

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

**APPLICATION OF NOVO OIL AND GAS
NORTHERN DELAWARE, LLC, WHOLLY
OWNED SUBSIDIARY OF NOVO OIL & GAS, LLC
FOR A NON-STANDARD SPACING AND
PRORATION UNIT AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.**


CASE NO. 16286

AFFIDAVIT OF NOTICE

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

Candace Callahan, being duly sworn upon her oath, deposes and states:

1. I am over the age of 18 and have personal knowledge of the matters stated herein.
2. I am an attorney for Novo Oil and Gas Northern Delaware, LLC, a wholly owned subsidiary of Novo Oil & Gas, LLC.
3. Applicant has conducted in good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners, at their correct addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.
5. Applicant has complied with the notice provisions of Form C-108 and Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.



Candace Callahan

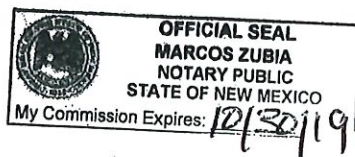
SUBSCRIBED AND SWORN TO before me this 8th day of August, 2018 by Candace Callahan.

My Commission Expires:

10/30/19



Notary Public



BEATTY & WOZNIAK, P.C.

ATTORNEYS AT LAW
500 DON GASPAR AVENUE
SANTA FE, NEW MEXICO 87505-2626
TELEPHONE (505) 983-8545
FACSIMILE (505) 983-8547
www.bwenergylaw.com

CASPER
CHEYENNE
DENVER
SALT LAKE CITY
SANTA FE

CANDACE CALLAHAN

DIRECT: (505) 983-8764
E-MAIL: CCALLAHAN@BWENERGYLAW.COM

June 21, 2018

VIA CERTIFIED MAIL-RETURN RECEIPT

To: Pooled Parties

Re: New Mexico Oil Conservation Division Application for Non-Standard Spacing and Proration
Unit and Compulsory Pooling, Case No. 16286
Rana Salada Fed Com 6 4 WB #1H and Rana Salada Fed Com 6 4 WXY #1H well

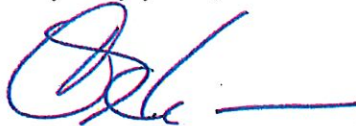
Dear Ladies and Gentlemen:

This letter is to advise you that Novo Oil & Gas, LLC has filed the enclosed application for non-standard spacing and compulsory pooling with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on July 12, 2018. The hearing will be held in the Oil Conservation Division's Santa Fe Offices located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an interest owner in the well unit you may be affected by this application, and you may appear and present testimony. Failure to appear at that time and become a part of record will preclude you from challenging the matter at a later date.

A party appearing in a Division case is required by Division Rule 19.15.4.13:B to file a Pre-Hearing Statement four days in advance of a scheduled hearing. This statement must be filed with the Division's Santa Fe office at the above address and should include: the names of the party and its attorney; 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 need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned and to the persons listed on Exhibit A.

If you have any questions about this matter, please contact Brandon Patrick at 405-609-1740 or bpatrick@novoog.com.

Very truly yours,



Candace Callahan
Attorney for Novo Oil & Gas, LLC

Exhibit A

Crown Oil Partners V, LP
P.O. Box 50820
Midland, TX 79710

Crump Energy Partners II, LLC
P.O. Box 50820
Midland, TX 79710

Nadel and Gussman Delaware, LLC
15 East 5th Street, Suite 3300
Tulsa, OK 74103

XTO Energy, Inc.
810 Houston Street, WTW 1912
Fort Worth, Texas 76102
Attention: Kenneth Hilger

EOG Y Resources, Inc.
5509 Champions Drive
Midland, Texas 79706
Attention: Charles Moran
EOG A Resources, Inc.
5509 Champions Drive
Midland, Texas 79706
Attention: Charles Moran

EOG M Resources, Inc.
5509 Champions Drive
Midland, Texas 79706
Attention: Charles Moran

Marathon Oil Permian, LLC
5555 San Felipe Street
Houston, TX 77056
Attention: Chase Rice

CTV O&G NM, LLC
201 Main Street, Suite 2700
Fort Worth, TX 76102

LMB1 O&G NM, LLC
201 Main Street, Suite 2700
Fort Worth, TX 76102

THRU LINE O&G NM, LLC
201 Main Street, Suite 2700
Fort Worth, TX 76102

6

SRB1 O&G NM, LLC
201 Main Street, Suite 2700
Fort Worth, TX 76102

Keystone O&G NM, LLC
201 Main Street, Suite 2700
Fort Worth, TX 76102

OXY Y-1 Company
P. O. Box 27570
Houston, TX 77227
Attention: Jeremy Murphrey


BTA Oil Producers, LLC
104 S. Pecos
Midland, TX 79701

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<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"/> <u>Rachel Lange</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>															
<p>1. Article Addressed to:</p> <p align="right">9416-0006</p> <p>Crown Oil Partners V, LP P.O. Box 50820 Midland, TX 79710</p>		<p>B. Received by (Printed Name) <u>Rachel Lange</u></p> <p>C. Date of Delivery <u>6.27.15</u></p>															
<p>2. Article Number (Transfer from service label)</p> <p align="center">7017 3380 0000 0520 8909</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 align="center"><u>OK</u></p>															
<p>9590 9402 3887 8060 8359 76</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"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Mail Restricted Delivery</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"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Mail Restricted Delivery	
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<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p align="right">Domestic Return Receipt</p>															

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<p>Certified Mail Fee</p> <p>\$ _____</p> <p>Extra Services & 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>Postage</p> <p>\$ _____</p>	<p align="center">Postmark Here</p> <p align="center">9416-0006</p> <p>Crown Oil Partners V, LP P.O. Box 50820 Midland, TX 79710</p>
<p>PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions</p>	

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<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>Rachel Lange</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to: 9416-0006</p> <p>Crump Energy Partners II, LLC P.O. Box 50820 Midland, TX 7971</p>		<p>B. Received by (Printed Name) <i>Rachel Lange</i> C. Date of Delivery <i>6.27.18</i></p>	
<p>2. Article Number (Transfer from service label) 7017 3380 0000 0520 8893</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</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"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Restricted Delivery</p>			
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Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
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<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
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<p>Crump Energy Partners II, LLC P.O. Box 50820 Midland, TX 7971</p>	
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<p>1. Article Addressed to:</p> <p align="right">9416-0006</p> <p>Nadel and Gussman Delaware, LLC 15 East 5th Street, Suite 3300 Tulsa, OK 74103</p>		<p>B. Received by (Printed Name) <i>P. Skidmore</i></p>	<p>C. Date of Delivery <i>6-25-18</i></p>																
<p>2. Article Number (Transfer from service label)</p> <p align="center">7017 3380 0000 0520 8886</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 align="center"><i>ob</i></p>																	
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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	\$
Postage	
\$	


Postmark Here

9416-0006

Nadel and Gussman Delaware, LLC
 15 East 5th Street, Suite 3300
 Tulsa, OK 74103

for Instructions

PS Form 3800, April 2015 PSN 7530-02-000-9053

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<p>1. Article Addressed to:</p> <p align="right">9416-0006</p> <p>XTO Energy, Inc. 810 Houston Street, WTW 1912 Fort Worth, Texas 76102 Attention: Kenneth Hilger</p>		<p>B. Received by (Printed Name) <i>[Signature]</i></p>	<p>C. Date of Delivery JUN 25 2018</p>																
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<p>Certified Mail Fee \$</p> <p>Extra Services & Fees (check box, add fee as appropriate)</p> <table border="0"> <tr> <td><input type="checkbox"/> Return Receipt (hardcopy)</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (electronic)</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Required</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td>\$</td> </tr> </table>	<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	\$	<p align="center">Postmark Here</p>
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<p align="right">9416-0006</p> <p>EOG Y Resources, Inc. 5509 Champions Drive Midland, Texas 79706 Attention: Charles Moran</p>	<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <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: 35%;"> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery </div> </div>
<p align="center"> 9590 9402 3703 7335 3924 96 </p>	<p>2. Article Number (Transfer from service label) <div style="display: flex; align-items: center;"> 7017 3040 0000 9942 3559 </div> </p>

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Postage

\$ _____

9416-0006

EOG Y Resources, Inc.
 5509 Champions Drive
 Midland, Texas 79706
 Attention: Charles Moran

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FAQs > (<http://faq.usps.com/?articleId=220900>)

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Remove X

Your item was picked up at a postal facility at 7:35 am on June 26, 2018 in MIDLAND, TX 79701.

 **Delivered**

June 26, 2018 at 7:35 am
 Delivered, Individual Picked Up at Postal Facility
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FAQs (<http://faq.usps.com/?articleId=220900>)

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<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 align="right">9416-0006</p> <p>EOG M Resources, Inc. 5509 Champions Drive Midland, Texas 79706 Attention: Charles Moran</p>	<p>A. Signature X <u>Robert Fera</u> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>R. Fera</u> C. Date of Delivery <u>6-26-18</u></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 align="center">9590 9402 3134 7166 5455 48</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"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</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"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®														
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<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™														
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<input type="checkbox"/> Insured Mail															
<p>2. Article Number (Transfer from service label)</p> <p align="center">7017 3380 0000 4382 9517</p>	<p align="center">all Restricted Delivery</p>														
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>															

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

EOG M Resources, Inc.
5509 Champions Drive
Midland, Texas 79706
Attention: Charles Moran

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7017 3380 0000 4382 9517

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>Richard Vargas</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>														
<p>1. Article Addressed to: 9416-0006</p> <p>Marathon Oil Permian, LLC 5555 San Felipe Street Houston, TX 77056 Attention: Chase Rice</p>	<p>B. Received by (Printed Name) <i>Richard Vargas</i> C. Date of Delivery <i>6/26/18</i></p>														
<p>2. Article Number (Transfer from service label)</p> <p>7017 3380 0000 4382 9500</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 style="font-size: 2em; color: blue;">06</p>														
<p align="center"></p> <p align="center">9590 9402 3134 7166 5455 31</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"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</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"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®														
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<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery														
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise														
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™														
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery														
<input type="checkbox"/> Insured Mail															
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p>															

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

Marathon Oil Permian, LLC
 5555 San Felipe Street
 Houston, TX 77056
 Attention: Chase Rice

PS Form 3800, April 2015 PSN 7530-02-000-9017

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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>Alvin J. Smith</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>													
<p>1. Article Addressed to:</p> <p align="right">9416-0006</p> <p>CTV O&G NM, LLC 201 Main Street, Suite 2700 Fort Worth, TX 76102</p>		<p>B. Received by (Printed Name) <i>Alvin J. Smith</i> C. Date of Delivery <i>Jul 26 2017</i></p>													
<p>2. Article Number (Transfer from service label)</p> <p align="center">7017 3380 0000 4382 9494</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>													
<p align="center">9590 9402 3134 7166 5455 24</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 checked="" type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</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 checked="" type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
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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	\$
Postage	


Postmark Here

9416-0006

CTV O&G NM, LLC
 201 Main Street, Suite 2700
 Fort Worth, TX 76102

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<p>1. Article Addressed to:</p> <p align="right">9416-0006</p> <p>LMB1 O&G NM, LLC 201 Main Street, Suite 2700 Fort Worth, TX 76102</p>	<p>3. Service Type</p> <table style="width:100%; font-size: small;"> <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"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> All Restricted Delivery</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"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> All Restricted Delivery	
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<div style="text-align: center;">  9590 9402 3134 7166 5455 17 </div> <p>2. Article Number (Transfer from service label)</p> <p align="center">7017 3380 0000 4382 9487</p>																	
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