving the creation of a standard 320-acre, more or less, spacing and proration unit comprised of the E $\frac{1}{2}$ W $\frac{1}{2}$  of Section 14 and the E $\frac{1}{2}$ W $\frac{1}{2}$  of Section 23, Township 19 South, Range 33 East, Lea County, New Mexico;

B. Pooling all uncommitted mineral interests in the Bone Spring formation underlying the proposed HSU.

C. Approving the Sapphire Fed Com 502H Well as the well for the HSU.

D. Designating Legacy as operator of this HSU and the horizontal well to be drilled thereon;


E. Authorizing Legacy to recover its costs of drilling, equipping, and completing the well;

F. Approving actual operating charges and costs of supervision, to the maximum extent allowable, while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and

G. Setting a 200% charge for the risk assumed by Legacy in drilling and completing the well in the event a working interest owner elects not to participate in the well.

Respectfully submitted

BEATTY & WOZNIAK, P.C.

  
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***Application of Legacy Reserves Operating LP for a Horizontal Spacing Unit and Compulsory Pooling, Lea County, New Mexico.*** Applicant in the above-styled cause seeks an order from the Division: (1) creating a standard 320-acre, more or less, spacing and proration unit comprised of the E $\frac{1}{2}$ W $\frac{1}{2}$  of Section 14 and E $\frac{1}{2}$ W $\frac{1}{2}$  of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and (2) pooling all uncommitted mineral interests in the Bone Spring formation, designated as an oil pool, underlying said unit. The proposed well to be dedicated to the horizontal spacing unit is the Sapphire Fed Com 502H Well, an oil well, to be horizontally drilled from a surface location in the NW $\frac{1}{4}$ NW $\frac{1}{4}$  of Section 14, Township 19 South, Range 33 East, N.M.P.M, to a bottom hole location in the SE $\frac{1}{4}$ SW $\frac{1}{4}$  of Section 23, Township 19 South, Range 33 East, N.M.P.M. The well is orthodox in location and the take points and lateral comply with Statewide Rules for setbacks; also to be considered will be the cost of drilling and completing the well and the allocation of the costs thereof; actual operating costs and charges for supervision; the designation of the Applicant as Operator of the well and unit; and a 200% charge for the risk involved in drilling and completing the well. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.

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

**APPLICATION OF LEGACY RESERVES  
OPERATING LP FOR A HORIZONTAL SPACING  
UNIT AND COMPULSORY POOLING, LEA  
COUNTY, NEW MEXICO**

Case No. \_\_\_\_\_

**APPLICATION**

Legacy Reserves Operating LP (“Legacy”) OGRID No. 294281 through its undersigned attorneys, hereby files this Application with the Oil Conservation Division (“Division”) pursuant to the provisions of NMSA 1978, Section 70-2-17, for an order (1) creating a standard 320-acre, more or less, spacing and proration unit comprised of the W½E½ of Section 14 and W½E½ of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and (2) pooling all uncommitted mineral interests in the Bone Spring formation, designated as an oil pool, underlying said unit.

In support of its Application, Legacy states the following:

1. Legacy is a working interest owner in the proposed horizontal spacing and proration unit (“HSU”) and has a right to drill a well thereon.
2. Legacy proposes and dedicates the Sapphire Fed Com 503H Well as an initial well to the HSU.
3. Legacy proposes the Sapphire Fed Com 503H Well, an oil well, to be horizontally drilled from a surface location in the NW¼NE¼ of Section 14, Township 19 South, Range 33 East, N.M.P.M, to a bottom hole location in the SW¼SE¼ of Section 23, Township 19 South, Range 33 East, N.M.P.M.

4. The well is orthodox in its location, and its take points and lateral comply with Statewide Rules for setbacks.

5. Legacy has sought in good faith, but has been unable to obtain, voluntary agreement from all interest owners to participate in the drilling of the well or in the commitment of their interests to the well for its development within the proposed HSU.

6. The pooling of all interests in the Bone Spring formation within the proposed HSU, and creation of the spacing unit, will avoid the drilling of unnecessary wells, prevent waste and protect correlative rights. In order to provide for its just and fair share of the oil and gas underlying the subject lands, Legacy requests that all uncommitted interests in this HSU be pooled and that Legacy be designated the operator of the proposed horizontal well and HSU.

WHEREFORE, Legacy requests that this Application be set for hearing on October 23, 2021, before an Examiner of the Oil Conservation Division, and after notice and hearing as required by law, the Division enter an order:

A. Approving the creation of a standard 320-acre, more or less, spacing and proration unit comprised of the W $\frac{1}{2}$ E $\frac{1}{2}$  of Section 14 and the W $\frac{1}{2}$ E $\frac{1}{2}$  of Section 23, Township 19 South, Range 33 East, Lea County, New Mexico;

B. Pooling all uncommitted mineral interests in the Bone Spring formation underlying the proposed HSU.

C. Approving the Sapphire Fed Com 503H Well as the well for the HSU.

D. Designating Legacy as operator of this HSU and the horizontal well to be drilled thereon;

E. Authorizing Legacy to recover its costs of drilling, equipping, and completing the well;



F. Approving actual operating charges and costs of supervision, to the maximum extent allowable, while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and

G. Setting a 200% charge for the risk assumed by Legacy in drilling and completing the well in the event a working interest owner elects not to participate in the well.

Respectfully submitted

BEATTY & WOZNIAK, P.C.

  
\_\_\_\_\_  
Jobediah Rittenhouse  
1675 Broadway, Suite 600  
Denver, CO 80202  
(303) 407-4457  
[jrittenhouse@bwenerylaw.com](mailto:jrittenhouse@bwenerylaw.com)

***Application of Legacy Reserves Operating LP for a Horizontal Spacing Unit and Compulsory Pooling, Lea County, New Mexico.*** Applicant in the above-styled cause seeks an order from the Division: (1) creating a standard 320-acre, more or less, spacing and proration unit comprised of the W $\frac{1}{2}$ E $\frac{1}{2}$  of Section 14 and W $\frac{1}{2}$ E $\frac{1}{2}$  of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and (2) pooling all uncommitted mineral interests in the Bone Spring formation, designated as an oil pool, underlying said unit. The proposed well to be dedicated to the horizontal spacing unit is the Sapphire Fed Com 503H Well, an oil well, to be horizontally drilled from a surface location in the NW $\frac{1}{4}$ NE $\frac{1}{4}$  of Section 14, Township 19 South, Range 33 East, N.M.P.M, to a bottom hole location in the SW $\frac{1}{4}$ SE $\frac{1}{4}$  of Section 23, Township 19 South, Range 33 East, N.M.P.M. The well is orthodox in location and the take points and lateral comply with Statewide Rules for setbacks; also to be considered will be the cost of drilling and completing the well and the allocation of the costs thereof; actual operating costs and charges for supervision; the designation of the Applicant as Operator of the well and unit; and a 200% charge for the risk involved in drilling and completing the well. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.

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

**APPLICATION OF LEGACY RESERVES  
OPERATING LP FOR A HORIZONTAL SPACING  
UNIT AND COMPULSORY POOLING, LEA  
COUNTY, NEW MEXICO**

Case No. \_\_\_\_\_

**APPLICATION**

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4. The well is orthodox in its location, and its take points and lateral comply with Statewide Rules for setbacks.

5. Legacy has sought in good faith, but has been unable to obtain, voluntary agreement from all interest owners to participate in the drilling of the well or in the commitment of their interests to the well for its development within the proposed HSU.

6. The pooling of all interests in the Bone Spring formation within the proposed HSU, and creation of the spacing unit, will avoid the drilling of unnecessary wells, prevent waste and protect correlative rights. In order to provide for its just and fair share of the oil and gas underlying the subject lands, Legacy requests that all uncommitted interests in this HSU be pooled and that Legacy be designated the operator of the proposed horizontal well and HSU.

WHEREFORE, Legacy requests that this Application be set for hearing on October 23, 2021, before an Examiner of the Oil Conservation Division, and after notice and hearing as required by law, the Division enter an order:

A. Approving the creation of a standard 320-acre, more or less, spacing and proration unit comprised of the E $\frac{1}{2}$ E $\frac{1}{2}$  of Section 14 and the E $\frac{1}{2}$ E $\frac{1}{2}$  of Section 23, Township 19 South, Range 33 East, Lea County, New Mexico;

B. Pooling all uncommitted mineral interests in the Bone Spring formation underlying the proposed HSU.

C. Approving the Sapphire Fed Com 504H Well as the well for the HSU.

D. Designating Legacy as operator of this HSU and the horizontal well to be drilled thereon;

E. Authorizing Legacy to recover its costs of drilling, equipping, and completing the well;

F. Approving actual operating charges and costs of supervision, to the maximum extent allowable, while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and

G. Setting a 200% charge for the risk assumed by Legacy in drilling and completing the well in the event a working interest owner elects not to participate in the well.

Respectfully submitted

BEATTY & WOZNIAK, P.C.

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

**IN THE MATTER OF APPLICATION FOR  
COMPULSORY POOLING SUBMITTED BY  
LEGACY RESERVES OPERATING LP**

**CASE NO. 22226  
ORDER NO. R-22336**

**ORDER**

The Director of the New Mexico Oil Conservation Division (“OCD”), having heard this matter through a Hearing Examiner on July 21, 2022, and after considering the testimony, evidence, and recommendation of the Hearing Examiner, issues the following Order.

**FINDINGS OF FACT**

1. Legacy Reserves Operating, LP (“Operator”) submitted an application (“Application”) to compulsory pool the uncommitted oil and gas interests within the spacing unit (“Unit”) described in Exhibit A. The Unit is expected to be a standard horizontal spacing unit. 19.15.16.15(B) NMAC. Operator seeks to be designated the operator of the Unit.
2. Operator will dedicate the well(s) described in Exhibit A (“Well(s)”) to the Unit.
3. Operator proposes the supervision and risk charges for the Well(s) described in Exhibit A.
4. Operator identified the owners of uncommitted interests in oil and gas minerals in the Unit and provided evidence that notice was given.
5. The Application was heard by the Hearing Examiner on the date specified above, during which Operator presented evidence through affidavits in support of the Application. No other party presented evidence at the hearing.

**CONCLUSIONS OF LAW**

6. OCD has jurisdiction to issue this Order pursuant to NMSA 1978, Section 70-2-17.
7. Operator is the owner of an oil and gas working interest within the Unit.
8. Operator satisfied the notice requirements for the Application and the hearing as required by 19.15.4.12 NMAC.
9. OCD satisfied the notice requirements for the hearing as required by 19.15.4.9 NMAC.
10. Operator has the right to drill the Well(s) to a common source of supply at the

depth(s) and location(s) in the Unit described in Exhibit A.

11. The Unit contains separately owned uncommitted interests in oil and gas minerals.
12. Some of the owners of the uncommitted interests have not agreed to commit their interests to the Unit.
13. The pooling of uncommitted interests in the Unit will prevent waste and protect correlative rights, including the drilling of unnecessary wells.
14. This Order affords to the owner of an uncommitted interest the opportunity to produce his just and equitable share of the oil or gas in the pool.

### **ORDER**

15. The uncommitted interests in the Unit are pooled as set forth in Exhibit A.
16. The Unit shall be dedicated to the Well(s) set forth in Exhibit A.
17. Operator is designated as operator of the Unit and the Well(s).
18. If the location of a well will be unorthodox under the spacing rules in effect at the time of completion, Operator shall obtain the OCD's approval for a non-standard location in accordance with 19.15.16.15(C) NMAC.
19. The Operator shall commence drilling the Well(s) within one year after the date of this Order, and complete each Well no later than one (1) year after the commencement of drilling the Well.
20. This Order shall terminate automatically if Operator fails to comply with Paragraph 19 unless Operator obtains an extension by amending this Order for good cause shown.
21. The infill well requirements in 19.15.13.9 NMAC through 19.15.13.12 NMAC shall be applicable.
22. Operator shall submit each owner of an uncommitted working interest in the pool ("Pooled Working Interest") an itemized schedule of estimated costs to drill, complete, and equip the well ("Estimated Well Costs").
23. No later than thirty (30) days after Operator submits the Estimated Well Costs, the owner of a Pooled Working Interest shall elect whether to pay its share of the Estimated Well Costs or its share of the actual costs to drill, complete and equip the well ("Actual Well Costs") out of production from the well. An owner of a Pooled Working Interest who elects to pay its share of the Estimated Well Costs shall render payment to Operator no later than thirty (30) days after the expiration of the election period, and shall be liable for operating costs, but not risk charges, for the

CASE NO. 22226  
ORDER NO. R-22336

Page 2 of 7



well. An owner of a Pooled Working Interest who fails to pay its share of the Estimated Well Costs or who elects to pay its share of the Actual Well Costs out of production from the well shall be considered to be a "Non-Consenting Pooled Working Interest."

24. No later than one hundred eighty (180) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the Actual Well Costs. The Actual Well Costs shall be considered to be the Reasonable Well Costs unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Reasonable Well Costs after public notice and hearing.
25. No later than sixty (60) days after the expiration of the period to file a written objection to the Actual Well Costs or OCD's order determining the Reasonable Well Costs, whichever is later, each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs shall pay to Operator its share of the Reasonable Well Costs that exceed the Estimated Well Costs, or Operator shall pay to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs its share of the Estimated Well Costs that exceed the Reasonable Well Costs.
26. The reasonable charges for supervision to drill and produce a well ("Supervision Charges") shall not exceed the rates specified in Exhibit A, provided however that the rates shall be adjusted annually pursuant to the COPAS form entitled "Accounting Procedure-Joint Operations."
27. No later than within ninety (90) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the reasonable charges for operating and maintaining the well ("Operating Charges"), provided however that Operating Charges shall not include the Reasonable Well Costs or Supervision Charges. The Operating Charges shall be considered final unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Operating Charges after public notice and hearing.
28. Operator may withhold the following costs and charges from the share of production due to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs: (a) the proportionate share of the Supervision Charges; and (b) the proportionate share of the Operating Charges.
29. Operator may withhold the following costs and charges from the share of production due to each owner of a Non-Consenting Pooled Working Interest: (a) the proportionate share of the Reasonable Well Costs; (b) the proportionate share

of the Supervision and Operating Charges; and (c) the percentage of the Reasonable Well Costs specified as the charge for risk described in Exhibit A.

30. Operator shall distribute a proportionate share of the costs and charges withheld pursuant to paragraph 29 to each Pooled Working Interest that paid its share of the Estimated Well Costs.
31. Each year on the anniversary of this Order, and no later than ninety (90) days after each payout, Operator shall provide to each owner of a Non-Consenting Pooled Working Interest a schedule of the revenue attributable to a well and the Supervision and Operating Costs charged against that revenue.
32. Any cost or charge that is paid out of production shall be withheld only from the share due to an owner of a Pooled Working Interest. No cost or charge shall be withheld from the share due to an owner of a royalty interests. For the purpose of this Order, an unleased mineral interest shall consist of a seven-eighths (7/8) working interest and a one-eighth (1/8) royalty interest.
33. Except as provided above, Operator shall hold the revenue attributable to a well that is not disbursed for any reason for the account of the person(s) entitled to the revenue as provided in the Oil and Gas Proceeds Payment Act, NMSA 1978, Sections 70-10-1 *et seq.*, and relinquish such revenue as provided in the Uniform Unclaimed Property Act, NMSA 1978, Sections 7-8A-1 *et seq.*
34. The Unit shall terminate if (a) the owners of all Pooled Working Interests reach a voluntary agreement; or (b) the well(s) drilled on the Unit are plugged and abandoned in accordance with the applicable rules. Operator shall inform OCD no later than thirty (30) days after such occurrence.
35. OCD retains jurisdiction of this matter for the entry of such orders as may be deemed necessary.

**STATE OF NEW MEXICO  
OIL CONSERVATION DIVISION**

  
ADRIENNE SANDOVAL  
DIRECTOR  
AES/jag

Date: 10/28/2022

CASE NO. 22226  
ORDER NO. R-22336

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## Exhibit A

COMPULSORY POOLING APPLICATION CHECKLIST	
ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS	
<b>Case:</b>	<b>APPLICANT'S RESPONSE</b>
<b>Date</b>	
Applicant	Legacy Reserves Operating LP
Designated Operator & OGRID (affiliation if applicable)	294281
Applicant's Counsel:	James Parrot, Beatty & Wozniak, P.C.
Case Title:	Application of Legacy Reserves Operating LP for a Horizontal Spacing Unit and Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors:	COG Operating LLC, EOA; Jalapeno Corporation, Opp to Aff; MRC Permian Company, EOA; Matador Production Company, EOA
Well Family	Sapphire
<b>Formation/Pool</b>	
Formation Name(s) or Vertical Extent:	Bone Spring
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Entire Formation
Pool Name and Pool Code:	Gem; Bone Spring, East [27230]
Well Location Setback Rules:	Statewide Rules
Spacing Unit Size:	320 acres
<b>Spacing Unit</b>	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	320 acres, more or less
Building Blocks:	Quarter-Quarter sections
Orientation:	North-South
Description: TRS/County	W/2W/2 of Sections 14 and 23, T-19-S, R-33-E, Lea County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
<b>Other Situations</b>	
Depth Severance: Y/N. If yes, description	N
Proximity Tracts: If yes, description	No
Proximity Defining Well: if yes, description	N/A
Applicant's Ownership in Each Tract	Exhibit C
<b>Well(s)</b>	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	

Oil Conservation Division Hearing - July 21, 2022  
Case Nos. 22226 to 22229  
Legacy Reserves Operating LP - Exhibit A

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CASE NO. 22226  
ORDER NO. R-22336

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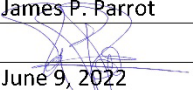
Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit B

Well #1 <i>Received by OCD: 7/14/2022 1:36:04 PM</i>	<b>Sapphire Fed Com 501H Well (API No. Pending)</b> SHL: NW/4NW/4 (Lot D) of Section 14, Township 19 South, Range 33 East, N.M.P.M. BHL: SW/4SW/4 (Lot M) of Section 23, Township 19 South, Range 33 East, N.M.P.M.  Completion Target: Bone Spring Formation Well Orientation: North to South Completion Location: Standard <i>Page 3 of 17</i>
Well #2	
Horizontal Well First and Last Take Points	Exhibit C-2
Completion Target (Formation, TVD and MD)	Exhibits C-5, C-6, and D-2
<b>AFE Capex and Operating Costs</b>	
Drilling Supervision/Month \$	\$8,000
Production Supervision/Month \$	\$800
Justification for Supervision Costs	Exhibit C
Requested Risk Charge	200%
<b>Notice of Hearing</b>	
Proposed Notice of Hearing	Exhibits B and E
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit E
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit F
<b>Ownership Determination</b>	
Land Ownership Schematic of the Spacing Unit	Exhibits C-3, C-4, and C-5
Tract List (including lease numbers and owners)	Exhibits C-3, C-4, and C-5
Pooled Parties (including ownership type)	Exhibits C-4 and C-5
Unlocatable Parties to be Pooled	Exhibits C-4 and C-5
Ownership Depth Severance (including percentage above & below)	None
<b>Joinder</b>	
Sample Copy of Proposal Letter	Exhibit C-5
List of Interest Owners (ie Exhibit A of JOA)	Exhibits C-4 and C-5
Chronology of Contact with Non-Joined Working Interests	Exhibit C-7
Overhead Rates In Proposal Letter	Exhibits C-5 and C-6
Cost Estimate to Drill and Complete	Exhibit C-6
Cost Estimate to Equip Well	Exhibit C-6
Cost Estimate for Production Facilities	Exhibit C-6

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ORDER NO. R-22336

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Geology		
Summary (including special considerations)	Exhibit D	
Spacing Unit Schematic	Exhibits C-2, C-3, and D-1	
Gunbarrel/Lateral Trajectory Schematic	Exhibits C-3, D-1, and D-2	
Well Orientation (with rationale)	Exhibit D	
Target Formation	Exhibit D	
HSU Cross Section	Exhibit D-2	
Depth Severance Discussion	N/A	
<b>Forms, Figures and Tables</b>		
C-102	Exhibit C-2	
Tracts	Exhibit C-3	
Summary of Interests, Unit Recapitulation (Tracts)	Exhibits C-4 and C-5	
General Location Map (including basin)	Exhibit C-1	
Well Bore Location Map	Exhibit C-2, D-1, and D-2	
Structure Contour Map - Subsea Depth	Exhibit D-2	
Cross Section Location Map (including wells)	Exhibit D-1	
Cross Section (including Landing Zone)	Exhibit D-3	
<b>Additional Information</b>		
Special Provisions/Stipulations		
<b>CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.</b>		
<b>Printed Name</b> (Attorney or Party Representative):	James P. Parrot	
<b>Signed Name</b> (Attorney or Party Representative):		
<b>Date:</b>	June 9, 2022	

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CASE NO. 22226  
ORDER NO. R-22336

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

**IN THE MATTER OF APPLICATION FOR  
COMPULSORY POOLING SUBMITTED BY  
LEGACY RESERVES OPERATING LP**

**CASE NO. 22227  
ORDER NO. R-22337**

**ORDER**

The Director of the New Mexico Oil Conservation Division (“OCD”), having heard this matter through a Hearing Examiner on July 21, 2022, and after considering the testimony, evidence, and recommendation of the Hearing Examiner, issues the following Order.

**FINDINGS OF FACT**

1. Legacy Reserves Operating, LP (“Operator”) submitted an application (“Application”) to compulsory pool the uncommitted oil and gas interests within the spacing unit (“Unit”) described in Exhibit A. The Unit is expected to be a standard horizontal spacing unit. 19.15.16.15(B) NMAC. Operator seeks to be designated the operator of the Unit.
2. Operator will dedicate the well(s) described in Exhibit A (“Well(s)”) to the Unit.
3. Operator proposes the supervision and risk charges for the Well(s) described in Exhibit A.
4. Operator identified the owners of uncommitted interests in oil and gas minerals in the Unit and provided evidence that notice was given.
5. The Application was heard by the Hearing Examiner on the date specified above, during which Operator presented evidence through affidavits in support of the Application. No other party presented evidence at the hearing.

**CONCLUSIONS OF LAW**

6. OCD has jurisdiction to issue this Order pursuant to NMSA 1978, Section 70-2-17.
7. Operator is the owner of an oil and gas working interest within the Unit.
8. Operator satisfied the notice requirements for the Application and the hearing as required by 19.15.4.12 NMAC.
9. OCD satisfied the notice requirements for the hearing as required by 19.15.4.9 NMAC.
10. Operator has the right to drill the Well(s) to a common source of supply at the

depth(s) and location(s) in the Unit described in Exhibit A.

11. The Unit contains separately owned uncommitted interests in oil and gas minerals.
12. Some of the owners of the uncommitted interests have not agreed to commit their interests to the Unit.
13. The pooling of uncommitted interests in the Unit will prevent waste and protect correlative rights, including the drilling of unnecessary wells.
14. This Order affords to the owner of an uncommitted interest the opportunity to produce his just and equitable share of the oil or gas in the pool.

### **ORDER**

15. The uncommitted interests in the Unit are pooled as set forth in Exhibit A.
16. The Unit shall be dedicated to the Well(s) set forth in Exhibit A.
17. Operator is designated as operator of the Unit and the Well(s).
18. If the location of a well will be unorthodox under the spacing rules in effect at the time of completion, Operator shall obtain the OCD's approval for a non-standard location in accordance with 19.15.16.15(C) NMAC.
19. The Operator shall commence drilling the Well(s) within one year after the date of this Order, and complete each Well no later than one (1) year after the commencement of drilling the Well.
20. This Order shall terminate automatically if Operator fails to comply with Paragraph 19 unless Operator obtains an extension by amending this Order for good cause shown.
21. The infill well requirements in 19.15.13.9 NMAC through 19.15.13.12 NMAC shall be applicable.
22. Operator shall submit each owner of an uncommitted working interest in the pool ("Pooled Working Interest") an itemized schedule of estimated costs to drill, complete, and equip the well ("Estimated Well Costs").
23. No later than thirty (30) days after Operator submits the Estimated Well Costs, the owner of a Pooled Working Interest shall elect whether to pay its share of the Estimated Well Costs or its share of the actual costs to drill, complete and equip the well ("Actual Well Costs") out of production from the well. An owner of a Pooled Working Interest who elects to pay its share of the Estimated Well Costs shall render payment to Operator no later than thirty (30) days after the expiration of the election period, and shall be liable for operating costs, but not risk charges, for the

CASE NO. 22227  
ORDER NO. R-22337

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well. An owner of a Pooled Working Interest who fails to pay its share of the Estimated Well Costs or who elects to pay its share of the Actual Well Costs out of production from the well shall be considered to be a "Non-Consenting Pooled Working Interest."

24. No later than one hundred eighty (180) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the Actual Well Costs. The Actual Well Costs shall be considered to be the Reasonable Well Costs unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Reasonable Well Costs after public notice and hearing.
25. No later than sixty (60) days after the expiration of the period to file a written objection to the Actual Well Costs or OCD's order determining the Reasonable Well Costs, whichever is later, each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs shall pay to Operator its share of the Reasonable Well Costs that exceed the Estimated Well Costs, or Operator shall pay to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs its share of the Estimated Well Costs that exceed the Reasonable Well Costs.
26. The reasonable charges for supervision to drill and produce a well ("Supervision Charges") shall not exceed the rates specified in Exhibit A, provided however that the rates shall be adjusted annually pursuant to the COPAS form entitled "Accounting Procedure-Joint Operations."
27. No later than within ninety (90) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the reasonable charges for operating and maintaining the well ("Operating Charges"), provided however that Operating Charges shall not include the Reasonable Well Costs or Supervision Charges. The Operating Charges shall be considered final unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Operating Charges after public notice and hearing.
28. Operator may withhold the following costs and charges from the share of production due to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs: (a) the proportionate share of the Supervision Charges; and (b) the proportionate share of the Operating Charges.
29. Operator may withhold the following costs and charges from the share of production due to each owner of a Non-Consenting Pooled Working Interest: (a) the proportionate share of the Reasonable Well Costs; (b) the proportionate share



of the Supervision and Operating Charges; and (c) the percentage of the Reasonable Well Costs specified as the charge for risk described in Exhibit A.

30. Operator shall distribute a proportionate share of the costs and charges withheld pursuant to paragraph 29 to each Pooled Working Interest that paid its share of the Estimated Well Costs.
31. Each year on the anniversary of this Order, and no later than ninety (90) days after each payout, Operator shall provide to each owner of a Non-Consenting Pooled Working Interest a schedule of the revenue attributable to a well and the Supervision and Operating Costs charged against that revenue.
32. Any cost or charge that is paid out of production shall be withheld only from the share due to an owner of a Pooled Working Interest. No cost or charge shall be withheld from the share due to an owner of a royalty interests. For the purpose of this Order, an unleased mineral interest shall consist of a seven-eighths (7/8) working interest and a one-eighth (1/8) royalty interest.
33. Except as provided above, Operator shall hold the revenue attributable to a well that is not disbursed for any reason for the account of the person(s) entitled to the revenue as provided in the Oil and Gas Proceeds Payment Act, NMSA 1978, Sections 70-10-1 *et seq.*, and relinquish such revenue as provided in the Uniform Unclaimed Property Act, NMSA 1978, Sections 7-8A-1 *et seq.*
34. The Unit shall terminate if (a) the owners of all Pooled Working Interests reach a voluntary agreement; or (b) the well(s) drilled on the Unit are plugged and abandoned in accordance with the applicable rules. Operator shall inform OCD no later than thirty (30) days after such occurrence.
35. OCD retains jurisdiction of this matter for the entry of such orders as may be deemed necessary.

STATE OF NEW MEXICO  
OIL CONSERVATION DIVISION



ADRIENNE SANDOVAL  
DIRECTOR

AES/jag

Date: 10/28/2022

CASE NO. 22227  
ORDER NO. R-22337

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## Exhibit A

COMPULSORY POOLING APPLICATION CHECKLIST	
ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS	
Case:	APPLICANT'S RESPONSE
Date	
Applicant	Legacy Reserves Operating LP
Designated Operator & OGRID (affiliation if applicable)	294281
Applicant's Counsel:	James Parrot, Beatty & Wozniak, P.C.
Case Title:	Application of Legacy Reserves Operating LP for a Horizontal Spacing Unit and Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors:	COG Operating LLC, EOA; Jalapeno Corporation, Opp to Aff; MRC Permian Company, EOA; Matador Production Company, EOA
Well Family	Sapphire
<b>Formation/Pool</b>	
Formation Name(s) or Vertical Extent:	Bone Spring
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Entire Formation
Pool Name and Pool Code:	Gem; Bone Spring, East [27230]
Well Location Setback Rules:	Statewide Rules
Spacing Unit Size:	320 acres
<b>Spacing Unit</b>	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	320 acres, more or less
Building Blocks:	Quarter-Quarter sections
Orientation:	North-South
Description: TRS/County	E/2W/2 of Sections 14 and 23, T-19-S, R-33-E, Lea County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
<b>Other Situations</b>	
Depth Severance: Y/N. If yes, description	N
Proximity Tracts: If yes, description	No
Proximity Defining Well: if yes, description	N/A
Applicant's Ownership in Each Tract	Exhibit C
<b>Well(s)</b>	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	

Oil Conservation Division Hearing - July 21, 2022  
Case Nos. 22226 to 22229  
Legacy Reserves Operating LP - Exhibit A

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ORDER NO. R-22337

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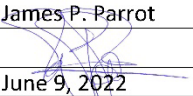
Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit B

Well #1 <i>Received by OCD: 7/14/2022 1:36:04 PM</i>	<b>Sapphire Fed Com 502H Well (API No. Pending)</b> SHL: NW/4NW/4 (Lot D) of Section 14, Township 19 South, Range 33 East, N.M.P.M. BHL: SE/4SW/4 (Lot N) of Section 23, Township 19 South, Range 33 East, N.M.P.M.  Completion Target: Bone Spring Formation Well Orientation: North to South Completion Location: Standard	<i>Page 6 of 17</i>
Well #2		
Horizontal Well First and Last Take Points	Exhibit C-2	
Completion Target (Formation, TVD and MD)	Exhibits C-5, C-6, and D-2	
<b>AFE Capex and Operating Costs</b>		
Drilling Supervision/Month \$	\$8,000	
Production Supervision/Month \$	\$800	
Justification for Supervision Costs	Exhibit C	
Requested Risk Charge	200%	
<b>Notice of Hearing</b>		
Proposed Notice of Hearing	Exhibits B and E	
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit E	
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit F	
<b>Ownership Determination</b>		
Land Ownership Schematic of the Spacing Unit	Exhibits C-3, C-4, and C-5	
Tract List (including lease numbers and owners)	Exhibits C-3, C-4, and C-5	
Pooled Parties (including ownership type)	Exhibits C-4 and C-5	
Unlocatable Parties to be Pooled	Exhibits C-4 and C-5	
Ownership Depth Severance (including percentage above & below)	None	
<b>Joinder</b>		
Sample Copy of Proposal Letter	Exhibit C-5	
List of Interest Owners (ie Exhibit A of JOA)	Exhibits C-4 and C-5	
Chronology of Contact with Non-Joined Working Interests	Exhibit C-7	
Overhead Rates In Proposal Letter	Exhibits C-5 and C-6	
Cost Estimate to Drill and Complete	Exhibit C-6	
Cost Estimate to Equip Well	Exhibit C-6	
Cost Estimate for Production Facilities	Exhibit C-6	

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Geology	Received by OCD: 7/14/2022 1:36:04 PM	Page 7 of 17
Summary (including special considerations)	Exhibit D	
Spacing Unit Schematic	Exhibits C-2, C-3, and D-1	
Gunbarrel/Lateral Trajectory Schematic	Exhibits C-3, D-1, and D-2	
Well Orientation (with rationale)	Exhibit D	
Target Formation	Exhibit D	
HSU Cross Section	Exhibit D-2	
Depth Severance Discussion	N/A	
<b>Forms, Figures and Tables</b>		
C-102	Exhibit C-2	
Tracts	Exhibit C-3	
Summary of Interests, Unit Recapitulation (Tracts)	Exhibits C-4 and C-5	
General Location Map (including basin)	Exhibit C-1	
Well Bore Location Map	Exhibit C-2, D-1, and D-2	
Structure Contour Map - Subsea Depth	Exhibit D-2	
Cross Section Location Map (including wells)	Exhibit D-1	
Cross Section (including Landing Zone)	Exhibit D-3	
<b>Additional Information</b>		
Special Provisions/Stipulations		
<b>CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.</b>		
<b>Printed Name</b> (Attorney or Party Representative):	James P. Parrot	
<b>Signed Name</b> (Attorney or Party Representative):		
<b>Date:</b>	June 9, 2022	

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CASE NO. 22227  
ORDER NO. R-22337

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

**IN THE MATTER OF APPLICATION FOR  
COMPULSORY POOLING SUBMITTED BY  
LEGACY RESERVES OPERATING LP**

**CASE NO. 22228  
ORDER NO. R-22338**

**ORDER**

The Director of the New Mexico Oil Conservation Division (“OCD”), having heard this matter through a Hearing Examiner on July 21, 2022, and after considering the testimony, evidence, and recommendation of the Hearing Examiner, issues the following Order.

**FINDINGS OF FACT**

1. Legacy Reserves Operating, LP (“Operator”) submitted an application (“Application”) to compulsory pool the uncommitted oil and gas interests within the spacing unit (“Unit”) described in Exhibit A. The Unit is expected to be a standard horizontal spacing unit. 19.15.16.15(B) NMAC. Operator seeks to be designated the operator of the Unit.
2. Operator will dedicate the well(s) described in Exhibit A (“Well(s)”) to the Unit.
3. Operator proposes the supervision and risk charges for the Well(s) described in Exhibit A.
4. Operator identified the owners of uncommitted interests in oil and gas minerals in the Unit and provided evidence that notice was given.
5. The Application was heard by the Hearing Examiner on the date specified above, during which Operator presented evidence through affidavits in support of the Application. No other party presented evidence at the hearing.

**CONCLUSIONS OF LAW**

6. OCD has jurisdiction to issue this Order pursuant to NMSA 1978, Section 70-2-17.
7. Operator is the owner of an oil and gas working interest within the Unit.
8. Operator satisfied the notice requirements for the Application and the hearing as required by 19.15.4.12 NMAC.
9. OCD satisfied the notice requirements for the hearing as required by 19.15.4.9 NMAC.
10. Operator has the right to drill the Well(s) to a common source of supply at the

depth(s) and location(s) in the Unit described in Exhibit A.

11. The Unit contains separately owned uncommitted interests in oil and gas minerals.
12. Some of the owners of the uncommitted interests have not agreed to commit their interests to the Unit.
13. The pooling of uncommitted interests in the Unit will prevent waste and protect correlative rights, including the drilling of unnecessary wells.
14. This Order affords to the owner of an uncommitted interest the opportunity to produce his just and equitable share of the oil or gas in the pool.

### **ORDER**

15. The uncommitted interests in the Unit are pooled as set forth in Exhibit A.
16. The Unit shall be dedicated to the Well(s) set forth in Exhibit A.
17. Operator is designated as operator of the Unit and the Well(s).
18. If the location of a well will be unorthodox under the spacing rules in effect at the time of completion, Operator shall obtain the OCD's approval for a non-standard location in accordance with 19.15.16.15(C) NMAC.
19. The Operator shall commence drilling the Well(s) within one year after the date of this Order, and complete each Well no later than one (1) year after the commencement of drilling the Well.
20. This Order shall terminate automatically if Operator fails to comply with Paragraph 19 unless Operator obtains an extension by amending this Order for good cause shown.
21. The infill well requirements in 19.15.13.9 NMAC through 19.15.13.12 NMAC shall be applicable.
22. Operator shall submit each owner of an uncommitted working interest in the pool ("Pooled Working Interest") an itemized schedule of estimated costs to drill, complete, and equip the well ("Estimated Well Costs").
23. No later than thirty (30) days after Operator submits the Estimated Well Costs, the owner of a Pooled Working Interest shall elect whether to pay its share of the Estimated Well Costs or its share of the actual costs to drill, complete and equip the well ("Actual Well Costs") out of production from the well. An owner of a Pooled Working Interest who elects to pay its share of the Estimated Well Costs shall render payment to Operator no later than thirty (30) days after the expiration of the election period, and shall be liable for operating costs, but not risk charges, for the

CASE NO. 22228  
ORDER NO. R-22338

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well. An owner of a Pooled Working Interest who fails to pay its share of the Estimated Well Costs or who elects to pay its share of the Actual Well Costs out of production from the well shall be considered to be a "Non-Consenting Pooled Working Interest."

24. No later than one hundred eighty (180) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the Actual Well Costs. The Actual Well Costs shall be considered to be the Reasonable Well Costs unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Reasonable Well Costs after public notice and hearing.
25. No later than sixty (60) days after the expiration of the period to file a written objection to the Actual Well Costs or OCD's order determining the Reasonable Well Costs, whichever is later, each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs shall pay to Operator its share of the Reasonable Well Costs that exceed the Estimated Well Costs, or Operator shall pay to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs its share of the Estimated Well Costs that exceed the Reasonable Well Costs.
26. The reasonable charges for supervision to drill and produce a well ("Supervision Charges") shall not exceed the rates specified in Exhibit A, provided however that the rates shall be adjusted annually pursuant to the COPAS form entitled "Accounting Procedure-Joint Operations."
27. No later than within ninety (90) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the reasonable charges for operating and maintaining the well ("Operating Charges"), provided however that Operating Charges shall not include the Reasonable Well Costs or Supervision Charges. The Operating Charges shall be considered final unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Operating Charges after public notice and hearing.
28. Operator may withhold the following costs and charges from the share of production due to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs: (a) the proportionate share of the Supervision Charges; and (b) the proportionate share of the Operating Charges.
29. Operator may withhold the following costs and charges from the share of production due to each owner of a Non-Consenting Pooled Working Interest: (a) the proportionate share of the Reasonable Well Costs; (b) the proportionate share



of the Supervision and Operating Charges; and (c) the percentage of the Reasonable Well Costs specified as the charge for risk described in Exhibit A.

30. Operator shall distribute a proportionate share of the costs and charges withheld pursuant to paragraph 29 to each Pooled Working Interest that paid its share of the Estimated Well Costs.
31. Each year on the anniversary of this Order, and no later than ninety (90) days after each payout, Operator shall provide to each owner of a Non-Consenting Pooled Working Interest a schedule of the revenue attributable to a well and the Supervision and Operating Costs charged against that revenue.
32. Any cost or charge that is paid out of production shall be withheld only from the share due to an owner of a Pooled Working Interest. No cost or charge shall be withheld from the share due to an owner of a royalty interests. For the purpose of this Order, an unleased mineral interest shall consist of a seven-eighths (7/8) working interest and a one-eighth (1/8) royalty interest.
33. Except as provided above, Operator shall hold the revenue attributable to a well that is not disbursed for any reason for the account of the person(s) entitled to the revenue as provided in the Oil and Gas Proceeds Payment Act, NMSA 1978, Sections 70-10-1 *et seq.*, and relinquish such revenue as provided in the Uniform Unclaimed Property Act, NMSA 1978, Sections 7-8A-1 *et seq.*
34. The Unit shall terminate if (a) the owners of all Pooled Working Interests reach a voluntary agreement; or (b) the well(s) drilled on the Unit are plugged and abandoned in accordance with the applicable rules. Operator shall inform OCD no later than thirty (30) days after such occurrence.
35. OCD retains jurisdiction of this matter for the entry of such orders as may be deemed necessary.

STATE OF NEW MEXICO  
OIL CONSERVATION DIVISION



ADRIENNE SANDOVAL  
DIRECTOR

AES/jag

Date: 10/28/2022

CASE NO. 22228  
ORDER NO. R-22338

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## Exhibit A

COMPULSORY POOLING APPLICATION CHECKLIST	
ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS	
Case:	APPLICANT'S RESPONSE
Date	
Applicant	Legacy Reserves Operating LP
Designated Operator & OGRID (affiliation if applicable)	294281
Applicant's Counsel:	James Parrot, Beatty & Wozniak, P.C.
Case Title:	Application of Legacy Reserves Operating LP for a Horizontal Spacing Unit and Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors:	COG Operating LLC, EOA; Jalapeno Corporation, Opp to Aff; MRC Permian Company, EOA; Matador Production Company, EOA
Well Family	Sapphire
<b>Formation/Pool</b>	
Formation Name(s) or Vertical Extent:	Bone Spring
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Entire Formation
Pool Name and Pool Code:	Gem; Bone Spring, East [27230]
Well Location Setback Rules:	Statewide Rules
Spacing Unit Size:	320 acres
<b>Spacing Unit</b>	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	320 acres, more or less
Building Blocks:	Quarter-Quarter sections
Orientation:	North-South
Description: TRS/County	W/2E/2 of Sections 14 and 23, T-19-S, R-33-E, Lea County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
<b>Other Situations</b>	
Depth Severance: Y/N. If yes, description	N
Proximity Tracts: If yes, description	No
Proximity Defining Well: if yes, description	N/A
Applicant's Ownership in Each Tract	Exhibit C

Oil Conservation Division Hearing - July 21, 2022  
Case Nos. 22226 to 22229  
Legacy Reserves Operating LP - Exhibit A

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ORDER NO. R-22338

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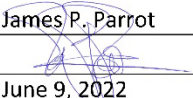
Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit B

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Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	
Well #1	<b>Sapphire Fed Com 503H Well (API No. Pending)</b> SHL: NW/4NE/4 (Lot B) of Section 14, Township 19 South, Range 33 East, N.M.P.M. BHL: SW/4SE/4 (Lot O) of Section 23, Township 19 South, Range 33 East, N.M.P.M.  Completion Target: Bone Spring Formation Well Orientation: North to South Completion Location: Standard
Well #2	
Horizontal Well First and Last Take Points	Exhibit C-2
Completion Target (Formation, TVD and MD)	Exhibits C-5, C-6, and D-2
<b>AFE Capex and Operating Costs</b>	
Drilling Supervision/Month \$	\$8,000
Production Supervision/Month \$	\$800
Justification for Supervision Costs	Exhibit C
Requested Risk Charge	200%
<b>Notice of Hearing</b>	
Proposed Notice of Hearing	Exhibits B and E
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit E
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit F
<b>Ownership Determination</b>	
Land Ownership Schematic of the Spacing Unit	Exhibits C-3, C-4, and C-5
Tract List (including lease numbers and owners)	Exhibits C-3, C-4, and C-5
Pooled Parties (including ownership type)	Exhibits C-4 and C-5
Unlocatable Parties to be Pooled	Exhibits C-4 and C-5
Ownership Depth Severance (including percentage above & below)	None
<b>Joinder</b>	
Sample Copy of Proposal Letter	Exhibit C-5
List of Interest Owners (ie Exhibit A of JOA)	Exhibits C-4 and C-5
Chronology of Contact with Non-Joined Working Interests	Exhibit C-7
Overhead Rates In Proposal Letter	Exhibits C-5 and C-6

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<i>Received by OCD: 7/14/2022 1:36:04 PM</i>	Exhibit C-6	<i>Page 10 of 17</i>
Cost Estimate to Drill and Complete	Exhibit C-6	
Cost Estimate to Equip Well	Exhibit C-6	
Cost Estimate for Production Facilities	Exhibit C-6	
<b>Geology</b>		
Summary (including special considerations)	Exhibit D	
Spacing Unit Schematic	Exhibits C-2, C-3, and D-1	
Gunbarrel/Lateral Trajectory Schematic	Exhibits C-3, D-1, and D-2	
Well Orientation (with rationale)	Exhibit D	
Target Formation	Exhibit D	
HSU Cross Section	Exhibit D-2	
Depth Severance Discussion	N/A	
<b>Forms, Figures and Tables</b>		
C-102	Exhibit C-2	
Tracts	Exhibit C-3	
Summary of Interests, Unit Recapitulation (Tracts)	Exhibits C-4 and C-5	
General Location Map (including basin)	Exhibit C-1	
Well Bore Location Map	Exhibit C-2, D-1, and D-2	
Structure Contour Map - Subsea Depth	Exhibit D-2	
Cross Section Location Map (including wells)	Exhibit D-1	
Cross Section (including Landing Zone)	Exhibit D-3	
<b>Additional Information</b>		
Special Provisions/Stipulations		
<b>CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.</b>		
<b>Printed Name</b> (Attorney or Party Representative):	James P. Parrot	
<b>Signed Name</b> (Attorney or Party Representative):		
<b>Date:</b>	June 9, 2022	

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

**IN THE MATTER OF APPLICATION FOR  
COMPULSORY POOLING SUBMITTED BY  
LEGACY RESERVES OPERATING LP**

**CASE NO. 22229  
ORDER NO. R-22339**

**ORDER**

The Director of the New Mexico Oil Conservation Division (“OCD”), having heard this matter through a Hearing Examiner on July 21, 2022, and after considering the testimony, evidence, and recommendation of the Hearing Examiner, issues the following Order.

**FINDINGS OF FACT**

1. Legacy Reserves Operating, LP (“Operator”) submitted an application (“Application”) to compulsory pool the uncommitted oil and gas interests within the spacing unit (“Unit”) described in Exhibit A. The Unit is expected to be a standard horizontal spacing unit. 19.15.16.15(B) NMAC. Operator seeks to be designated the operator of the Unit.
2. Operator will dedicate the well(s) described in Exhibit A (“Well(s)”) to the Unit.
3. Operator proposes the supervision and risk charges for the Well(s) described in Exhibit A.
4. Operator identified the owners of uncommitted interests in oil and gas minerals in the Unit and provided evidence that notice was given.
5. The Application was heard by the Hearing Examiner on the date specified above, during which Operator presented evidence through affidavits in support of the Application. No other party presented evidence at the hearing.

**CONCLUSIONS OF LAW**

6. OCD has jurisdiction to issue this Order pursuant to NMSA 1978, Section 70-2-17.
7. Operator is the owner of an oil and gas working interest within the Unit.
8. Operator satisfied the notice requirements for the Application and the hearing as required by 19.15.4.12 NMAC.
9. OCD satisfied the notice requirements for the hearing as required by 19.15.4.9 NMAC.
10. Operator has the right to drill the Well(s) to a common source of supply at the

depth(s) and location(s) in the Unit described in Exhibit A.

11. The Unit contains separately owned uncommitted interests in oil and gas minerals.
12. Some of the owners of the uncommitted interests have not agreed to commit their interests to the Unit.
13. The pooling of uncommitted interests in the Unit will prevent waste and protect correlative rights, including the drilling of unnecessary wells.
14. This Order affords to the owner of an uncommitted interest the opportunity to produce his just and equitable share of the oil or gas in the pool.

### **ORDER**

15. The uncommitted interests in the Unit are pooled as set forth in Exhibit A.
16. The Unit shall be dedicated to the Well(s) set forth in Exhibit A.
17. Operator is designated as operator of the Unit and the Well(s).
18. If the location of a well will be unorthodox under the spacing rules in effect at the time of completion, Operator shall obtain the OCD's approval for a non-standard location in accordance with 19.15.16.15(C) NMAC.
19. The Operator shall commence drilling the Well(s) within one year after the date of this Order, and complete each Well no later than one (1) year after the commencement of drilling the Well.
20. This Order shall terminate automatically if Operator fails to comply with Paragraph 19 unless Operator obtains an extension by amending this Order for good cause shown.
21. The infill well requirements in 19.15.13.9 NMAC through 19.15.13.12 NMAC shall be applicable.
22. Operator shall submit each owner of an uncommitted working interest in the pool ("Pooled Working Interest") an itemized schedule of estimated costs to drill, complete, and equip the well ("Estimated Well Costs").
23. No later than thirty (30) days after Operator submits the Estimated Well Costs, the owner of a Pooled Working Interest shall elect whether to pay its share of the Estimated Well Costs or its share of the actual costs to drill, complete and equip the well ("Actual Well Costs") out of production from the well. An owner of a Pooled Working Interest who elects to pay its share of the Estimated Well Costs shall render payment to Operator no later than thirty (30) days after the expiration of the election period, and shall be liable for operating costs, but not risk charges, for the

CASE NO. 22229  
ORDER NO. R-22339

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well. An owner of a Pooled Working Interest who fails to pay its share of the Estimated Well Costs or who elects to pay its share of the Actual Well Costs out of production from the well shall be considered to be a "Non-Consenting Pooled Working Interest."

24. No later than one hundred eighty (180) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the Actual Well Costs. The Actual Well Costs shall be considered to be the Reasonable Well Costs unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Reasonable Well Costs after public notice and hearing.
25. No later than sixty (60) days after the expiration of the period to file a written objection to the Actual Well Costs or OCD's order determining the Reasonable Well Costs, whichever is later, each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs shall pay to Operator its share of the Reasonable Well Costs that exceed the Estimated Well Costs, or Operator shall pay to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs its share of the Estimated Well Costs that exceed the Reasonable Well Costs.
26. The reasonable charges for supervision to drill and produce a well ("Supervision Charges") shall not exceed the rates specified in Exhibit A, provided however that the rates shall be adjusted annually pursuant to the COPAS form entitled "Accounting Procedure-Joint Operations."
27. No later than within ninety (90) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the reasonable charges for operating and maintaining the well ("Operating Charges"), provided however that Operating Charges shall not include the Reasonable Well Costs or Supervision Charges. The Operating Charges shall be considered final unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Operating Charges after public notice and hearing.
28. Operator may withhold the following costs and charges from the share of production due to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs: (a) the proportionate share of the Supervision Charges; and (b) the proportionate share of the Operating Charges.
29. Operator may withhold the following costs and charges from the share of production due to each owner of a Non-Consenting Pooled Working Interest: (a) the proportionate share of the Reasonable Well Costs; (b) the proportionate share

of the Supervision and Operating Charges; and (c) the percentage of the Reasonable Well Costs specified as the charge for risk described in Exhibit A.

30. Operator shall distribute a proportionate share of the costs and charges withheld pursuant to paragraph 29 to each Pooled Working Interest that paid its share of the Estimated Well Costs.
31. Each year on the anniversary of this Order, and no later than ninety (90) days after each payout, Operator shall provide to each owner of a Non-Consenting Pooled Working Interest a schedule of the revenue attributable to a well and the Supervision and Operating Costs charged against that revenue.
32. Any cost or charge that is paid out of production shall be withheld only from the share due to an owner of a Pooled Working Interest. No cost or charge shall be withheld from the share due to an owner of a royalty interests. For the purpose of this Order, an unleased mineral interest shall consist of a seven-eighths (7/8) working interest and a one-eighth (1/8) royalty interest.
33. Except as provided above, Operator shall hold the revenue attributable to a well that is not disbursed for any reason for the account of the person(s) entitled to the revenue as provided in the Oil and Gas Proceeds Payment Act, NMSA 1978, Sections 70-10-1 *et seq.*, and relinquish such revenue as provided in the Uniform Unclaimed Property Act, NMSA 1978, Sections 7-8A-1 *et seq.*
34. The Unit shall terminate if (a) the owners of all Pooled Working Interests reach a voluntary agreement; or (b) the well(s) drilled on the Unit are plugged and abandoned in accordance with the applicable rules. Operator shall inform OCD no later than thirty (30) days after such occurrence.
35. OCD retains jurisdiction of this matter for the entry of such orders as may be deemed necessary.

STATE OF NEW MEXICO  
OIL CONSERVATION DIVISION



ADRIENNE SANDOVAL  
DIRECTOR

AES/jag

Date: 10/28/2022

CASE NO. 22229  
ORDER NO. R-22339

Page 4 of 7



## Exhibit A

COMPULSORY POOLING APPLICATION CHECKLIST	
ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS	
<b>Case:</b>	<b>APPLICANT'S RESPONSE</b>
<b>Date</b>	
Applicant	Legacy Reserves Operating LP
Designated Operator & OGRID (affiliation if applicable)	294281
Applicant's Counsel:	James Parrot, Beatty & Wozniak, P.C.
Case Title:	Application of Legacy Reserves Operating LP for a Horizontal Spacing Unit and Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors:	COG Operating LLC, EOA; Jalapeno Corporation, Opp to Aff; MRC Permian Company, EOA; Matador Production Company, EOA
Well Family	Sapphire
<b>Formation/Pool</b>	
Formation Name(s) or Vertical Extent:	Bone Spring
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Entire Formation
Pool Name and Pool Code:	Gem; Bone Spring, East [27230]
Well Location Setback Rules:	Statewide Rules
Spacing Unit Size:	320 acres
<b>Spacing Unit</b>	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	320 acres, more or less
Building Blocks:	Quarter-Quarter sections
Orientation:	North-South
Description: TRS/County	E/2E/2 of Sections 14 and 23, T-19-S, R-33-E, Lea County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
<b>Other Situations</b>	
Depth Severance: Y/N. If yes, description	N
Proximity Tracts: If yes, description	No
Proximity Defining Well: if yes, description	N/A
Applicant's Ownership in Each Tract	Exhibit C
<b>Well(s)</b>	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	

Oil Conservation Division Hearing - July 21, 2022  
Case Nos. 22226 to 22229  
Legacy Reserves Operating LP - Exhibit A

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CASE NO. 22229  
ORDER NO. R-22339

Page 5 of 7

Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit B

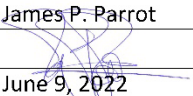


Well #1 <i>Received by OCD: 7/14/2022 1:36:04 PM</i>	<b>Sapphire Fed Com 504H Well (API No. Pending)</b> <i>Page 12 of 17</i> SHL: NW/4NE/4 (Lot B) of Section 14, Township 19 South, Range 33 East, N.M.P.M. BHL: SE/4SE/4 (Lot P) of Section 23, Township 19 South, Range 33 East, N.M.P.M.  Completion Target: Bone Spring Formation Well Orientation: North to South Completion Location: Standard
Well #2	
Horizontal Well First and Last Take Points	Exhibit C-2
Completion Target (Formation, TVD and MD)	Exhibits C-5, C-6, and D-2
<b>AFE Capex and Operating Costs</b>	
Drilling Supervision/Month \$	\$8,000
Production Supervision/Month \$	\$800
Justification for Supervision Costs	Exhibit C
Requested Risk Charge	200%
<b>Notice of Hearing</b>	
Proposed Notice of Hearing	Exhibits B and E
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit E
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit F
<b>Ownership Determination</b>	
Land Ownership Schematic of the Spacing Unit	Exhibits C-3, C-4, and C-5
Tract List (including lease numbers and owners)	Exhibits C-3, C-4, and C-5
Pooled Parties (including ownership type)	Exhibits C-4 and C-5
Unlocatable Parties to be Pooled	Exhibits C-4 and C-5
Ownership Depth Severance (including percentage above & below)	None
<b>Joinder</b>	
Sample Copy of Proposal Letter	Exhibit C-5
List of Interest Owners (ie Exhibit A of JOA)	Exhibits C-4 and C-5
Chronology of Contact with Non-Joined Working Interests	Exhibit C-7
Overhead Rates In Proposal Letter	Exhibits C-5 and C-6
Cost Estimate to Drill and Complete	Exhibit C-6
Cost Estimate to Equip Well	Exhibit C-6
Cost Estimate for Production Facilities	Exhibit C-6

*Released to Imaging: 7/14/2022 1:36:51 PM*

CASE NO. 22229  
ORDER NO. R-22339

Page 6 of 7

Geology	Received by OCD: 7/14/2022 1:36:04 PM	Page 13 of 17
Summary (including special considerations)	Exhibit D	
Spacing Unit Schematic	Exhibits C-2, C-3, and D-1	
Gunbarrel/Lateral Trajectory Schematic	Exhibits C-3, D-1, and D-2	
Well Orientation (with rationale)	Exhibit D	
Target Formation	Exhibit D	
HSU Cross Section	Exhibit D-2	
Depth Severance Discussion	N/A	
<b>Forms, Figures and Tables</b>		
C-102	Exhibit C-2	
Tracts	Exhibit C-3	
Summary of Interests, Unit Recapitulation (Tracts)	Exhibits C-4 and C-5	
General Location Map (including basin)	Exhibit C-1	
Well Bore Location Map	Exhibit C-2, D-1, and D-2	
Structure Contour Map - Subsea Depth	Exhibit D-2	
Cross Section Location Map (including wells)	Exhibit D-1	
Cross Section (including Landing Zone)	Exhibit D-3	
<b>Additional Information</b>		
Special Provisions/Stipulations		
<b>CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.</b>		
<b>Printed Name</b> (Attorney or Party Representative):	James P. Parrot	
<b>Signed Name</b> (Attorney or Party Representative):		
<b>Date:</b>	June 9, 2022	

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CASE NO. 22229  
ORDER NO. R-22339

Page 7 of 7



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**BEATTY & WOZNIAK, P.C.**

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WYOMING

JAMES P. PARROT

(303) 407-4458  
JPARROT@BWENERGYLAW.COM

September 15, 2023

VIA CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO SPACING AND POOLING PROCEEDINGS

Re: Application of Legacy Reserves Operating LP to amend Division Order No. R-22336, to allow an additional year to commence drilling obligations  
Sapphire Fed Com 501H Well (Case No. 23800)

Dear Interest Owners:

This letter is to advise you that Legacy Reserves Operating LP ("Legacy") has filed the enclosed application, Case No. 23800, with the New Mexico Oil Conservation Division to request an additional year to commence drilling the proposed Sapphire Fed Com 501H Well.

In Case No. 23800, Legacy seeks to amend Division Order No. R-22336, entered on October 28, 2022, in Case No. 22226, to allow an additional year to commence drilling the proposed initial well. The Order pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the W½W½ of Section 14 and W½W½ of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and dedicated the unit to the proposed Sapphire Fed Com 501H Well.

A hearing has been requested before a Division Examiner on October 5, 2023, and the status of the hearing can be monitored through the Division's website. Division hearings will commence at 8:15 a.m., traditionally in Porter Hall at the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. However, the hearing will be conducted remotely. For information about remote access, you can visit the Division's website at: <https://www.emnrd.nm.gov/ocd/hearing-info/> or call (505) 476-3441.

You are being notified as an interest owner and are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

**BEATTY & WOZNIAK, P.C.**

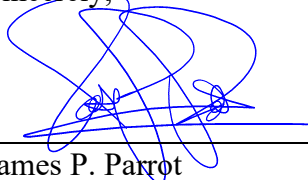
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September 15, 2023  
Case Nos. 23800  
Page 2

Parties appearing in cases are required by Division Rule 19.15.4.13.B NMAC to file a Prehearing Statement at least four business days in advance of a scheduled hearing, but in no event later than 5 p.m. mountain time on the Thursday preceding the scheduled hearing date. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: The names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter, please contact Carl Messina at (855) 534-5200 or at [cmessina@revenirenergy.com](mailto:cmessina@revenirenergy.com).

Sincerely,



---

James P. Parrot

Attorney for Legacy Reserves Operating LP

---

**BEATTY & WOZNIAK, P.C.**

---

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1675 BROADWAY, SUITE 600  
DENVER, CO 80202  
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JAMES P. PARROT

(303) 407-4458  
JPARROT@BWENERGYLAW.COM

September 15, 2023

VIA CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO SPACING AND POOLING PROCEEDINGS

Re: Application of Legacy Reserves Operating LP to amend Division Order No. R-22337 to allow an additional year to commence drilling obligations  
Sapphire Fed Com 502H Well (Case No. 23801)

Dear Interest Owners:

This letter is to advise you that Legacy Reserves Operating LP ("Legacy") has filed the enclosed application, Case No. 23801, with the New Mexico Oil Conservation Division to request an additional year to commence drilling the proposed Sapphire Fed Com 502H Well.

In Case No. 23801, Legacy seeks to amend Division Order No. R-22337, entered on October 28, 2022, in Case No. 22227, to allow an additional year to commence drilling the proposed initial well. The Order pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the E½W½ of Section 14 and E½W½ of Section 23, Township 19 South, Range 33 East, N.M.P.M., Lea County, New Mexico, and dedicated the unit to the proposed Sapphire Fed Com 502H well.

A hearing has been requested before a Division Examiner on October 5, 2023, and the status of the hearing can be monitored through the Division's website. Division hearings will commence at 8:15 a.m., traditionally in Porter Hall at the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. However, the hearing will be conducted remotely. For information about remote access, you can visit the Division's website at: <https://www.emnrd.nm.gov/ocd/hearing-info/> or call (505) 476-3441.

You are being notified as an interest owner and are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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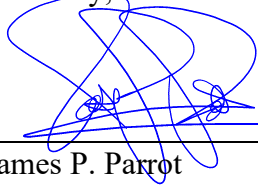
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September 15, 2023  
Case No. 23801  
Page 2

event later than 5 p.m. mountain time on the Thursday preceding the scheduled hearing date. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: The names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter, please contact Carl Messina at (855) 534-5200 or at [cmessina@revenireenergy.com](mailto:cmessina@revenireenergy.com).

Sincerely,



---

James P. Parrot

Attorney for Legacy Reserves Operating LP



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**BEATTY & WOZNIAK, P.C.**

---

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1675 BROADWAY, SUITE 600  
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JAMES P. PARROT

(303) 407-4458  
JPARROT@BWENERGYLAW.COM

September 15, 2023

VIA CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO SPACING AND POOLING PROCEEDINGS

Re: Application of Legacy Reserves Operating LP to amend Division Order No. R-22338 to allow an additional year to commence drilling obligations  
Sapphire Fed Com 503H Well (Case No. 23802)

Dear Interest Owners:

This letter is to advise you that Legacy Reserves Operating LP ("Legacy") has filed the enclosed application, Case No. 23802, with the New Mexico Oil Conservation Division to request an additional year to commence drilling the proposed Sapphire Fed Com 503H Well.

In Case No. 23802, Legacy seeks to amend Division Order No. R-22338, entered on October 28, 2022, in Case No. 22228, to allow an additional year to commence drilling the proposed initial well. The Order pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the W½E½ of Section 14 and W½E½ of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and dedicated the unit to the proposed Sapphire Fed Com 503H Well.

A hearing has been requested before a Division Examiner on October 5, 2023, and the status of the hearing can be monitored through the Division's website. Division hearings will commence at 8:15 a.m., traditionally in Porter Hall at the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. However, the hearing will be conducted remotely. For information about remote access, you can visit the Division's website at: <https://www.emnrd.nm.gov/ocd/hearing-info/> or call (505) 476-3441.

You are being notified as an interest owner and are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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**BEATTY & WOZNIAK, P.C.**

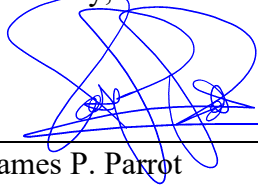
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September 15, 2023  
Case No. 23802  
Page 2

event later than 5 p.m. mountain time on the Thursday preceding the scheduled hearing date. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: The names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter, please contact Carl Messina at (855) 534-5200 or at [cmessina@revenireenergy.com](mailto:cmessina@revenireenergy.com).

Sincerely,



---

James P. Parrot

Attorney for Legacy Reserves Operating LP

---

**BEATTY & WOZNIAK, P.C.**

---

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September 15, 2023

VIA CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO SPACING AND POOLING PROCEEDINGS

Re: Application of Legacy Reserves Operating LP to amend Division Order No. R-22339 to allow an additional year to commence drilling obligations  
Sapphire Fed Com 504H Well (Case No. 23803)

Dear Interest Owners:

This letter is to advise you that Legacy Reserves Operating LP ("Legacy") has filed the enclosed application, Case No. 23803, with the New Mexico Oil Conservation Division to request an additional year to commence drilling the proposed Sapphire Fed Com 504H Well.

In Case No. 23803, Legacy seeks to amend Division Order No. R-22339, entered on October 28, 2022, in Case No. 22229, to allow an additional year to commence drilling the proposed initial well. The Order pooled all uncommitted mineral interests in the Bone Spring formation underlying standard 320-acre, more or less, horizontal spacing unit comprised of the E½E½ of Section 14 and E½E½ of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and dedicated the unit to the proposed Sapphire Fed Com 504H Well.

A hearing has been requested before a Division Examiner on October 5, 2023, and the status of the hearing can be monitored through the Division's website. Division hearings will commence at 8:15 a.m., traditionally in Porter Hall at the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. However, the hearing will be conducted remotely. For information about remote access, you can visit the Division's website at: <https://www.emnrd.nm.gov/ocd/hearing-info/> or call (505) 476-3441.

You are being notified as an interest owner and are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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**BEATTY & WOZNIAK, P.C.**

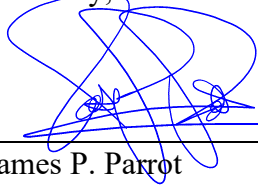
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September 15, 2023  
Case No. 23803  
Page 2

event later than 5 p.m. mountain time on the Thursday preceding the scheduled hearing date. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: The names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter, please contact Carl Messina at (855) 534-5200 or at [cmessina@revenireenergy.com](mailto:cmessina@revenireenergy.com).

Sincerely,



---

James P. Parrot

Attorney for Legacy Reserves Operating LP

## SENDER: COMPLETE THIS SECTION

## COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature

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☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

1 Article Addressed to:

2185-50

AmeriPermian Holdings, LLC  
1733 Woodstead Ct., Suite 206  
The Woodlands, TX 77380



9590 9402 8151 3030 0266 34

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4379 09

PS Form 3811, July 2020 PSN 7530-02-000-9053

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2185-50

AmeriPermian Holdings, LLC  
1733 Woodstead Ct., Suite 206  
The Woodlands, TX 77380

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

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1 Article Addressed to:

2185-50

Ball Oil & Gas LLC  
PO Box 1401  
Roswell, NM 88202



9590 9402 8151 3030 0265 73

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4378 93

PS Form 3811, July 2020 PSN 7530-02-000-9053

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Here

2185-50

Ball Oil & Gas LLC  
PO Box 1401  
Roswell, NM 88202

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

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☐ Agent☐ Addressee

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If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

1 Article Addressed to:

2185-50

Devon Energy Production  
333 West Sheridan Ave.  
Oklahoma City, OK 73102-8260



9590 9402 8151 3030 0265 80

2 Article Number (Transfer from service label)

9589 0710 5270 0881 4379 23

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

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**CERTIFIED MAIL® RECEIPT**  
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OFFICIAL USE

Certified Mail Fee

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)☐ Return Receipt (electronic)Postmark  
Here

2185-50

Devon Energy Production  
333 West Sheridan Ave.  
Oklahoma City, OK 73102-8260

Street and Apt. No., or PO Box No.

Case Nos. 23800 thru 23803

City, State, ZIP+4® Legacy Reserves Operating LP - Exhibit C

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-50

First Southern Funding, LLC  
P.O. Box 328  
Stanford, Kentucky 40484



9590 9402 8151 3030 0266 03

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4378 79

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Registered Mail  
☐ Registered Mail Restricted Delivery  
 (over \$500)

Domestic Return Receipt

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 CERTIFIED MAIL® RECEIPT  
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OFFICIAL USE

Certified Mail Fee

Extra Services &amp; Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$
- ☐ Return Receipt (electronic) \$
- ☐ Certified Mail Restricted Delivery

Postmark  
Here

2185-50

First Southern Funding, LLC  
P.O. Box 328  
Stanford, Kentucky 40484

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-50

McMullen Minerals II, LLC  
PO Box 470857  
Ft. Worth, TX 76147



9590 9402 8151 3030 0263 75

Article Number (Transfer from service label)

9589 0710 5270 0881 4379 30

Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Registered Mail  
☐ Registered Mail Restricted Delivery  
 (over \$500)

Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee

Extra Services &amp; Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$
- ☐ Return Receipt (electronic) \$
- ☐ Certified Mail Restricted Delivery

Postmark  
Here

2185-50

McMullen Minerals II, LLC  
PO Box 470857  
Ft. Worth, TX 76147

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-50

McMullen Minerals LLC  
PO Box 470857  
Ft. Worth, TX 76147



9590 9402 8151 3030 0262 52

Article Number (Transfer from service label)

9589 0710 5270 0881 4379 78

Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Registered Mail  
☐ Registered Mail Restricted Delivery  
 (over \$500)

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OFFICIAL USE

Certified Mail Fee

Extra Services &amp; Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$
- ☐ Return Receipt (electronic) \$
- ☐ Certified Mail Restricted Delivery

Postmark  
Here

2185-50

McMullen Minerals LLC  
PO Box 470857  
Ft. Worth, TX 76147

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Case Nos. 23800 thru 23803

Legacy Reserves Operating LP - Exhibit C

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-50

MCM Permian LLC  
PO Box 1540  
Midland, TX 79702



9590 9402 8151 3030 0262 45

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4379 54

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Anne McQuinn

C. Date of Delivery

9-18-22

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

U.S. Postal Service™

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OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

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MCM Permian LLC  
PO Box 1540  
Midland, TX 79702

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-50

MRC Delaware Resources LLC  
5400 LBJ Freeway, Suite 1500  
Dallas, TX 75240



9590 9402 8151 3030 0263 99

9589 0710 5270 0881 4379 61

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

L. Brown

C. Date of Delivery

9-18-22

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

U.S. Postal Service™

## CERTIFIED MAIL® RECEIPT

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OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

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MRC Delaware Resources LLC  
5400 LBJ Freeway, Suite 1500  
Dallas, TX 75240

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-50

NexGen Capital Resources, LLC  
4000 N. Big Spring St., Suite 210  
Midland, TX 79705



9590 9402 8151 3030 0264 05

9589 0710 5270 0881 4379 47

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

- ☒ Agent  
☐ Addressee

B. Received by (Printed Name)

Valerie Del Rio

C. Date of Delivery

09/18/23

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

U.S. Postal Service™

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Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

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NexGen Capital Resources, LLC  
4000 N. Big Spring St., Suite 210  
Midland, TX 79705

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Case Nos. 23800 thru 23803

Legacy Reserves Operating LP - Exhibit C

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions



## SENDER: COMPLETE THIS SECTION

## COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

2185-50

Nuevo Seis Limited Partnership  
PO Box 2588  
Roswell, NM 88202



9590 9402 8151 3030 0264 12

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4380 12

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

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Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

2185-50

Nuevo Seis Limited Partnership  
PO Box 2588  
Roswell, NM 88202

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

## COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

2185-50

Pegasus Resources II, LLC  
PO Box 470698  
Fort Worth, TX 76147



9590 9402 8151 3030 0262 38

9589 0710 5270 0881 4380 05

PS Form 3811, July 2020 PSN 7530-02-000-9053

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# U.S. Postal Service™

## CERTIFIED MAIL® RECEIPT

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OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$Postmark  
Here

Postage

\$

Total

\$

Pegasus Resources II, LLC  
PO Box 470698  
Fort Worth, TX 76147

City, State, ZIP+4®

2185-50

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

## COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

2185-50

PBEX, LLC  
5600 N. May Ave, Suite 320  
Oklahoma City, OK 73112



9590 9402 8151 3030 0262 21

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4379 92

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OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$Postmark  
Here

Postage

\$

Total

\$

PBEX, LLC  
5600 N. May Ave, Suite 320  
Oklahoma City, OK 73112

City, State, ZIP+4®

2185-50

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

Case Nos. 23800 thru 23803...

Legacy Reserves Operating LP - Exhibit C



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>Complete items 1, 2, and 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>2185-50</p> <p>Pegasus Resources LLC            PO Box 470698            Fort Worth, TX 76147</p>		<p>B. Received by (Printed Name) <i>Thomas</i> C. Date of Delivery <i>10/18</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0881 5250 71</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail (over \$500)</p>	

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee	Postmark
Extra Services & Fees (check box, add fee as appropriate)	2185-50
<input type="checkbox"/> Return Receipt (hardcopy)	
<input type="checkbox"/> Return Receipt (electronic)	
Pegasus Resources LLC PO Box 470698 Fort Worth, TX 76147	
Street and Apt. No., or PO Box No.	
City, State, ZIP+4®	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>Complete items 1, 2, and 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>2185-50</p> <p>TMT Energy Resources, Inc.            5600 N. May Ave., Suite 320            Oklahoma City, OK 73112</p>		<p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0881 5250 64</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail (over \$500)</p>	

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	2185-50
<input type="checkbox"/> Return Receipt (hardcopy)	
<input type="checkbox"/> Return Receipt (electronic)	
<input type="checkbox"/> Certified Mail Restricted Delivery	
<input type="checkbox"/> Adult Signature Required	
<input type="checkbox"/> Adult Signature Restricted Delivery	
TMT Energy Resources, Inc. 5600 N. May Ave., Suite 320 Oklahoma City, OK 73112	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>Complete items 1, 2, and 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>Sabrina Melton</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>2185-50</p> <p>Voyage Energy, LP            P.O. Box 11232            Midland, TX 79702</p>		<p>B. Received by (Printed Name) <i>Sabrina Melton</i> C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0881 5250 19</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail (over \$500)</p>	

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee	Postmark
Extra Services & Fees (check box, add fee as appropriate)	2185-50
<input type="checkbox"/> Return Receipt (hardcopy)	
Voyage Energy, LP P.O. Box 11232 Midland, TX 79702	
Street and Apt. No., or PO Box No.	
City, State, ZIP+4®	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-50

Wing Resources VI, LLC  
2100 McKinney Avenue, Suite 1540  
Dallas, TX 75201



9590 9402 8151 3030 6942 53

Article Number (Transfer from service label)

9589 0710 5270 0881 5250 26

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*
☐ Agent  
☐ Addressee

B. Received by (Printed Name)

*Sam Chaco*

C. Date of Delivery

9/18/23

D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™

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Certified Mail Fee

Extra Services &amp; Fees (check box, add fee as appropriate)

2185-50 mark

Wing Resources VI, LLC  
2100 McKinney Avenue, Suite 1540  
Dallas, TX 75201

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-50

Yates Energy Corporation  
PO Box 2323  
Roswell, NM 88202-2323



9590 9402 8151 3030 6947 58

Article Number (Transfer from service label)

9589 0710 5270 0881 5250 33

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Pat Escalante*
☐ Agent  
☐ Addressee

B. Received by (Printed Name)

*PAT ESCALANTE*

C. Date of Delivery

SEP 19 2023

D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

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Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

2185-50 mark

Yates Energy Corporation  
PO Box 2323  
Roswell, NM 88202-2323

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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Certified Mail Fee  
\$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$

Postmark Here

2185-50

James K. Lusk & Martha Lusk Trust  
2020 Osceola  
Denver, CO 80212

Street and Apt. No., or PO Box No.  
City, State, ZIP+4®

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Certified Mail Fee  
\$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$

Postmark Here

2185-50

Red River Holdings, LLC  
P.O. Box 10886  
Midland, TX 79702

Street and Apt. No., or PO Box No.  
City, State, ZIP+4®

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**OFFICIAL USE**

Certified Mail Fee  
\$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$

Postmark Here

2185-50

Chevron USA Inc.  
1400 Smith Street, Ste. 3600  
Houston, TX 77210

Street and Apt. No., or PO Box No.  
City, State, ZIP+4®

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**OFFICIAL USE**

Certified Mail Fee  
\$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$

Postmark Here

2185-50

Grewal Royalty LLC  
45 Rockefeller Plaza, Suite 2410  
New York, NY 10111

Street and Apt. No., or PO Box No.  
City, State, ZIP+4®

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Certified Mail Fee  
\$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark Here

2185-50

Olin E. Groves  
2507 Cimmaron  
Midland, TX 79705

Street and Apt. No., or PO Box No.  
City, State, ZIP+4®

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**OFFICIAL USE**

Certified Mail Fee  
\$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$

Postmark Here

2185-50

Elk Range Royalties II, LP  
2110 Farrington Street  
Dallas, TX 75207

Street and Apt. No., or PO Box No.  
City, State, ZIP+4®

Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit C

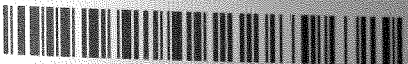
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



9509 0710 5270 0881 5250 95	<b>U.S. Postal Service™</b>	
	<b>CERTIFIED MAIL® RECEIPT</b>	
	<i>Domestic Mail Only</i>	
	For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a>	
	<b>OFFICIAL USE</b>	
	Certified Mail Fee	\$
	Extra Services & Fees (check box, add fee as appropriate)	
	<input type="checkbox"/> Return Receipt (hardcopy)	\$
	<input type="checkbox"/> Return Receipt (electronic)	\$
	Postmark 2185-50	
	S.E.S. Investments, LTD P.O. Box 10886 Midland, TX 79702	
	Street and Apt. No., or P.O. Box No.	
	City, State, ZIP+4®	
	PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p> <input checked="" type="checkbox"/> Complete items 1, 2, and 3.  <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.  <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.         </p>	<p>           A. Signature  <input checked="" type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee         </p>
<p>           B. Received by (Printed Name)            Sabrina Melton         </p>	<p>           C. Date of Delivery         </p>
<p>           D. Is delivery address different from item 1?            If YES, enter delivery address below:         </p>	<p> <input type="checkbox"/> Yes  <input checked="" type="checkbox"/> No         </p>
<p>           3. Service Type  <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery         </p>	<p> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery         </p>
<p>           2. Article Number (Transfer from service label)            9589 0710 5270 0881 5252 24         </p>	<p>           4. Delivery Point (Printed Name)            5601            5601            5601         </p>



9590 9402 8151 3030 6947 65

Domestic Return Receipt

9589 0710 5270 0881 5252 24

Page 80 of 113

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<p>Certified Mail Fee</p> <p>\$ _____</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Return Receipt (hardcopy)  <input type="checkbox"/> Return Receipt (electronic)  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Adult Signature Required  <input type="checkbox"/> Adult Signature Restricted Delivery </div> <div> \$ _____  \$ _____  \$ _____  \$ _____  \$ _____ </div> </div> <p>Postage</p> <p>\$ _____</p> <p><b>Total</b></p> <p>\$ _____</p>	<div style="text-align: center; font-size: 1.5em;"> Postmark Here </div> <div style="text-align: center; margin-top: 100px;"> 2185-51 </div>
---	--


**Sent to:** Red River Holdings, LLC

**Street:** P.O. Box 10886

**City:** Midland, TX 79702

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <div style="text-align: right; margin-top: 20px;">2185-51</div> <p style="margin-top: 40px;">Voyage Energy, LP P.O. Box 11232 Midland, TX 79702</p> <div style="text-align: center; margin-top: 20px;">  </div> <p style="text-align: center; font-weight: bold; margin-top: 5px;">9590 9402 8151 3030 6941 92</p> <p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold; margin-top: 5px;">9589 0710 5270 0881 5251 56</p>	<p>A. Signature</p> <p><b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Date of Delivery</p> <p><i>April 91 - delivered</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p style="margin-left: 40px;">red Mail</p> <p style="margin-left: 40px;">red Mail Restricted Delivery</p> <p style="margin-left: 40px;">r \$500)</p> <div style="margin-top: 20px;"> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery         </div>

Domestic Return Receipt

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	2185-51
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <p><b>Voyage Energy, LP</b>  <b>P.O. Box 11232</b>  <b>Midland, TX 79702</b></p> </div> <div style="width: 50%; border-top: 1px solid black; border-bottom: 1px dashed black; height: 40px;"></div> </div>	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY																	
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>		<p>A. Signature <b>X</b> <i>Sabrina Melton</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Sabrina Melton</i> C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																	
<p>1. Article Addressed to</p> <p>S.E.S. Investments, LTD P.O. Box 10886 Midland, TX 79702</p> <p>2185-51</p>																			
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0881 5251 18</p>		<p>3. Service Type</p> <table border="0"><tr><td><input type="checkbox"/> Adult Signature</td><td><input type="checkbox"/> Priority Mail Express®</td></tr><tr><td><input type="checkbox"/> Adult Signature Restricted Delivery</td><td><input type="checkbox"/> Registered Mail™</td></tr><tr><td><input checked="" type="checkbox"/> Certified Mail®</td><td><input type="checkbox"/> Registered Mail Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Certified Mail Restricted Delivery</td><td><input type="checkbox"/> Signature Confirmation™</td></tr><tr><td><input type="checkbox"/> Collect on Delivery</td><td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td><td></td></tr><tr><td>    to Mail</td><td></td></tr><tr><td>    to Mail Restricted Delivery (\$500)</td><td></td></tr></table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		to Mail		to Mail Restricted Delivery (\$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																		
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																		
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																		
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																		
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																		
<input type="checkbox"/> Collect on Delivery Restricted Delivery																			
to Mail																			
to Mail Restricted Delivery (\$500)																			
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>																	

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<b>Certified Mail Fee</b>	
\$	
<b>Extra Services &amp; Fees (<i>check box, add fee as appropriate</i>)</b>	
<input type="checkbox"/>	Return Receipt (hardcopy) \$
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
P.O.	S.E.S. Investments, LTD P.O. Box 10886 Midland, TX 79702
\$ Tot	
\$ Sent to	
Street and Apt. No., or PO Box No. <b>Case Nos. 23800 thru 23803</b>	
City, State, ZIP+4® <b>Legacy Reserves Operating LP--Exhibit C</b>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	




SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <div style="text-align: right; margin-top: 20px;">2185-51</div> <p>Legacy Reserves Operating LP 15 Smith Road, Suite 3000 Midland, TX 79705</p> <div style="text-align: center; margin-top: 20px;">             9590 9402 8151 3030 6944 51         </div>	<p>A. Signature  <div style="text-align: center; font-size: 1.5em; margin-top: 10px;">X <i>R. Doan</i></div> <div style="text-align: right; margin-top: 10px;"> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee         </div> </p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 50%; padding: 5px;">B. Received by (Printed Name) <i>R. Doan</i></td> <td style="width: 50%; padding: 5px;">C. Date of Delivery <i>9-18-23</i></td> </tr> </table> <p style="margin-top: 10px;">D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> </table> <p style="text-align: right; margin-top: 10px;">ed Mail ed Mail Restricted Delivery (over \$500)</p>	B. Received by (Printed Name) <i>R. Doan</i>	C. Date of Delivery <i>9-18-23</i>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery	
B. Received by (Printed Name) <i>R. Doan</i>	C. Date of Delivery <i>9-18-23</i>														
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®														
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™														
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery														
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™														
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery														
<input type="checkbox"/> Collect on Delivery Restricted Delivery															
<p>2. Article Number (Transfer from service label)</p> <div style="text-align: center; font-size: 1.5em; margin-top: 10px;">9589 0710 5270 0881 5253 92</div>															
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p> <p style="text-align: right;">Domestic Return Receipt</p>															

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
PC _____	Postmark Here
\$ _____ To _____	2185-51
\$ _____ Se _____	
Str _____	
City, _____	
PS Form 3800, January 2023 PSN 7530-02-000-9047	






SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature  <div style="border: 1px solid black; width: 150px; height: 40px; margin-top: 5px;"></div> </p> <p style="text-align: right;"> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee </p>
<p>1. Article Addressed to:</p> <div style="text-align: right; margin-top: 20px;">2185-51</div> <p style="margin-top: 40px;">Devon Energy Production Co., LP  333 West Sheridan Ave.  Oklahoma City, OK 73102-8260</p>	<p>B. Received by (<i>Printed Name</i>)</p> <hr/> <p>C. Date of Delivery</p> <hr/> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<div style="text-align: center;">   9590 9402 8151 3030 6943 45 </div>	<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery </div> <div> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery </div> </div>
<p>2. Article Number (<i>Transfer from service label</i>)</p> <p style="font-size: 1.2em; font-weight: bold;">9589 0710 5270 0881 5252 62</p>	<p style="text-align: right;"> <input type="checkbox"/> Restricted Delivery  <input type="checkbox"/> Restricted Delivery </p>

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For delivery information, visit our website at <a href="http://www.usps.com®">www.usps.com®</a> .	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy)      \$ _____	
<div style="text-align: right; margin-bottom: 20px;">           PSN mark            fe            2185-51         </div> <div>           Devon Energy Production Co., LP            333 West Sheridan Ave.            Oklahoma City, OK 73102-8260         </div>	
Sent to _____	
Street and Apt. No., or PO Box No. _____	
City, State, ZIP+4® _____	
PS Form 3800, January 2023 PSN 7530-02-000-9047      See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <div style="text-align: right; margin-top: 20px;">2185-51</div> <p style="margin-top: 40px;">Chevron USA Inc. 1400 Smith Street, Ste. 3600 Houston, TX 77210</p> <div style="text-align: center; margin-top: 20px;">  <p>9590 9402 8151 3030 6942 77</p> </div> <p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">9589 0710 5270 0881 5251 70</p>	<p>A. Signature</p> <p style="text-align: center;"><i>[Signature]</i></p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p style="text-align: center;"><i>[Signature]</i></p> <p>C. Date of Delivery</p> <p style="text-align: center;">9-20-23</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <div style="text-align: center; margin-top: 20px;">0</div>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p>Insured Mail</p> <p>Insured Mail Restricted Delivery (over \$500)</p> </td> <td style="width: 50%; vertical-align: top;"> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p> </td> </tr> </table>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p>Insured Mail</p> <p>Insured Mail Restricted Delivery (over \$500)</p>	<p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p>Insured Mail</p> <p>Insured Mail Restricted Delivery (over \$500)</p>	<p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>		

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL® RECEIPT</b> <i>Domestic Mail Only</i>	
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<b>OFFICIAL USE</b>	
Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
	Postmark Here
	2185-51
Chevron USA Inc. 1400 Smith Street, Ste. 3600 Houston, TX 77210	
Street and Apt. No., or PO Box No.	
City, State, ZIP+4®	Case Nos. 23800 thru 23803
Legacy Reserves Operating LP - Exhibit C	
PS Form 3800, January 2023 9530-02-000-9047	See Reverse for Instructions



<b>SENDER: COMPLETE THIS SECTION</b>	<b>COMPLETE THIS SECTION ON DELIVERY</b>		
<p> <input type="checkbox"/> Complete items 1, 2, and 3.  <input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.  <input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.                 </p>	<p> <b>A. Signature</b>   <div style="float: right;"> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee                     </div> </p>		
<p>                     2185-51                 </p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 5px;"> <b>B. Received by (Printed Name)</b>   </td> <td style="width: 40%; padding: 5px;"> <b>C. Date of Delivery</b>                      9/20/23                 </td> </tr> </table>	<b>B. Received by (Printed Name)</b> 	<b>C. Date of Delivery</b> 9/20/23
<b>B. Received by (Printed Name)</b> 	<b>C. Date of Delivery</b> 9/20/23		
<p>                     Wing Resources VI, LLC                      2100 McKinney Avenue, Suite 1540                      Dallas, TX 75201                 </p>	<p> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes                      If YES, enter delivery address below: <input type="checkbox"/> No                 </p>		
<div style="text-align: center;">                       9590 9402 8151 3030 6942 15                 </div>	<p> <b>3. Service Type</b> </p> <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery                         </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery                         </td> </tr> </table>	<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery		
<p> <b>2. Article Number (Transfer from service label)</b>                      9589 0710 5270 0881 5251                 </p>	<p>                     49                 </p>		

Page 82 of 113

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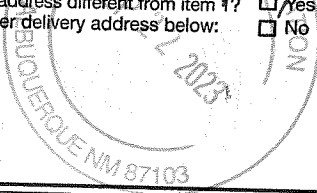
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OFFICIAL USE

Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	2185-51
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____ To _____ \$ _____ Se _____ St _____ Ct _____	

Wing Resources VI, LLC  
 2100 McKinney Avenue, Suite 1540  
 Dallas, TX 75201




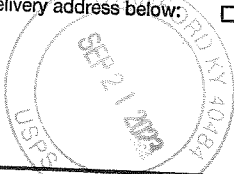
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1 Article Address _____</p> <p style="text-align: right; margin-top: 20px;">2185-51</p> <p style="margin-top: 40px;">Jalapeno Corporation PO Box 1608 Albuquerque, NM 87103-1608</p> <div style="text-align: center; margin-top: 20px;">  <p>9590 9402 8151 3030 6943 14</p> </div>	<p>A. Signature  <div style="border: 1px solid black; padding: 5px; display: inline-block;">  </div> <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Address </p> <p>B. Received by (Printed Name) C. Date of Delivery  <div style="border: 1px solid black; padding: 5px; display: inline-block;"> John Barrack </div> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> 9/22/23 </div> </p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p> <div style="text-align: center; margin-top: 20px;">  </div>
<p>2 Service Label _____</p> <p style="margin-top: 20px;">9589 0710 5270 0881 5251 94</p>	<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery </div> <div style="width: 45%;"> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery </div> </div> <p style="margin-top: 10px;"> <input type="checkbox"/> I Mail  <input type="checkbox"/> I Mail Restricted Delivery (500) </p>

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

<h1 style="margin: 0;">U.S. Postal Service™</h1> <h2 style="margin: 0;">CERTIFIED MAIL® RECEIPT</h2> <p style="margin: 0;"><i>Domestic Mail Only</i></p>	
For delivery information, visit our website at <a href="http://www.usps.com®">www.usps.com®</a> .	
OFFICIAL USE	
<b>Certified Mail Fee</b> \$ _____  <b>Extra Services &amp; Fees (check box, add fee as appropriate)</b> <input type="checkbox"/> Return Receipt (hardcopy)      \$ _____ <input type="checkbox"/> Return Receipt (electronic)      \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery      \$ _____ <input type="checkbox"/> Adult Signature Required      \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery      \$ _____	<b>Postmark Here</b>
<b>Postage</b> \$ _____ <b>Total</b> \$ _____	2185-51
Sent To: <b>Jalapeno Corporation</b> <b>PO Box 1608</b> Street: <b>Albuquerque, NM 87103-1608</b> City, State, ZIP+4: _____	
PS Form 3800, January 2023 PSN 7530-02-000-9047      See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature   <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  </p> <p>C. Date of Delivery</p>
<p>1. Article Address</p> <p style="text-align: right;">2185-51</p> <p>First Southern Funding, LLC  P.O. Box 328  Stanford, Kentucky 40484</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<div style="text-align: center;">   9590 9402 8151 3030 6943 38 </div>	<div style="text-align: center;">  </div>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0881 5252 79</p>	<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery </div> <div style="width: 45%;"> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery </div> </div> <p>red Mail  red Mail Restricted Delivery  r (\$500)</p>

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
<b>OFFICIAL USE</b>	
Certified Mail Fee \$ _____	Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____
P \$ \$ \$ Se.	First Southern Funding, LLC P.O. Box 328 Stanford, Kentucky 40484  Street and Apt. No., or PO Box No. City, State, ZIP+4®
Case Nos. 23800 thru 23803 Legacy Reserves Operating LP - Exhibit C	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-51

MCM Exploration Company, LLC  
223 W. Wall St., Suite 400  
Midland, TX 79701



9590 9402 8151 3030 6944 44

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5253 54

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Leyne McBride

C. Date of Delivery

09/11/23

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Registered Mail  
☐ Registered Mail Restricted Delivery  
 (\$500)

Domestic Return Receipt

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-51

NexGen Capital Resources, LLC  
4000 N. Big Spring St., Suite 210  
Midland, TX 79705



9590 9402 8151 3030 6944 13

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5253 78

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent☐ Addressee

B. Received by (Printed Name)

Valerie Del Rio

C. Date of Delivery

09/18/23

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Registered Mail  
☐ Registered Mail Restricted Delivery  
 (\$500)

Domestic Return Receipt

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-51

Pegasus Resources LLC  
PO Box 470698  
Fort Worth, TX 76147



9590 9402 8151 3030 6942 08

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5251 63

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Thomas

C. Date of Delivery

10/18

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Registered Mail  
☐ Registered Mail Restricted Delivery  
 (\$500)

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Certified Mail Fee

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Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

MCM Exploration Company, LLC  
223 W. Wall St., Suite 400  
Midland, TX 79701

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047

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Certified Mail Fee

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Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Post

\$

Total

\$

Sent

Street

City, State, ZIP+4®

NexGen Capital Resources, LLC  
4000 N. Big Spring St., Suite 210  
Midland, TX 79705

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

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Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Post

\$

Total

\$

Sent

Street

City, State, ZIP+4®

Pegasus Resources LLC  
PO Box 470698  
Fort Worth, TX 76147

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-51

AmeriPermian Holdings, LLC  
1733 Woodstead Ct., Suite 206  
The Woodlands, TX 77380



9590 9402 8151 3030 6947 96

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5252 31

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery☐ Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™

## CERTIFIED MAIL® RECEIPT

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Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$Postmark  
re

2185-51

AmeriPermian Holdings, LLC  
1733 Woodstead Ct., Suite 206  
The Woodlands, TX 77380

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1

2185-51

McMullen Minerals II, LLC  
PO Box 470857  
Ft. Worth, TX 76147



9590 9402 8151 3030 6943 83

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5253 30

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery
☐ Registered Mail  
☐ Registered Mail Restricted Delivery  
(\$500)

Domestic Return Receipt

U.S. Postal Service™

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Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$Postmark  
Here

2185-51

McMullen Minerals II, LLC  
PO Box 470857  
Ft. Worth, TX 76147

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1

2185-51

McMullen Minerals LLC  
PO Box 470857  
Ft. Worth, TX 76147



9590 9402 8151 3030 6944 20

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5253 61

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery
☐ Registered Mail  
☐ Registered Mail Restricted Delivery  
(\$500)

Domestic Return Receipt

U.S. Postal Service™

## CERTIFIED MAIL® RECEIPT

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For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$Postmark  
Here

2185-51




McMullen Minerals LLC  
PO Box 470857  
Ft. Worth, TX 76147

City, State, ZIP+4®


Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit C  
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PS Form 3811, July 2020 PSN 7530-02-000-9053

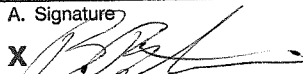



<p><b>SENDER: COMPLETE THIS SECTION</b></p> <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>     <p style="text-align: right;">2185-51</p> <p>Ball Oil &amp; Gas LLC PO Box 1401 Roswell, NM 88202</p>   <p style="text-align: center; font-size: 1.2em;">9590 9402 8151 3030 6943 69</p>	<p><b>COMPLETE THIS SECTION ON DELIVERY</b></p> <p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>X</b> </p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;">B. Received by (Printed Name)</td> <td style="width: 50%; padding: 5px;">C. Date of Delivery</td> </tr> <tr> <td style="height: 40px;"></td> <td style="height: 40px;"></td> </tr> </table> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <div style="text-align: right; margin-top: 20px;">  </div>	B. Received by (Printed Name)	C. Date of Delivery		
B. Received by (Printed Name)	C. Date of Delivery				
<p><b>2. Article Number (Transfer from service label)</b></p> <p style="font-size: 1.5em; text-align: center;">9589 0710 5270 0881 5253</p>	<p><b>3. Service Type</b></p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p style="text-align: right;"><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p style="text-align: right;">all Restricted Delivery (over \$500)</p>				

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL® RECEIPT</b> <i>Domestic Mail Only</i>	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®	
<b>OFFICIAL USE</b>	
Certified Mail Fee \$ _____ Extra Services & Fees ( <i>check box, add fee as appropriate</i> ) <input type="checkbox"/> Return Receipt (hardcopy)      \$ _____ <input type="checkbox"/> Return Receipt (electronic)      \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery      \$ _____ <input type="checkbox"/> Adult Signature Required      \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery      \$ _____	Postmark Here
Postage \$ _____ To \$ _____ Sent \$ _____ Street \$ _____ City	2185-51 _____ _____ _____

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>X <i>Debbie Jeff</i></p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span></p> <p><i>Debbie Jeffers</i> <span style="float: right;"><i>9/19/23</i></span></p> <p>D. Is delivery address different from item 1? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p style="text-align: center;">If YES, enter delivery address below:</p> <div style="text-align: center; border: 1px solid black; border-radius: 50%; width: 150px; height: 150px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <div style="text-align: center;"> <p>SEP 19 2023</p> </div> </div>
<p>1. Article Addressed to:</p> <p style="text-align: right;">2185-51</p> <p>Chad Barbe PO Box 2107 Roswell, NM 88202-2107</p>	<p>3. Service Type <span style="float: right;"><input type="checkbox"/> Priority Mail Express®</span></p> <p><input type="checkbox"/> Adult Signature <span style="float: right;"><input type="checkbox"/> Registered Mail™</span></p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <span style="float: right;"><input type="checkbox"/> Registered Mail Restricted Delivery</span></p> <p><input checked="" type="checkbox"/> Certified Mail® <span style="float: right;"><input type="checkbox"/> Signature Confirmation™</span></p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <span style="float: right;"><input type="checkbox"/> Signature Confirmation Restricted Delivery</span></p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p>
<div style="text-align: center;">  <p>9590 9402 8151 3030 6942 84</p> </div>	<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em;">9589 0710 5270 0881 5251 87</p>

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	Mark 2185-51
Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
Chad Barbe PO Box 2107 Roswell, NM 88202-2107	
Sent To _____	
Street and Apt. No., or PO Box No. _____	
City, State, ZIP+4® _____	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p><input checked="" type="checkbox"/> Complete items 1, 2, and 3.</p> <p><input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.</p> <p><input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>X</b> </p>
<p>1. </p> <p style="text-align: center;">9590 9402 8151 3030 6947 89</p>	<p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span></p> <p> </p>
<p>TMT Energy Resources, Inc. 5600 N. May Ave., Suite 320 Oklahoma City, OK 73112</p>	<p>D. Is delivery address different from item 1? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p>If YES, enter delivery address below: <span style="float: right;"><input type="checkbox"/> No</span></p> <p> </p>
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em;">9589 0710 5270 0881 5251 25</p>	<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> </div> <div style="width: 45%;"> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p> </div> </div> <p style="text-align: center;">1 Mail 1 Mail Restricted Delivery (500)</p>

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL® RECEIPT</b> <i>Domestic Mail Only</i>	
For delivery information, visit our website at <a href="http://www.usps.com®">www.usps.com®</a> .	
OFFICIAL USE	
Certified Mail Fee \$ _____	Postmark  <div style="font-size: 1.5em;">2185-51</div>
Extra Services & Fees ( <i>check box, add fee as appropriate</i> )	
<input type="checkbox"/> Return Receipt (hardcopy)      \$ _____	
<input type="checkbox"/> Return Receipt (electronic)      \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery      + _____	
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Pos _____	
\$ _____ Total	
\$ _____ Sent	
Street and Apt. No., or PO Box No. _____	
City, State, ZIP+4® _____	Case Nos. 23800 thru 23803
<b>Legacy Reserves Operating LP - Exhibit C</b>	
PS Form 3800, January 2023 PSN 7530-02-000-9047      See Reverse for Instructions	



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-51

Pegasus Resources II, LLC  
PO Box 470698  
Fort Worth, TX 76147



9590 9402 8151 3030 6942 39

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5252 00

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Registered Mail☐ Registered Mail Restricted Delivery☐ Signature Confirmation☐ Signature Confirmation Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

2185-51

Nuevo Seis, LP  
PO Box 2588  
Roswell, NM 88202



9590 9402 8151 3030 6947 41

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5250 40

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Registered Mail☐ Registered Mail Restricted Delivery☐ Signature Confirmation☐ Signature Confirmation Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

\$

Postmark  
2185-51

Pegasus Resources II, LLC  
PO Box 470698  
Fort Worth, TX 76147

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

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OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

\$

Postmark  
2185-51

Nuevo Seis, LP  
PO Box 2588  
Roswell, NM 88202

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

2185-51

Yates Energy Corporation  
PO Box 2323  
Roswell, NM 88202-2323



9590 9402 8151 3030 6942 22

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5252 17

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Registered Mail☐ Registered Mail Restricted Delivery☐ Signature Confirmation☐ Signature Confirmation Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted DeliveryU.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail OnlyFor delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

\$

☐ Return Receipt (electronic)

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☐ Certified Mail Restricted Delivery

\$

☐ Adult Signature Required

\$

☐ Adult Signature Restricted Delivery

\$

Postmark  
Here

Post

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To

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From

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City, State, ZIP+4®

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City, State

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/>  <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p style="text-align: right;">2185-51</p> <p>PBEX, LLC            5600 N. May Ave, Suite 320            Oklahoma City, OK 73112</p>		<p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0881 5250 88</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p>		<p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®	
OFFICIAL USE	
Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
2185-51	
<p>PBEX, LLC            5600 N. May Ave, Suite 320            Oklahoma City, OK 73112</p>	
Street and Apt. No., or PO Box No.	
City, State, ZIP+4®	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



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**OFFICIAL USE**

Certified Mail Fee  
 \$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$

mark  
 2185-51 fe

MCM Permian LLC  
 3811 Turtle Creek Blvd, Suite 1100  
 Dallas, TX 75219

Street and Apt. No., or PO Box No.  
 City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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 \$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
 Here

Postage  
 \$  
 Total

James K. & Martha L. Lusk Trust  
 2020 Osceola  
 Denver, CO 80212

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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**OFFICIAL USE**

Certified Mail Fee  
 \$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$

mark  
 2185-51 e

Olin E. Groves  
 2507 Cimmaron  
 Midland, TX 79705

Sent To  
 Street and Apt. No., or PO Box No.  
 City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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**OFFICIAL USE**

Certified Mail Fee  
 \$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$

Postmark  
 Here

Elk Range Royalties II, LP  
 2110 Farrington Street  
 Dallas, TX 75207

Sent To  
 Street and Apt. No., or PO Box No.  
 City, State, ZIP+4®

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Certified Mail Fee  
 \$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$

mark  
 2185-51 e

Francis T. Nash  
 2075 Vista Drive  
 N. Palm Beach, FL 33408

Sent To  
 Street and Apt. No., or PO Box No.  
 City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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**OFFICIAL USE**

Certified Mail Fee  
 \$

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$

mark  
 2185-51 re

Grewal Royalty LLC  
 45 Rockefeller Plaza, Suite 2410  
 New York, NY 10111

Sent To  
 Street and Apt. No., or PO Box No.  
 City, State, ZIP+4®

Case Nos. 23800 thru 23803  
 Legacy Reserves Operating LP - Exhibit C

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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710 5270 0881 5252 55

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

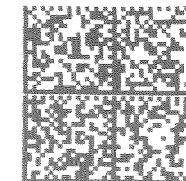
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark  
Here

2185-51

Capco Resource Corporation  
 PO Box 165229  
 Irving, TX 75016

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



**FP** <sup>®</sup> **US POSTAGE**  
**\$009.49<sup>0</sup>**  
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09/15/2023  
 034A 0081801095

2185-51  
 9/15/2023

Vacant

2185-51

Capco Resource Corporation  
 PO Box 165229  
 Irving, TX 75016

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

2185-51

Capco Resource Corporation  
 PO Box 165229  
 Irving, TX 75016



9590 9402 8151 3030 6943 52

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5252 55

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

NIXIE

731 52 1

0109/20/23

RETURN TO SENDER  
 VACANT  
 UNABLE TO FORWARD

BC: 80202469250 Z266N263190-00419

Case Nos. 23800 thru 23803  
 Legacy Reserves Operating LP - Exhibit C



9589 0710 5270 0881 5253 47

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Certified Mail Fee

Extra Services &amp; Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$
- ☐ Return Receipt (electronic) \$

Postmark

ire

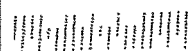
2185-51

MRC Delaware Resources LLC  
5900 LBJ Freeway, Suite 1500  
Dallas, TX 75240

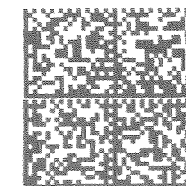
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City, State, ZIP+4®

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0710 5270 0881 5253 47



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~~9/15/23~~  
2185-51  
9/15/23

2185-51

MRC Delaware Resources LLC  
5900 LBJ Freeway, Suite 1500  
Dallas, TX 75240

NSU

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-51

MRC Delaware Resources LLC  
5900 LBJ Freeway, Suite 1500  
Dallas, TX 75240



9590 9402 8151 3030 6944 37

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5253 47

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

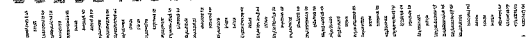
Mail  
Mail Restricted Delivery  
(over \$500)

Domestic Return Receipt

NIXIE 731 D2 1 0009/20/23

RETURN TO SENDER  
NOT DELIVERABLE AS ADDRESSED  
UNABLE TO FORWARD

BC: 80202469250 2266N263190-00857



Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit C

9589 0710 5270 0881 5251 32

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95 0710 5270 0881 5251 32

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

Postmark

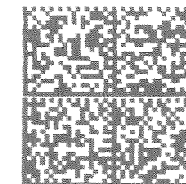
2185-51

The Gross Family Limited Partnership  
210 Lea Ave. South  
Roswell, NM 88201

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

FP® US POSTAGE  
\$009.49<sup>0</sup>

First-Class - iM

ZIP 80202

09/15/2023

034A 0081801095

2185-51

The Gross Family Limited Partnership  
210 Lea Ave. South  
Roswell, NM 88201

2185-51  
9/15/2023

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

2185-51

The Gross Family Limited Partnership  
210 Lea Ave. South  
Roswell, NM 88201



9590 9402 8151 3030 6947 72

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5251 32

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

## 3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express®
- ☐ Adult Signature Restricted Delivery ☐ Registered Mail™
- ☒ Certified Mail® ☐ Registered Mail Restricted Delivery
- ☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™
- ☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery
- ☐ Collect on Delivery Restricted Delivery

fail  
fail Restricted Delivery

NIXIE 731 40 1 0109/20/23

RETURN TO SENDER  
ATTEMPTED - NOT KNOWN  
UNABLE TO FORWARD

BC: 80202469250 2266N263182-00254

Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit C



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>2185-53</p> <p>AmeriPermian Holdings, LLC 1733 Woodstead Ct, Suite 206 The Woodlands, TX 77380</p>		<p>B. Received by (Printed Name) <i>J. Peterson</i></p> <p>C. Date of Delivery <i>9/19/23</i></p>	
<p>2. Article Number (Transfer from service label) <b>9589 0710 5270 0881 4367 04</b></p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>2185-53</p> <p>Avant Natural Resources 1515 Wynkoop Street, Suite 700 Denver, CO 80202</p>		<p>B. Received by (Printed Name) <i>Vesce</i></p> <p>C. Date of Delivery <i>9/19/23</i></p>	
<p>2. Article Number (Transfer from service label) <b>9589 0710 5270 0881 4366 98</b></p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>2185-53</p> <p>Ball Oil &amp; Gas LLC PO Box 1401 Roswell, NM 88202</p>		<p>B. Received by (Printed Name) <i>[Signature]</i></p> <p>C. Date of Delivery <i>[Signature]</i></p>	
<p>2. Article Number (Transfer from service label) <b>9589 0710 5270 0881 4342 43</b></p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p>	<p>Postmark Here</p>
<p>Postage \$</p> <p>To: \$</p> <p>From: \$</p> <p>City, State, ZIP+4®</p>	<p>2185-53</p> <p>AmeriPermian Holdings, LLC 1733 Woodstead Ct, Suite 206 The Woodlands, TX 77380</p>
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<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p>	<p>Postmark Here</p>
<p>Postage \$</p> <p>To: \$</p> <p>From: \$</p> <p>City, State, ZIP+4®</p>	<p>2185-53</p> <p>Avant Natural Resources 1515 Wynkoop Street, Suite 700 Denver, CO 80202</p>
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p>	<p>Postmark Here</p>
<p>Postage \$</p> <p>To: \$</p> <p>From: \$</p> <p>City, State, ZIP+4®</p>	<p>2185-53</p> <p>Ball Oil &amp; Gas LLC PO Box 1401 Roswell, NM 88202</p>
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>Chad Barbe</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>2185-53</p> <p>Chad Barbe            PO Box 2107            Roswell, NM 88202-2107</p>		<p>B. Received by (Printed Name)  <i>Lebbi Peters</i></p> <p>C. Date of Delivery  <i>9/19/23</i></p>	
<p>9590 9402 8151 3030 0269 62</p> <p>9589 0710 5270 0881 4342 81</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type  <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Mail Restricted Delivery (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p>	<p>Postmark Here</p> <p>2185-53</p> <p>Chad Barbe            PO Box 2107            Roswell, NM 88202-2107</p> <p>City, State, ZIP+4®</p>
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>Anty Allen</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>2185-53</p> <p>Chevron USA Inc.            1400 Smith Street, Ste. 3600            Houston, TX 77210</p>		<p>B. Received by (Printed Name)  <i>Anty Allen</i></p> <p>C. Date of Delivery  <i>9-20-23</i></p>	
<p>9590 9402 8151 3030 0267 40</p> <p>9589 0710 5270 0881 4335 36</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type  <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Mail Restricted Delivery (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p>	<p>Postmark Here</p> <p>2185-53</p> <p>Chevron USA Inc.            1400 Smith Street, Ste. 3600            Houston, TX 77210</p> <p>Street and Apt. No., or PO Box No.</p> <p>City, State, ZIP+4®</p>
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>Pusa M. W.</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>2185-53</p> <p>DJS Trust            PO Box 1453            Roswell, NM 88202</p>		<p>B. Received by (Printed Name)  <i>Pusa M. W.</i></p> <p>C. Date of Delivery  <i>9-20-23</i></p>	
<p>9590 9402 8151 3030 0267 57</p> <p>9589 0710 5270 0881 4335 43</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type  <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Mail Restricted Delivery (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p>	<p>Postmark Here</p> <p>2185-53</p> <p>DJS Trust            PO Box 1453            Roswell, NM 88202</p> <p>Street and Apt. No., or PO Box No.</p> <p>City, State, ZIP+4®</p>
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>2185-53</p> <p>Earthstone Energy, Inc. 1400 Woodloch Forest Dr., Suite 300 The Woodlands, TX 77380</p>		<p>B. Received by (Printed Name) _____ C. Date of Delivery <i>9/18</i></p>	
<p>2. Article Number (Transfer from service label) <b>9589 0710 5270 0881 4398 73</b></p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>3. Service Type  <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery (500)  <input type="checkbox"/> Mail Restricted Delivery (500)         </p>	

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee \$ _____</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ _____</p> <p><input type="checkbox"/> Return Receipt (electronic) \$ _____</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$ _____</p> <p><input type="checkbox"/> Adult Signature Required \$ _____</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$ _____</p>	<p>Postmark Here</p> <p>2185-53</p>
<p>Earthstone Energy, Inc. 1400 Woodloch Forest Dr., Suite 300 The Woodlands, TX 77380</p> <p>City, State, ZIP+4® _____</p>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to _____</p> <p>2185-53</p> <p>Jalapeno Corporation PO Box 1608 Albuquerque, NM 87103-1608</p>		<p>B. Received by (Printed Name) <i>Jun Barrack</i> C. Date of Delivery <i>9/27/23</i></p>	
<p>2. Article Number (Transfer from service label) <b>9589 0710 5270 0587 1135 41</b></p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>3. Service Type  <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery (500)  <input type="checkbox"/> Mail Restricted Delivery (500)         </p>	

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee \$ _____</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ _____</p> <p><input type="checkbox"/> Return Receipt (electronic) \$ _____</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$ _____</p> <p><input type="checkbox"/> Adult Signature Required \$ _____</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$ _____</p>	<p>Postmark Here</p> <p>2185-53</p>
<p>Jalapeno Corporation PO Box 1608 Albuquerque, NM 87103-1608</p> <p>City, State, ZIP+4® _____</p>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>2185-53</p> <p>First Southern Funding, LLC P.O. Box 328 Stanford, Kentucky 40484</p>		<p>B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>SEP 21 2023</i></p>	
<p>2. Article Number (Transfer from service label) <b>9589 0710 5270 0881 4398 59</b></p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>3. Service Type  <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery (500)  <input type="checkbox"/> Mail Restricted Delivery (500)         </p>	

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee \$ _____</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ _____</p> <p><input type="checkbox"/> Return Receipt (electronic) \$ _____</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$ _____</p> <p><input type="checkbox"/> Adult Signature Required \$ _____</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$ _____</p>	<p>Postmark Here</p> <p>2185-53</p>
<p>First Southern Funding, LLC P.O. Box 328 Stanford, Kentucky 40484</p> <p>City, State, ZIP+4® _____</p>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit C



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="text-align: right;">2185-53</p> <p>Hutchings Oil Company PO Box 1216 Albuquerque, NM 87103</p> <p>9590 9402 8329 3094 4465 14</p>		<p>A. Signature <b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>9/21/23</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>SEP 21 2023</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p>all Restricted Delivery (over \$500)</p>			

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee</p> <p>\$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Adult</p> <p><input type="checkbox"/> Adult</p> <p>Postage</p> <p>\$</p> <p>Total Post</p> <p>\$</p> <p>Sent To</p> <p>Hutchings Oil Company PO Box 1216 Albuquerque, NM 87103</p> <p>Street and Apt. No., or PO Box No.</p> <p>City, State, ZIP+4®</p>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="text-align: right;">2185-53</p> <p>Legacy Reserves Operating LP 15 Smith Road, Suite 3000 Midland, TX 79705</p> <p>9590 9402 8329 3094 4464 77</p>		<p>A. Signature <b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>9-18-23</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0587 1135 27</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p>all Restricted Delivery (over \$500)</p>	

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee</p> <p>\$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p>mark</p> <p>2185-53</p> <p>Legacy Reserves Operating LP 15 Smith Road, Suite 3000 Midland, TX 79705</p> <p>Street and Apt. No., or PO Box No.</p> <p>City, State, ZIP+4®</p>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="text-align: right;">2185-53</p> <p>MCM Exploration Company, LLC 223 W. Wall St., Suite 400 Midland, TX 79701</p> <p>9590 9402 8329 3094 4464 46</p>		<p>A. Signature <b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>9/18/23</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0587 1134 97</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p>all Restricted Delivery (over \$500)</p>	

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee</p> <p>\$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p>ark</p> <p>2185-53</p> <p>MCM Exploration Company, LLC 223 W. Wall St., Suite 400 Midland, TX 79701</p> <p>Street and Apt. No., or PO Box No.</p> <p>City, State, ZIP+4®</p>	
<p>Case Nos. 23800 thru 23803-1</p> <p>Legacy Reserves Operating LP - Exhibit C</p> <p>PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions</p>	



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-53

MCM Permian LLC  
3811 Turtle Creek Blvd, Suite 1100  
Dallas, TX 75219



9590 9402 8329 3094 4464 39

2. Article Number (Transfer from service label)

9589 0710 5270 0587 1134 80

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

Mail

Mail Restricted Delivery

(over 500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™

## CERTIFIED MAIL® RECEIPT

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For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$Postmark  
Here

2185-53

MCM Permian LLC  
3811 Turtle Creek Blvd, Suite 1100  
Dallas, TX 75219

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-53

McMullen Minerals LLC  
PO Box 470857  
Ft. Worth, TX 76147



9590 9402 8329 3094 4464 15

2. Article Number (Transfer from service label)

9589 0710 5270 0587 1134 66

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

Mail

Mail Restricted Delivery

(over 500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™

## CERTIFIED MAIL® RECEIPT

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OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

2185-53

McMullen Minerals LLC  
PO Box 470857  
Ft. Worth, TX 76147

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-53

McMullen Minerals II, LLC  
PO Box 470857  
Ft. Worth, TX 76147



9590 9402 8329 3094 4464 22

2. Article Number (Transfer from service label)

9589 0710 5270 0587 1134 73

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

Mail

Mail Restricted Delivery

(over 500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™

## CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$Postmark  
Here

2185-53

McMullen Minerals II, LLC  
PO Box 470857  
Ft. Worth, TX 76147

City, State, ZIP+4®

Case Nos. 23800 thru 23803

Legacy Reserves Operating LP - Exhibit C

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

2185-53

MRC Delaware Resources LLC  
5400 LBJ Freeway, Suite 1500  
Dallas, TX 75240



9590 9402 8329 3094 4464 08

2. Article Number (Transfer from service label)

9589 0710 5270 0587 1134 59

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

all Restricted Delivery

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail OnlyFor delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$Postmark  
Here

Postage

\$

TR

\$

SI

\$

CI

MRC Delaware Resources LLC  
5400 LBJ Freeway, Suite 1500  
Dallas, TX 75240

2185-53

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

2185-53

NexGen Capital Resources, LLC  
4000 N. Big Spring St., Suite 210  
Midland, TX 79705



9590 9402 8150 3030 9990 52

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5295 50

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

all Restricted Delivery

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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Domestic Mail OnlyFor delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$Postmark  
Here

Postage

\$

TR

\$

SI

\$

CI

NexGen Capital Resources, LLC  
4000 N. Big Spring St., Suite 210  
Midland, TX 79705

2185-53

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

2185-53

Nearburg Exploration Co., LLC  
5447 Glen Lakes Dr  
Dallas, TX 75231



9590 9402 8329 3094 4463 92

2. Article Number (Transfer from service label)

9589 0710 5270 0587 1134 42

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

all Restricted Delivery

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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CERTIFIED MAIL® RECEIPT  
Domestic Mail OnlyFor delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$Postmark  
Here

2185-53

Nearburg Exploration Co., LLC  
5447 Glen Lakes Dr  
Dallas, TX 75231

Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit C

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-53

Nuevo Seis, LP  
PO Box 2588  
Roswell, NM 88202



9590 9402 8150 3030 9991 06

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5295 67

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

J. J. Jacy

C. Date of Delivery

10/18/23

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

Mail

Mail Restricted Delivery

(00)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™  
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Domestic Mail OnlyFor delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)☐ Return Receipt (electronic)☐ Certified Mail Restricted Delivery☐ Adult Signature Required☐ Adult Signature Restricted Delivery2185-53 mark  
18

Nuevo Seis, LP  
PO Box 2588  
Roswell, NM 88202

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-53

Pegasus Resources II, LLC  
PO Box 470698  
Fort Worth, TX 76147



9590 9402 8150 3030 9990 69

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5296 04

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Thomas

C. Date of Delivery

10/18

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

Mail

Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

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Extra Services &amp; Fees (check box, add fee as appropriate)

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Here

2185-53

Pegasus Resources II, LLC  
PO Box 470698  
Fort Worth, TX 76147

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-53

Pegasus Resources LLC  
PO Box 470698  
Fort Worth, TX 76147



9590 9402 8150 3030 9990 90

2. Article Number (Transfer from service label)

9589 0710 5270 0881 5295 98

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Thomas

C. Date of Delivery

10/18

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

Mail

Mail Restricted Delivery

(\$500)

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Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)☐ Return Receipt (electronic)☐ Certified Mail Restricted Delivery☐ Adult Signature Required☐ Adult Signature Restricted Delivery

2185-53

Pegasus Resources LLC  
PO Box 470698  
Fort Worth, TX 76147

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Case Nos: 23800 thru 23803

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-53

S.E.S. Investments, LTD  
P.O. Box 10886  
Midland, TX 79702



9590 9402 8150 3030 9991 37

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4352 02

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Sabrina Melton

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Sabrina Melton

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

2185-53

S.E.S. Investments, LTD  
P.O. Box 10886  
Midland, TX 79702

Sent to

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-53

Susan Scott Murphy  
706 W. Brazos  
Roswell, NM 88201



9590 9402 8150 3030 9991 13

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4352 26

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X S. Murphy

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

S. Murphy

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
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Extra Services & Fees (check box, add fee as appropriate)

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☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$
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Here

2185-53

Susan Scott Murphy  
706 W. Brazos  
Roswell, NM 88201

City, State, ZIP+4®

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## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-53

TMT Energy Resources, Inc.  
5600 N. May Ave., Suite 320  
Oklahoma City, OK 73112



9590 9402 8150 3030 9991 68

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4352 40

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X TMT

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

TMT

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
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- ☐ Signature Confirmation Restricted Delivery

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Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$
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Here

2185-53

TMT Energy Resources, Inc.  
5600 N. May Ave., Suite 320  
Oklahoma City, OK 73112

City

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

Case Nos. 23800 thru 23803

Legacy Reserves Operating LP - Exhibit C



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## COMPLETE THIS SECTION ON DELIVERY

A. Signature  
**X** *Sabrina Melton* ☐ Agent ☐ Addressee  
 B. Received by (Printed Name) *Sabrina Melton* C. Date of Delivery  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

3. Service Type  
☐ Adult Signature ☐ Priority Mail Express®  
☐ Adult Signature Restricted Delivery ☐ Registered Mail™  
☒ Certified Mail® ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™  
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery  
☐ Collect on Delivery Restricted Delivery

Voyage Energy, LP  
 P.O. Box 11232  
 Midland, TX 79702



9590 9402 8150 3030 9991 75

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4352 57

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## COMPLETE THIS SECTION ON DELIVERY

A. Signature  
**X** *S. Murphy* ☐ Agent ☐ Addressee  
 B. Received by (Printed Name) *S. Murphy* C. Date of Delivery *9/5/23*  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

3. Service Type  
☐ Adult Signature ☐ Priority Mail Express®  
☐ Adult Signature Restricted Delivery ☐ Registered Mail™  
☒ Certified Mail® ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™  
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery  
☐ Collect on Delivery Restricted Delivery

Winn Investments  
 706 W. Brazos  
 Roswell, NM 88201



9590 9402 8150 3030 9994 96

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4351 41

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## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## COMPLETE THIS SECTION ON DELIVERY

A. Signature  
**X** *Sam Chacon* ☐ Agent ☐ Addressee  
 B. Received by (Printed Name) *Sam Chacon* C. Date of Delivery *9/18/23*  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

3. Service Type  
☐ Adult Signature ☐ Priority Mail Express®  
☐ Adult Signature Restricted Delivery ☐ Registered Mail™  
☒ Certified Mail® ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™  
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery  
☐ Collect on Delivery Restricted Delivery

Wing Resources IV, LLC  
 2100 McKinney Avenue, Suite 1540  
 Dallas, TX 75201



9590 9402 8150 3030 9992 05

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4352 88

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☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
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Postage

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To

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St

City

Voyage Energy, LP  
 P.O. Box 11232  
 Midland, TX 79702

2185-53

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☐ Return Receipt (electronic) \$

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2185-53 ife

Winn Investments  
 706 W. Brazos  
 Roswell, NM 88201

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

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☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

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St

Wing Resources IV, LLC  
 2100 McKinney Avenue, Suite 1540  
 Dallas, TX 75201

2185-53

Case Nos. 23800 thru 23803  
 Legacy Reserves Operating LP - Exhibit C

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>[Signature]</i></p>	
<p>1. Article Number (Transfer from service label)</p> <p>2185-53</p> <p>Wing Resources VI, LLC 2100 McKinney Avenue, Suite 1540 Dallas, TX 75201</p> <p>9590 9402 8150 3030 9991 82</p>		<p>B. Received by (Printed Name) <i>Sam Carter</i></p> <p>C. Date of Delivery <i>9/18/23</i></p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0881 4352 71</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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OFFICIAL USE	
Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postmark Here	
2185-53	
Wing Resources VI, LLC 2100 McKinney Avenue, Suite 1540 Dallas, TX 75201	
PS Form 3800, January 2023 PSN 7530-02-000-9047	See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>Pat Escalante</i></p>	
<p>1. Article Number (Transfer from service label)</p> <p>2185-53</p> <p>Yates Energy Corporation PO Box 2323 Roswell, NM 88202-2323</p> <p>9590 9402 8150 3030 9995 02</p>		<p>B. Received by (Printed Name) <i>Pat Escalante</i></p> <p>C. Date of Delivery <i>SEP 20 2023</i></p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0881 4351 72</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
mark here	
2185-53	
Yates Energy Corporation PO Box 2323 Roswell, NM 88202-2323	
PS Form 3800, January 2023 PSN 7530-02-000-9047	See Reverse for Instructions

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 Extra Services & Fees (check box, add fee as appropriate)

2185-53 ark

Marcia Joy Varel  
 6935 Forest Glade Cir  
 Dallas, TX 75230

Sent To  
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 City, State, ZIP+4®

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☐ Return Receipt (electronic) \$

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2185-53

Cheryl Schellinger  
 PO Box 447  
 Roswell, NM 88202

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☐ Return Receipt (electronic) \$

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2185-53

James K. Lusk & Martha Lusk Trust  
 2020 Osceola  
 Denver, CO 80212

Street and Apt. No., or PO Box No.  
 City, State, ZIP+4®

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2185-53 re

Marvin J. Andersen  
 PO Box 277  
 Selma, CA 93662

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2185-53 re

The Gross Family Limited Partnership  
 210 Lea Ave. South  
 Roswell, NM 88201

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 City, State, ZIP+4®

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2185-53 re

Stephen T. Mitchell  
 New: c/o Scott Exploration Inc  
 500 N Kentucky Ave  
 Roswell, NM 88201  
 Chaves County, NM

Sent To  
 Street and Apt. No., or PO Box No.  
 City, State, ZIP+4®

Case Nos. 23800 thru 23803  
 Legacy Reserves Operating LP - Exhibit C

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<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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2185-53

Innoventions Inc.  
3235 Calle de Deborah NW  
Albuquerque, NM 87104

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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2185-53

Grewal Royalty LLC  
45 Rockefeller Plaza, Suite 2410  
New York, NY 10111

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9589 0710 5270 0881 4398 66

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Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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2185-53

Elk Range Royalties II, LP  
2110 Farrington Street  
Dallas, TX 75207

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Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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Tot

2185-53

Williamson Enterprises  
PO Box 32570  
Santa Fe, NM 87594

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Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$

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2185-53

Olin E. Groves  
2507 Cimmaron  
Midland, TX 79705

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

2185-53

C. Warren Scott  
New: c/o Scott Exploration Inc  
500 N Kentucky Ave  
Roswell, NM 88201  
Chaves County, NM

Case Nos. 23800.thru 23803  
Legacy Reserves Operating LP - Exhibit C

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	2185-53
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Tax \$ _____	
\$ _____	
St \$ _____	
St \$ _____	
Ch \$ _____	
PBEX, LLC 5600 N. May Ave, Suite 320 Oklahoma City, OK 73112	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL® RECEIPT</b> <i>Domestic Mail Only</i>	
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<b>OFFICIAL USE</b>	
Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	2185-53
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
To: <b>Duane D. Andersen</b> <b>PO Box 277</b> <b>Selma, CA 93662</b>	
<b>PS Form 3800, January 2023 PSN 7530-02-000-9047</b>	
<b>See Reverse for Instructions</b>	

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
<b>OFFICIAL USE</b>	
Certified Mail Fee \$ _____	Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> <i>Other</i> \$ _____
To Red River Holdings, LLC P.O. Box 10886 Midland, TX 79702	ZIP+4® 2185-53
Street and Apt. No., or PO Box No. _____	
City, State, ZIP+4® _____	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



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034A 0081801095

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19 0710 5270 0881 4342 50

4342 50

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

Extra Services & Fees (check box, add \$)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark  
Here

2185-53

Bob G. Howell  
PO Box 1249  
Fresno, CA 93715

City, state, zip + gov

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

NIXIE  
 958  
 RETURN TO  
 DELIVERABLE TO  
 UNABLE TO  
 18501818  
 0109/16/23  
 WAS ADDRESSED  
 FORWARD  
 2358N259174-02450

2185-5

2185-53  
9/15/2023

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

2185-53

Bob G. Howell  
PO Box 1249  
Fresno, CA 93715



9590 9402 8151 3030 0256 99

2 Article Number (Transfer from service label)

9589 0710 5270 0881 4342 50

PS Form 3811, July 2020 PSN 7530-02-000-9053

A. Signature		<input type="checkbox"/> Agent
<b>X</b>		<input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery	

B. Received by (Printed Name)	C. Date of Delivery
-------------------------------	---------------------

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery	

## Domestic Return Receipt

Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit C

9589 0710 5270 0881 4342 74

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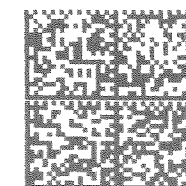
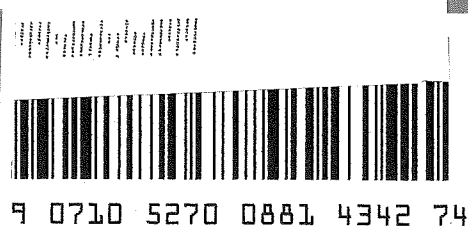
Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark Here

2185-53

Capco Resource Corporation  
 PO Box 165229  
 Irving, TX 75016

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



**FP** **US POSTAGE**  
**\$009.49**  
 First-Class - iMi  
 ZIP 80202  
 09/15/2023  
 034A 0081801095

Capco Resource Corporation  
 PO Box 165229  
 Irving, TX 75016

2185-53

2185-53  
 9/15/2023

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

2185-53

Capco Resource Corporation  
 PO Box 165229  
 Irving, TX 75016



9590 9402 8151 3030 0269 55

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4342 74

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Delivery Restricted Delivery

Mail Restricted Delivery  
 (over \$500)

Domestic Return Receipt

NIXIE

731 40 1

0109/20/23

RETURN TO SENDER  
 VACANT  
 UNABLE TO FORWARD

BC: 80202469250 2266N263190-00415

Case Nos. 23800 thru 23803  
 Legacy Reserves Operating LP - Exhibit C



9589 0710 5270 0881 4398 42

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Certified Mail Fee

Extra Services &amp; Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)☐ Return Receipt (electronic)mark  
2185-53 eGeorge L. Scott, III  
New: c/o Scott Exploration Inc  
500 N Kentucky Ave  
Roswell, NM 88201

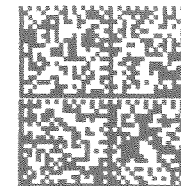
Street and Apt. No., or PO Box No.

City, State, ZIP+4<sup>®</sup>

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0710 5270 0881 4398 42

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ZIP 80202

09/15/2023

034A 0081801095

2185-53  
9/15/2023

2185-53

George L. Scott, III  
New: c/o Scott Exploration Inc  
500 N Kentucky Ave  
Roswell, NM 88201**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

2185-53

George L. Scott, III  
New: c/o Scott Exploration Inc  
500 N Kentucky Ave  
Roswell, NM 88201

9590 9402 7686 2122 8841 25

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4398 42

Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail<sup>®</sup>☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Priority Mail Express<sup>®</sup>☐ Registered Mail<sup>TM</sup>☐ Registered Mail Restricted Delivery☐ Signature Confirmation<sup>TM</sup>☐ Signature Confirmation Restricted DeliveryAM  
CS  
9-19-23

Domestic Return Receipt

Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit C



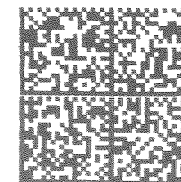
BEATTY &amp; WOZNIAK, P.C.

ENERGY IN THE LAW

1675 Broadway, Suite 600  
Denver, CO 80202



9589 0710 5270 0881 4398 80



**FP** US POSTAGE  
\$009.49<sup>9</sup>  
First-Class - ZIP 80202

09/15/2023  
034A 0081801095

2185-53  
9/15/2023

2185-53

Duane D. Andersen  
PO Box 277  
Selma, CA 93662

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1 Article Addressed to:

2185-53

Duane D. Andersen  
PO Box 277  
Selma, CA 93662



9590 9402 7686 2122 8841 63

2. Article Number (Transfer from service label)

9589 0710 5270 0881 4398 80

PS Form 3811, July 2020 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery |   |

d Mail

d Mail Restricted Delivery

(\$500)

Domestic Return Receipt

Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit C

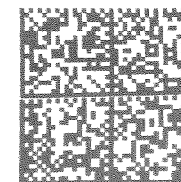


**BEATTY & WOZNIAK, P.C.**  
ENERGY IN THE LAW

1675 Broadway, Suite 600  
Denver, CO 80202



9589 0710 5270 0587 1135 03



**FP** <sup>®</sup> **US POSTAGE**  
**\$009.49**  
First-Class - IMI  
ZIP 80202  
09/15/2023  
034A 0081801095

2185-53  
9/15/2023

2185-53

Marvin J. Andersen  
PO Box 277  
Selma, CA 93662

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1 Article Addressed to:

2185-53

Marvin J. Andersen  
PO Box 277  
Selma, CA 93662



9590 9402 8329 3094 4464 53

9589 0710 5270 0587 1135 03

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail<sup>®</sup>
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express<sup>®</sup>
- ☐ Registered Mail<sup>™</sup>
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation<sup>™</sup>
- ☐ Signature Confirmation Restricted Delivery

☐ Mail  
☐ Mail Restricted Delivery

(over 3500)

Domestic Return Receipt

NIXIE

958 40 1

0109/29/23

RETURN TO SENDER  
INSUFFICIENT ADDRESS  
UNABLE TO FORWARD

BC: 89202469230 2358N263181-01134

Case Nos. 23800 thru 23803  
Legacy Reserves Operating LP - Exhibit C



**Affidavit of Publication**

STATE OF NEW MEXICO  
COUNTY OF LEA

I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated  
September 21, 2023  
and ending with the issue dated  
September 21, 2023.



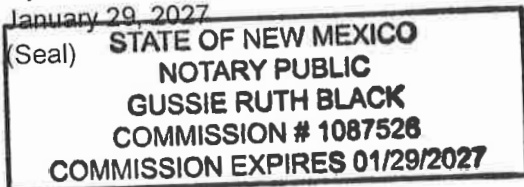
Publisher

Sworn and subscribed to before me this  
21st day of September 2023.



Business Manager

My commission expires  
January 29, 2027



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

**LEGAL NOTICE**  
September 21, 2023

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

The State of New Mexico, Energy Minerals and Natural Resources Department, Oil Conservation Division ("Division") hereby gives notice that the Division will hold public hearings before a hearing examiner on the following cases. Hearings will be conducted remotely. The hearing will be conducted on **Thursday, October 5, 2023, beginning at 8:15 A.M.** To participate in the electronic hearing, see the instructions posted below. The docket may be viewed at <http://www.emnrd.state.nm.us/OCD/hearings-info/> or obtained from Marlene Salvidrez at [Marlene.Salvidrez@state.nm.us](mailto:Marlene.Salvidrez@state.nm.us). Documents filed in the case may be viewed at <https://ocdimage.emnrd.state.nm.us/imaging/CaseFileCriteria.aspx>. If you are an individual with a disability who needs a reader, amplifier, qualified sign language interpreter, or other form of auxiliary aid or service to attend or participate in the hearing, contact Marlene Salvidrez at [Marlene.Salvidrez@state.nm.us](mailto:Marlene.Salvidrez@state.nm.us), or the New Mexico Relay Network at 1-800-659-1779, no later than **September 25, 2023**.

**STATE OF NEW MEXICO TO:**

All named parties and persons having any right, title, interest or claim in the following case and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

**TO: All overriding royalty interest owners and pooled parties, including:** AmeriPermian Holdings, LLC, Ball Oil & Gas LLC, Chevron USA Inc., Devon Energy Production, Elk Range Royalties II, LP, First Southern Funding, LLC, Grewal Royalty LLC, James K. Lusk & Martha Lusk Trust, MCM Permian LLC, McMullen Minerals II, LLC, McMullen Minerals LLC, MRC Delaware Resources LLC, NexGen Capital Resources, LLC, Nuevo Seis Limited Partnership, Olin E. Groves, PBEX, LLC, Pegasus Resources II, LLC, Pegasus Resources LLC, Red River Holdings, LLC, S.E.S. Investments, LTD, TMT Energy Resources, Inc., Voyage Energy, LP, Wing Resources VI, LLC, and Yates Energy Corporation.

**CASE NO. 23800: Application of Legacy Reserves Operating LP to Amend Order No. R- 22336, Lea County, New Mexico.** Applicant in the above-styled cause seeks an order amending Order No. R-22336, issued on October 28, 2022, in Case No. 22226, to extend the well commencement deadline one year, to October 28, 2024. Order No. R-22336 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the W1/2W1/2 of Section 14 and W1/2W1/2 of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.  
#00282967

67112105

00282967

MARY FINNEY  
BEATTY & WOZNIK, P.C.  
1675 BROADWAY, SUITE 600  
DENVER, CO 80202



**Affidavit of Publication**

STATE OF NEW MEXICO  
COUNTY OF LEA

I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

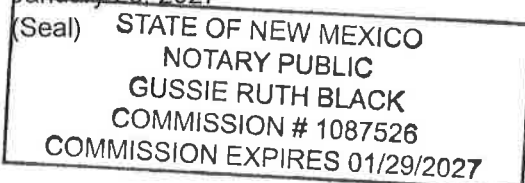
Beginning with the issue dated  
September 21, 2023  
and ending with the issue dated  
September 21, 2023.

  
Publisher

Sworn and subscribed to before me this  
21st day of September 2023.

  
Business Manager

My commission expires  
January 29, 2027



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

**LEGAL NOTICE**  
**September 21, 2023**

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

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**STATE OF NEW MEXICO TO:**

All named parties and persons having any right, title, interest or claim in the following case and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

**TO: All overriding royalty interest owners and pooled parties, including:** AmeriPermian Holdings, LLC, Ball Oil & Gas LLC, Capco Resource Corporation, Chad Barbe, Chevron USA Inc., Devon Energy Production Co., LP, Elk Range Royalties II, LP, First Southern Funding, LLC, Francis T. Nash, Grewal Royalty LLC, Jalapeno Corporation, James K. & Martha L. Lusk Trust, Legacy Reserves Operating LP, MCM Exploration Company, LLC, MCM Permian LLC, McMullen Minerals II, LLC, McMullen Minerals LLC, MRC Delaware Resources LLC, NexGen Capital Resources, LLC, Nuevo Seis, LP, Olin E. Groves, PBEX, LLC, Pegasus Resources II, LLC, Pegasus Resources LLC, Red River Holdings, LLC, S.E.S. Investments, LTD, The Gross Family Limited Partnership, TMT Energy Resources, Inc., Voyage Energy, LP, Wing Resources VI, LLC, and Yates Energy Corporation.

**CASE NO. 23801: Application of Legacy Reserves Operating LP to Amend Order No. R- 22337, Lea County, New Mexico.** Applicant in the above-styled cause seeks an order amending Order No. R-22337, issued on October 28, 2022, in Case No. 22227, to extend the well commencement deadline one year, to October 28, 2024. Order No. R-22337 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the E1/2W1/2 of Section 14 and E1/2W1/2 of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.  
**#00282968**

67112105

00282968

MARY FINNEY  
BEATTY & WOZNAK, P.C.  
1675 BROADWAY, SUITE 600  
DENVER, CO 80202

**Affidavit of Publication**

STATE OF NEW MEXICO  
COUNTY OF LEA

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Beginning with the issue dated  
September 21, 2023  
and ending with the issue dated  
September 21, 2023.

  
Publisher

Sworn and subscribed to before me this  
21st day of September 2023.

  
Business Manager

My commission expires

January 29, 2027

(Seal)

STATE OF NEW MEXICO  
NOTARY PUBLIC  
GUSSIE RUTH BLACK  
COMMISSION # 1087526  
COMMISSION EXPIRES 01/29/2027

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

LEGAL NOTICE  
September 21, 2023

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

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STATE OF NEW MEXICO TO:

All named parties and persons having any right, title, interest or claim in the following case and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

**TO: All overriding royalty interest owners and pooled parties, including:** AmeriPermian Holdings, LLC, Ball Oil & Gas LLC, Capco Resource Corporation, Chad Barbe, Chevron USA Inc., Duran Properties, LLC, Elk Range Royalties II, LP, First Southern Funding, LLC, Gregory J. and Carolyn S. Nibert, Grewal Royalty LLC, Jalapeno Corporation, James K. Lusk & Martha Lusk Trust, Legacy Reserves Operating LP, Long, LLC, Louis L. Borick, Marcia Joy Varel, MCM Exploration Company, LLC, MCM Permian LLC, McMullen Minerals II, LLC, MRC Delaware Resources LLC, Nearburg Exploration Co., LLC, NexGen Capital Resources, LLC, Nuevo Seis Limited Partnership, Olin E. Groves, PBEX, LLC, Pegasus Resources LLC, Red River Holdings, LLC, S.E.S. Investments, LTD, Texakota Oil Company, The Gross Family Limited Partnership, TMT Energy Resources, Inc., Voyage Energy, LP, Williamson Enterprise, Wing Resources VI, LLC, and Yates Energy Corporation.

**CASE NO. 23802: Application of Legacy Reserves Operating LP to Amend Order No. R- 22338, Lea County, New Mexico.** Applicant in the above-styled cause seeks an order amending Order No. R-22338, issued on October 28, 2022, in Case No. 22228, to extend the well commencement deadline one year, to October 28, 2024. Order No. R-22338 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the W1/2E1/2 of Section 14 and W1/2E1/2 of Section 23, Township 19 South, Range 33 East, N.M.P.M., Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico.  
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MARY FINNEY  
BEATTY & WOZNAK, P.C.  
1675 BROADWAY, SUITE 600  
DENVER, CO 80202



# Affidavit of Publication

STATE OF NEW MEXICO  
COUNTY OF LEA

I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated  
September 21, 2023  
and ending with the issue dated  
September 21, 2023.

  
Publisher

Sworn and subscribed to before me this  
21st day of September 2023.

  
Business Manager

My commission expires

January 29, 2027

(Seal)



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

## LEGAL NOTICE September 21, 2023

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

The State of New Mexico, Energy Minerals and Natural Resources Department, Oil Conservation Division ("Division") hereby gives notice that the Division will hold public hearings before a hearing examiner on the following cases. Hearings will be conducted remotely. The hearing will be conducted on **Thursday, October 5, 2023, beginning at 8:15 A.M.** To participate in the electronic hearing, see the instructions posted below. The docket may be viewed at <http://www.emnrd.state.nm.us/OCD/hearings-info/> or obtained from Marlene Salvidrez at [Marlene.Salvidrez@state.nm.us](mailto:Marlene.Salvidrez@state.nm.us). Documents filed in the case may be viewed at <https://ocdimage.emnrd.state.nm.us/imaging/CaseFileCriteria.aspx>. If you are an individual with a disability who needs a reader, amplifier, qualified sign language interpreter, or other form of auxiliary aid or service to attend or participate in the hearing, contact Marlene Salvidrez at [Marlene.Salvidrez@state.nm.us](mailto:Marlene.Salvidrez@state.nm.us), or the New Mexico Relay Network at 1-800-659-1779, no later than **September 25, 2023**.

#### STATE OF NEW MEXICO TO:

All named parties and persons having any right, title, interest or claim in the following case and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

**TO: All overriding royalty interest owners and pooled parties, including:** AmeriPermian Holdings, LLC, Avant Natural Resources, Ball Oil & Gas LLC, Bob G. Howell, C. Warren Scott, Capco Resource Corporation, Chad Barbe, Cheryl Schellinger, Chevron USA Inc., DJS Trust, Duane D. Andersen, Duran Properties, LLC, Earthstone Energy, Inc., Elk Range Royalties II, LP, First Southern Funding, LLC, George L. Scott, III, Grewal Royalty LLC, Hutchings Oil Company, Innovations Inc., Jalapeno Corporation, James K. Lusk & Martha Lusk Trust, Legacy Reserves Operating LP, Long, LLC, Louis L. Borick, Marcia Joy Varel, Marvin J. Andersen, MCM Exploration Company, LLC, MCM Permian LLC, McMullen Minerals II, LLC, McMullen Minerals LLC, MRC Delaware Resources LLC, Nearburg Exploration Co., LLC, NexGen Capital Resources, LLC, Nuevo Seis, LP, Olin E. Groves, PBEX, LLC, Pegasus Resources II, LLC, Pegasus Resources LLC, Red River Holdings, LLC, S.E.S. Investments, LTD, Stephen T. Mitchell, Susan Scott Murphy, The Gross Family Limited Partnership, TMT Energy Resources, Inc., Voyage Energy, LP, Williamson Enterprises, Wing Resources IV, LLC, Wing Resources VI, LLC, Winn Investments, and Yates Energy Corporation.

**CASE NO. 23803: Application of Legacy Reserves Operating LP to Amend Order No. R- 22339, Lea County, New Mexico.** Applicant in the above-styled cause seeks an order amending Order No. R-22339, issued on October 28, 2022, in Case No. 22229, to extend the well commencement deadline one year, to October 28, 2024. Order No. R-22339 pooled all mineral interests in the Bone Spring formation in a 320-acre horizontal spacing unit comprised of the E1/2E1/2 of Section 14 and E1/2E1/2 of Section 23, Township 19 South, Range 33 East, N.M.P.M, Lea County, New Mexico, and requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amendment of the order for good cause shown. The well and lands are located approximately 3 miles southwest of Lovington, New Mexico. #00282971

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