

March 18, 2019

Alberto A. Gutiérrez, C.P.G.

3 Bear Field Services, LLC  
500 Don Gaspar Avenue  
Santa Fe, New Mexico 87505

VIA CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

RE: CASE NUMBER 20409: 3BEAR FIELD SERVICES LLC PROPOSED LIBBY  
AGI #1 AND #2

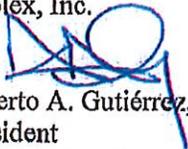
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If you have any questions concerning this application, or to obtain an entire copy of the C-108, you may contact Mr. Alberto Gutierrez or Mr. James C. Hunter at (505) 842-8000 at Geolex, Inc.; 500 Marquette Avenue NW, Suite 1350; Albuquerque, New Mexico 87102.

Sincerely,  
Geolex, Inc.



Alberto A. Gutiérrez, C.P.G.  
President  
Consultant to 3Bear Field Services LLP  
Enclosure: C-108 Application for Authority to Inject

P:\18-025 (3 Bear AGIs)\NMOCC Hearing\18-025 - NMOC Notice Letters\3Bear Field Services Notice Ltr 3-18-19.doc

March 18, 2019

Alberto A. Gutiérrez, C.P.G.

Apache Corporation  
303 Veterans Airpark Lane, Suite 1000  
Midland, Texas 79705

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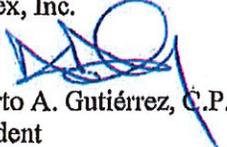
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Enclosure: C-108 Application for Authority to Inject

PA18-025 (3 Bear AGIs)\NMOCC Hearing\18-025 - NMOCD Notice Letters\Apache Corp Notice Ltr 3-18-19.doc

March 18, 2019

Alberto A. Gutiérrez, C.P.G.

BC Operating, Inc.  
P.O. Box 50820  
Midland, Texas 79710

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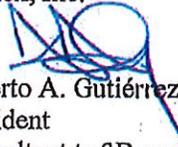
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Enclosure: C-108 Application for Authority to Inject

P:\18-025 (3 Bear AGIs)\NMOCC Hearing\18-025 - NMOCD Notice Letters\BC Operating Notice Ltr 3-18-19.doc

March 18, 2019

Alberto A. Gutiérrez, C.P.G.

Burk Royalty Co., Ltd.  
P.O. Box 94903  
Wichita Falls, Texas 76308

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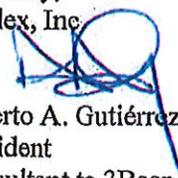
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Enclosure: C-108 Application for Authority to Inject

PA18-025 (3 Bear AGIs)\NMOCC Hearing\18-025 - NMOC Notice Letters\Burk Royalty Notice Ltr 3-18-19.doc

March 18, 2019

Alberto A. Gutiérrez, C.P.G.

Chestnut Exploration & Production, Inc.  
2201 N. Central Expressway, Suite 240  
Richardson, Texas 75080

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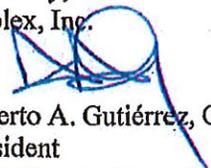
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P:\18-025 (3 Bear AGIs)\NMOCC Hearing\18-025 - NMOCD Notice Letters\Chestnut Exp & Prod Notice Ltr 3-18-19.doc

March 18, 2019

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Chisholm Energy Operating, LLC  
801 Cherry Street  
Fort Worth, Texas 76102

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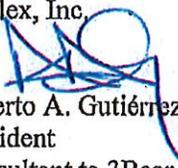
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Cimarex Energy Company  
600 N. Marienfeld Street, Suite 600  
Midland, Texas 79701

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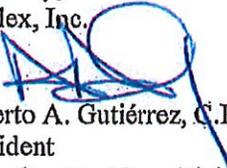
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COG Operating LLC  
600 W. Illinois Avenue  
Midland, Texas 79701

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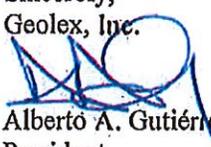
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Alberto A. Gutiérrez, C.P.G.

Marathon Oil Permian LLC  
5555 San Felipe Street  
Houston, Texas 77056

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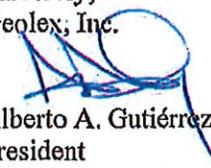
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Mas Operating Co.  
P.O. Box 52167  
Midland, Texas 79710

VIA CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

RE: CASE NUMBER 20409: 3BEAR FIELD SERVICES LLC PROPOSED LIBBY  
AGI #1 AND #2

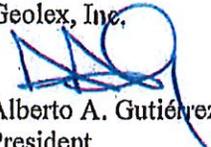
This letter is to advise you that 3Bear Field Services LLC ("3Bear") filed the enclosed C-108 application on March 4, 2019, with the New Mexico Oil Conservation Commission seeking authorization to drill two Acid Gas Injection (AGI) wells at their Libby Gas Plant (the "Plant") in Lea County, New Mexico. AGI #1 will be a vertical well, located at 1970' FWL, 1475' FSL in Section 26, T20S, R34E. AGI #2 will be a deviated well, and the surface location will be at 1970' FWL and 1910 FSL, with a bottom hole location of 1320 FWL and 2275 FWS, also in Section 26, T20S, R34E, NMPM, Lea County, New Mexico. 3Bear plans to inject up to 8 million standard cubic feet per day (MMSCFD) of treated acid gas from the Plant at a maximum pressure of 4,525 psig into the Devonian and Upper Silurian Wristen and Fusselman Formations, approximately 14,900 to 16,400 feet below the surface. The proposed wells will serve as a disposal well for acid gas at this plant.

*This application (Case Number 20409) has been set for hearing before the New Mexico Oil Conservation Commission at 9:00 AM on Thursday, April 11, 2019, in Wendell Chino Building at the New Mexico Oil Conservation Division's Santa Fe office located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by 3Bear's 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 application at a later date.*

*A party appearing at the hearing is required by Division Rule 19.15.4.13 NMAC to file a Pre-Hearing Statement at least four days in advance of a scheduled hearing, but in no event not later than 5:00 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 an identification of any procedural matters that need to be resolved prior to the hearing.*

If you have any questions concerning this application, or to obtain an entire copy of the C-108, you may contact Mr. Alberto Gutierrez or Mr. James C. Hunter at (505) 842-8000 at Geolex, Inc.; 500 Marquette Avenue NW, Suite 1350; Albuquerque, New Mexico 87102.

Sincerely,  
Geolex, Inc.

  
Alberto A. Gutiérrez, C.P.G.  
President  
Consultant to 3Bear Field Services LLP  
Enclosure: C-108 Application for Authority to Inject

P:\18-025 (3 Bear AGIs)\NMOCC Hearing\18-025 - NMOCD Notice Letters\Mas Operating Co Notice Ltr 3-18-19.doc

March 18, 2019

Alberto A. Gutiérrez, C.P.G.

Robert Yaquinta, Trustee  
509 N. Montclair Avenue  
Dallas, Texas 75208

VIA CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

RE: CASE NUMBER 20409: 3BEAR FIELD SERVICES LLC PROPOSED LIBBY  
AGI #1 AND #2

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Geolex, Inc.



Alberto A. Gutiérrez, C.P.G.  
President  
Consultant to 3Bear Field Services LLP  
Enclosure: C-108 Application for Authority to Inject

P:\18-025 (3 Bear AGIs)\NMOCC Hearing\18-025 - NMOC Notice Ltrs & mail receipts\Robert Yaquinto (trustee) Ltr 3-25-19.doc

March 18, 2019

Alberto A. Gutiérrez, C.P.G.

Traton Engineering  
700 Rockmead Dr. #159  
Kingwood, Texas 77339

VIA CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

RE: CASE NUMBER 20409: 3BEAR FIELD SERVICES LLC PROPOSED LIBBY  
AGI #1 AND #2

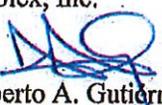
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Sincerely,  
Geolex, Inc.

  
Alberto A. Gutiérrez, C.P.G.  
President

Consultant to 3Bear Field Services LLP  
Enclosure: C-108 Application for Authority to Inject

PA18-025 (3 Bear AGIs)\NMOCC Hearing\18-025 - NMOCD Notice Ltrs & mail receipts\Traton Engineering Ltr 3-25-19.doc

**APPLICATION FOR AUTHORIZATION TO INJECT**

- I. PURPOSE: Secondary Recovery Pressure Maintenance  Disposal Storage  
Application qualifies for administrative approval? Yes  No
- II. OPERATOR: 3Bear Field Services, LLC.  
ADDRESS: 500 Don Gaspar Ave., Santa Fe NM 87505  
CONTACT PARTY: Alberto A. Gutierrez, R.G. - GEOLEX, INC. PHONE: (505)-842-8000
- III. WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection.  
Additional sheets may be attached if necessary. **A CROSS REFERENCE TO THE APPLICABLE SECTIONS OR APPENDICES IN THE ATTACHED C108 APPLICATION FOR EACH ROMAN NUMERAL BELOW IS SPECIFIED BY SECTION AND/OR APPENDIX NUMBERS.**
- IV. Is this an expansion of an existing project? Yes  No  
If yes, give the Division order number authorizing the project: N/A
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review. **SECTIONS 5 and 6; APPENDICES A and B.**
- VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.  
**SECTION 5; APPENDIX A.**
- VII. Attach data on the proposed operation, including:
- Proposed average and maximum daily rate and volume of fluids to be injected; **SECTIONS 1, 2, and 3**
  - Whether the system is open or closed; **SECTIONS 1, 2, 4 and 7**
  - Proposed average and maximum injection pressure; **SECTIONS 1 and 3**
  - Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and, **SECTIONS 3 and 4**
  - If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.). **SECTIONS 3 and 4**
- \*VIII. Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval. **SECTIONS 4 and 5 and APPENDIX A**
- IX. Describe the proposed stimulation program, if any. N/A
- \*X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted). **WELLS ARE NOT YET DRILLED**
- \*XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken. **SECTION 4.5**
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.  
**SECTION 7**
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form. **APPENDIX B**
- XIV. Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.
- NAME: Alberto A. Gutierrez, C.P.G. TITLE: President, Geolex, Inc.<sup>®</sup>; Consultant to DCP Midstream LP
- SIGNATURE:  DATE: 03/04/2019
- E-MAIL ADDRESS: ag@geolex.com
- \* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal: **SEE ATTACHED APPLICATION**

### III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

(1) Lease name; Well No.; Location by Section, Township and Range; and footage location within the section.

AGI #1 Surface: 1970' FWL, 1475' FSL Section 26, T20S, R34E, - SECTIONS 1, 3 and 4.

AGI #2 Surface: 1970' FWL, 1910' FSL Section 26, T20S, R34E, - SECTIONS 1, 3 and 4. (Inclined Well)

AGI #2 Bottom Hole: 1320' FWL, 2275' FSL Section 26, T20S, R34E, - SECTIONS 1, 3 and 4.

(2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined. SEE SECTION 3 FOR PROPOSED WELL DESIGNS. FINAL DESIGNS WILL BE SUBMITTED WHEN PROPOSED WELLS ARE DRILLED AND COMPLETED.

(3) A description of the tubing to be used including its size, lining material, and setting depth. SECTION 3 AND FIGURES 4 and 5 FOR PROPOSED WELL DESIGNS

(4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used. SECTION 3

Division District Offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

(1) The name of the injection formation and, if applicable, the field or pool name. SECTIONS 1 and 4

(2) The injection interval and whether it is perforated or open-hole. SECTION 3

(3) State if the well was drilled for injection or, if not, the original purpose of the well. N/A- WELLS NOT YET DRILLED

(4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations. N/A

(5) Give the depth to and the name of the next higher and next lower oil or gas zone in the area of the well, if any. SECTIONS 4 and 5; APPENDICES A and B

### XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location. SECTION 5; APPENDIX B WE WILL NOTIFY OPERATORS AND LEASEHOLD OWNERS AND SURFACE OWNERS WITHIN THE AREA OF REVIEW PURSUANT TO NMOCD REGULATIONS AND WE WILL SUBMIT AFFIDAVITS OF PUBLICATION OF NOTICE AND CERTIFIED MAIL RETURN RECEIPTS AT HEARING.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include: SEE APPENDIX B FOR DRAFT OF PUBLIC NOTICE - AFFIDAVIT OF PUBLICATION OF NOTICE FROM NEWSPAPER WILL BE SUBMITTED AT HEARING.

(1) The name, address, phone number, and contact party for the applicant;

(2) The intended purpose of the injection well; with the exact location of single wells or the Section, Township, and Range location of multiple wells;

(3) The formation name and depth with expected maximum injection rates and pressures; and,

(4) A notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

7016 1970 0000 8250 7623

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**DENVER, CO 80202**

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Extra Services & Fees (check box, add fee)	\$2.80
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.85

Sent to: **3 Bear Delaware (3 Bear C-108)**  
 Street and Apt. No., or PO Box No.: **1512 Larimer St. #540**  
 City, State, ZIP+4®: **Denver CO 80202**

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



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<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.85

Sent to: **Bureau of Land Mgt (3 Bear C-108)**  
 Street and Apt. No., or PO Box No.: **301 Dinosaur Trail**  
 City, State, ZIP+4®: **Santa Fe NM 87508**

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**HOUSTON, TX 77210**

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<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.85

Sent to: **Radco Pipeline LP (3 Bear C-108)**  
 Street and Apt. No., or PO Box No.: **PO Box 4648**  
 City, State, ZIP+4®: **Houston TX 77210**

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**EUNICE, NM 88231**

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Extra Services & Fees (check box, add fee)	\$2.80
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
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<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.85

Sent to: **S & S Inc (3 Bear C-108)**  
 Street and Apt. No., or PO Box No.: **PO Box 1046**  
 City, State, ZIP+4®: **Eunice NM 88231**

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



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**CARLSBAD, NM 88220**

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<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.85

Sent to: **Martha W. Slean (3 Bear C-108)**  
 Street and Apt. No., or PO Box No.: **301 South Canyon**  
 City, State, ZIP+4®: **Carlsbad, NM 88220**

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



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**CARLSBAD, NM 88220**

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Extra Services & Fees (check box, add fee as appropriate)	\$2.80
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<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.85

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**0101**  
**03/18/2019**  
**USPS**  
**BIQUERQUE NM 87101**

Sent To  
 The Kelly Sloan Testamentary (3 Bear C-108)  
 Street and Apt. No., or PO Box No.  
**301 South Canyon**  
 City, State, ZIP+4®  
**Carlsbad, NM 88220**

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Postage	\$0.55
Total Postage and Fees	\$6.85

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**03/18/2019**  
**USPS**  
**BIQUERQUE NM 87101**

Sent To  
 Curtis K & Carole D Sloan (3 Bear C-108)  
 Street and Apt. No., or PO Box No.  
**1508 Riverside Dr**  
 City, State, ZIP+4®  
**Carlsbad, NM 88220**

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**CARLSBAD, NM 88220**

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Postmark Here  
**0101**  
**03/18/2019**  
**USPS**  
**BIQUERQUE NM 87101**

Sent To  
 Linda Sloan Turva (3 Bear C-108)  
 Street and Apt. No., or PO Box No.  
**1134 Tracy Place**  
 City, State, ZIP+4®  
**Carlsbad, NM 88220**

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

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**EDUNICE, NM 88231**

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Total Postage and Fees	\$6.85

Postmark Here  
**0101**  
**03/18/2019**  
**USPS**  
**BIQUERQUE NM 87101**

Sent To  
 Tover V Ranch Land LP (3 Bear C-108)  
 Street and Apt. No., or PO Box No.  
**PO Box 160**  
 City, State, ZIP+4®  
**Edunice, NM 88231**

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SANTA FE, NM 87505

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Extra Services & Fees (check box, add fee to Certified Mail Fee)	\$2.80
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<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.85



Sent To  
3 Bear Field Services (3 Bear C-108)  
Street and Apt. No., or PO Box No.  
500 Don Gaspar Ave.  
City, State, ZIP+4®  
Santa Fe, NM 87505  
PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

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MIDLAND, TX 79705

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Extra Services & Fees (check box, add fee to Certified Mail Fee)	\$2.80
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.85



Sent To  
Apache Connection (3 Bear C-108)  
Street and Apt. No., or PO Box No.  
303 Veterans Airport Ln Ste 1000  
City, State, ZIP+4®  
Midland, TX 79705  
PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7016 1970 0000 8250 9368

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

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

MIDLAND, TX 79710

Certified Mail Fee	\$3.50
Extra Services & Fees (check box, add fee to Certified Mail Fee)	\$2.80
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.85



Sent To  
DC Operating One (3 Bear C-108)  
Street and Apt. No., or PO Box No.  
PO Box 50820  
City, State, ZIP+4®  
Midland, TX 79710  
PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7016 1970 0000 8250 9375

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

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

WICHITA FALLS, TX 76208

Certified Mail Fee	\$3.50
Extra Services & Fees (check box, add fee to Certified Mail Fee)	\$2.80
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.85



Sent To  
Birk Royalty Co (3 Bear C-108)  
Street and Apt. No., or PO Box No.  
PO Box 94903  
City, State, ZIP+4®  
Wichita Falls, TX 76208  
PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

71 1970 0000 8250 9382

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

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

RICHARDSON, TX 75080

Certified Mail Fee	\$3.50
Extra Services & Fees (check box, add fee to Certified Mail Fee)	\$2.80
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.85



Sent To  
Chestnut Exploration & Production One  
Street and Apt. No., or PO Box No.  
2201 N Central Expressway Ste 240  
City, State, ZIP+4®  
Richardson, TX 75080  
PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7016 1970 0000 8250 9313

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

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

**FORT WORTH, TX 76102**

Certified Mail Fee	\$3.50	
Extra Services & Fees (check box, add fee as indicated)	\$2.80	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
<b>Total Postage and Fees</b>	<b>\$6.85</b>	

Postmark Here  
 MAR 18 2019  
 (3 Bear C-108)

Sent To  
 Chisholm Energy Operating  
 Street and Apt. No., or PO Box No.  
 901 Cherry St  
 Fort Worth, TX 76102  
 City, State, ZIP+4®

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

7016 1970 0000 8250 9320

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

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

**MIDLAND, TX 79701**

Certified Mail Fee	\$3.50	
Extra Services & Fees (check box, add fee as indicated)	\$2.80	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
<b>Total Postage and Fees</b>	<b>\$6.85</b>	

Postmark Here  
 MAR 18 2019  
 (3 Bear C-108)

Sent To  
 Cimarex Energy Company (3 Bear C-108)  
 Street and Apt. No., or PO Box No.  
 600 N Mainfield St Ste 600  
 Midland TX 79701  
 City, State, ZIP+4®

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

7016 1970 0000 8250 9311

**U.S. Postal Service™**  
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For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**MIDLAND, TX 79701**

Certified Mail Fee	\$3.50	
Extra Services & Fees (check box, add fee as indicated)	\$2.80	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
<b>Total Postage and Fees</b>	<b>\$6.85</b>	

Postmark Here  
 MAR 18 2019

Sent To  
 CBG Operating LLC (3 Bear C-108)  
 Street and Apt. No., or PO Box No.  
 600 W Illinois Ave  
 Midland, TX 79701  
 City, State, ZIP+4®

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

7016 1970 0000 8250 9344

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

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

**HOUSTON, TX 77056**

Certified Mail Fee	\$3.50	
Extra Services & Fees (check box, add fee as indicated)	\$2.80	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
<b>Total Postage and Fees</b>	<b>\$6.85</b>	

Postmark Here  
 MAR 18 2019  
 (3 Bear C-108)

Sent To  
 Marathon Oil Permian LLC (3 Bear C-108)  
 Street and Apt. No., or PO Box No.  
 5555 San Felipe St  
 Houston, TX 77056  
 City, State, ZIP+4®

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

7016 1970 0000 8250 9405

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

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

**MIDLAND, TX 79710**

Certified Mail Fee	\$3.50	
Extra Services & Fees (check box, add fee as indicated)	\$2.80	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.55	
<b>Total Postage and Fees</b>	<b>\$6.85</b>	

Postmark Here  
 MAR 18 2019

Sent To  
 Mas Operating Co (3 Bear C-108)  
 Street and Apt. No., or PO Box No.  
 PO Box 52167  
 Midland TX 79710  
 City, State, ZIP+4®

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

7016 1970 0000 8250 7807

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

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

**DALLAS, TX 75208** SPECIAL USE

Certified Mail Fee \$ **3.50**

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

Return Receipt (hardcopy) \$ **0.00**

Return Receipt (electronic) \$ **0.00**

Certified Mail Restricted Delivery \$ **0.00**

Adult Signature Required \$ **0.00**

Adult Signature Restricted Delivery \$ **0.00**

Postage \$ **0.55**

Total Postage and Fees \$ **6.85**

Sent To **Robt Jaquinto, Trustee C-108**

Street and Apt. No., or PO Box No. **509 N. Montclair AVE**

City, State, ZIP+4® **Dallas**

PS Form 3800, April 2015 PSN 7530-02-000-0047 See Reverse for Instructions

0101  
MAR 27 2019  
Postmark Here  
03/25/2019

7016 1970 0000 8250 7562

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

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

**KINGWOOD, TX 77339** SPECIAL USE

Certified Mail Fee \$ **3.50**

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

Return Receipt (hardcopy) \$ **0.00**

Return Receipt (electronic) \$ **0.00**

Certified Mail Restricted Delivery \$ **0.00**

Adult Signature Required \$ **0.00**

Adult Signature Restricted Delivery \$ **0.00**

Postage \$ **0.55**

Total Postage and Fees \$ **6.85**

Sent To **Treston Engineering (3822 C-108)**

Street and Apt. No., or PO Box No. **300 Rockwood Dr #159**

City, State, ZIP+4® **Kingwood TX 77339**

PS Form 3800, April 2015 PSN 7530-02-000-0047 See Reverse for Instructions

0101  
MAR 27 2019  
Postmark Here  
03/25/2019

ALBUQUERQUE  
 1135 BROADWAY BLVD NE  
 ALBUQUERQUE  
 NM  
 87101-0001  
 3401270101  
 03/25/2019 (800)275-8777 4:47 PM

Product Description	Sale Qty	Final Price
First-Class Mail Letter (Domestic) (KINGWOOD, TX 77339) (Weight: 0 Lb 0.90 Oz) (Estimated Delivery Date) (Thursday 03/28/2019)	1	\$0.55
Certified (Return Receipt) (9590940223706249004272)	1	\$3.50
Return Receipt (9590940223706249004272)	1	\$2.80
First-Class Mail Letter (Domestic) (DALLAS, TX 75208) (Weight: 0 Lb 0.80 Oz) (Estimated Delivery Date) (Thursday 03/28/2019)	1	\$0.55
Certified (Return Receipt) (9590940223706249004265)	1	\$3.50
Return Receipt (9590940223706249004265)	1	\$2.80
<b>Total</b>		<b>\$13.70</b>

Personal/Bus Check \$13.70 *chk #18129*

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may

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.

Article Addressed to:

Bear Delaine (3 Bear C-108)  
112 Kinnier Street #540  
Denver CO 80202



9590 9402 2370 6249 0042 34

Article Number (Transfer from service label)

7016 1970 0000 8250 7623

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent  Addressee

B. Received by (Printed Name)

C. Date of Delivery  
3/20/19

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
- Return Receipt for Merchandise
- 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.

Article Addressed to:

(3 Bear C-108)  
Bureau of Land Management  
301 Dinosaur Trail  
Santa Fe, nm 87508



9590 9402 2370 6249 0037 63

Article Number (Transfer from service label)

7016 1970 0000 8250 9252

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent  Addressee

B. Received by (Printed Name)

C. Date of Delivery  
3/27/19

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
- Return Receipt for Merchandise
- 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.

Article Addressed to:

(3 Bear C-108)  
Puls Pipeline LP  
PO Box 4648  
Houston TX 77210



9590 9402 2370 6249 0037 56

Article Number (Transfer from service label)

7016 1970 0000 8250 9269

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent  Addressee

B. Received by (Printed Name)

C. Date of Delivery  
3/20/19

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
- Return Receipt for Merchandise
- 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.

Article Addressed to:

(3 Bear C-108)  
Sis one  
PO Box 1046  
Lunenburg, nm 87231



9590 9402 2370 6249 0036 95

Article Number (Transfer from service label)

7016 1970 0000 8250 9337

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent  Addressee

B. Received by (Printed Name)

C. Date of Delivery  
3/27/19

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
- Return Receipt for Merchandise
- 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.

1. Article Addressed to: (3 Bear-C-108)  
 Martha W. Skean  
 301 South Canyon  
 Carlsbad, nm 88220



2. Article Number (Transfer from service label)  
 7016 1970 0000 8250 9274

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  Agent
- B. Received by (Printed Name)  *Martha W. Skean*
- C. Date of Delivery  *3-21-17*
- 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
- Return Receipt for Merchandise
- 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.

1. Article Addressed to: (3 Bear-C-108)  
 Curtis K. Carole Skean  
 1508 Riverside Dr  
 Carlsbad, nm 88220



2. Article Number (Transfer from service label)  
 7016 1970 0000 8250 9504

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  *[Signature]*
- B. Received by (Printed Name)  *[Name]*
- C. Date of Delivery  *[Date]*
- 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
- Return Receipt for Merchandise
- 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.

1. Article Addressed to: (3 Bear-C-108)  
 The Kelly Skean Testametry  
 361 South Canyon  
 Carlsbad, nm 88220



2. Article Number (Transfer from service label)  
 7016 1970 0000 8250 9283

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  *[Signature]*
- B. Received by (Printed Name)  *[Name]*
- C. Date of Delivery  *[Date]*
- 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
- Return Receipt for Merchandise
- 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.

1. Article Addressed to: (3 Bear-C-108)  
 Linda Skean Surva  
 1134 Tway Place  
 Carlsbad, nm 88220



2. Article Number (Transfer from service label)  
 7016 1970 0000 8250 9290

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  *[Signature]*
- B. Received by (Printed Name)  *[Name]*
- C. Date of Delivery  *[Date]*
- 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
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. 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.

Article Addressed to:

(3 Bear C-108)

Over V Ranch Land LLC

PO Box 140

Sumner, nm 88231



9590 9402 2370 6249 0036 88

Article Number (Transfer from service label)

7016 1970 0000 8250 9344

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X. DeBerry

Agent  Addressee

B. Received by (Printed Name)

DeBerry

C. Date of Delivery

Yes  No

D. Is delivery address different from item 1?  Yes  No

If YES, enter delivery address below:

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

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jim Whitehead

Agent  Addressee

B. Received by (Printed Name)

Jim Whitehead

C. Date of Delivery

3/21/19

D. Is delivery address different from item 1?  Yes  No

If YES, enter delivery address below:

3. Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery (over \$500)

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

1. 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.

Article Addressed to:

(3 Bear C-108)

3 Bear Field Services, LLC

500 Don Cooper Ave

Sumner, nm 87505



9590 9402 2370 6249 0037 01

Article Number (Transfer from service label)

7016 1970 0000 8250 9306

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X. Jim Whitehead

Agent  Addressee

B. Received by (Printed Name)

Jim Whitehead

C. Date of Delivery

3/21/19

D. Is delivery address different from item 1?  Yes  No

If YES, enter delivery address below:

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

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jim Whitehead

Agent  Addressee

B. Received by (Printed Name)

Jim Whitehead

C. Date of Delivery

3/21/19

D. Is delivery address different from item 1?  Yes  No

If YES, enter delivery address below:

3. Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery (over \$500)

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

1. 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.

Article Addressed to:

(3 Bear C-108)

3 Bears Corporation

Ste 1000

Midland TX 79705



9590 9402 2370 6249 0036 71

Article Number (Transfer from service label)

7016 1970 0000 8250 9351

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jim Whitehead

Agent  Addressee

B. Received by (Printed Name)

Jim Whitehead

C. Date of Delivery

3/21/19

D. Is delivery address different from item 1?  Yes  No

If YES, enter delivery address below:

3. Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery (over \$500)

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

1. 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.

Article Addressed to:

(3 Bear C-108)

3 Bear Field Services, LLC

500 Don Cooper Ave

Sumner, nm 87505



9590 9402 2370 6249 0037 01

Article Number (Transfer from service label)

7016 1970 0000 8250 9306

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X. Jim Whitehead

Agent  Addressee

B. Received by (Printed Name)

Jim Whitehead

C. Date of Delivery

3/21/19

D. Is delivery address different from item 1?  Yes  No

If YES, enter delivery address below:

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

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

1. 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.

Article Addressed to:

(3 Bear C-108)

3 Bears Corporation

Ste 1000

Midland TX 79705



9590 9402 2370 6249 0036 64

Article Number (Transfer from service label)

7016 1970 0000 8250 9351

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jim Whitehead

Agent  Addressee

B. Received by (Printed Name)

Jim Whitehead

C. Date of Delivery

3/21/19

D. Is delivery address different from item 1?  Yes  No

If YES, enter delivery address below:

3. Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery (over \$500)

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Return Receipt for Merchandise

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.

1. Article Addressed to: **US Bear C-108**

**Bunk Royalty Co. Ltd**  
**PO Box 94903**  
**Wichita Falls, TX 76708**



9590 9402 2370 6249 0036 57

2. Article Number (Transfer from service label)  
**7015 1970 0000 8250 9375**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Received by (Printed Name) **W. J. ...**  Address  
 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
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- 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.

1. Article Addressed to: **(3 Bear C-108)**

**Chisholm Energy Operating**  
**801 Avey Street**  
**Fritch, TX 76102**



9590 9402 2370 6249 0036 33

2. Article Number (Transfer from service label)  
**7015 1970 0000 8250 9313**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Received by (Printed Name) **W. J. ...**  Address  
 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
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt



7015 1970 0000 8250 9362

**CHESTNUT EXPLORATION & PRODUCTION**  
**2901 N-CENTRAL EXPRESSWAY #240**  
**RICHARDSON TX 75080**

**FORWARD TO THE EXPLO  
 CHESTNUT EXPLORATION & PRODUCTION  
 2901 N-CENTRAL EXPRESSWAY #240  
 RICHARDSON TX 75080**

**RETURN TO SENDER**

*Returned = company closed  
 See resubmits to new owner  
 (Equinor of Texas)*

**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: **(3 Bear C-108)**

**Chisolex Energy Company**  
**6000 Prairiefield Street**  
**Ste 600**  
**Midland, TX 79701**



9590 9402 2370 6249 0036 26

2. Article Number (Transfer from service label)  
**7015 1970 0000 8250 9320**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Received by (Printed Name) **W. J. ...**  Address  
 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
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Exp
- Registered Mail
- Registered Mail Delivery
- Return Receipt for Merchandise
- Signature Conf
- Signature Conf Restricted Deliv

Domestic Return

**SENDER: COMPLETE THIS SECTION**

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

Article Addressed to: (3 Bear-C-108)  
305 Operating LLC  
000 W Illinois Ave  
Midland, TX 79701



9590 9402 2370 6249 0036 19

Article Number (Transfer from service label)  
701b 1970 0000 8250 9511

S Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
B. Received by (Printed Name)  
C. Date of Delivery  
D. Is delivery address different from item 1? If YES, enter delivery address below.

X Walter Watkins  
B. Walter Watkins C. 3-22-19  
D.  Yes  No

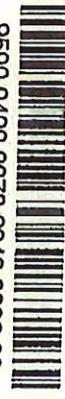
- 3. Service Type
  - Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery
  - Insured Mail
  - Insured Mail Restricted Delivery (over \$500)
  - Priority Mail Express®
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Return Receipt for Merchandise
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

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

Article Addressed to: (3 Bear C-108)  
Marathon Oil Permian LLC  
555 San Felipe St  
Houston, TX 77056



9590 9402 2370 6249 0036 02

Article Number (Transfer from service label)  
701b 1970 0000 8250 9399

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
B. Received by (Printed Name)  
C. Date of Delivery  
D. Is delivery address different from item 1? If YES, enter delivery address below.

X Richard  
B. Richard Watkins C. 3/22/19  
D.  Yes  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
  - Return Receipt for Merchandise
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

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

Article Addressed to: (3 Bear C-108)  
mas Operating Co.  
PO Box 52167  
Midland, TX 79710



9590 9402 2370 6249 0035 96

Article Number (Transfer from service label)  
701b 1970 0000 8250 9405

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
B. Received by (Printed Name)  
C. Date of Delivery  
D. Is delivery address different from item 1? If YES, enter delivery address below.

X Kathy Dato  
B. Kathy Dato C. 3/25/19  
D.  Yes  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
  - Return Receipt for Merchandise
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

Domestic Return Receipt

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  <input checked="" type="checkbox"/> <i>Betty Brunitt</i>      <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
1. Article Addressed to: <i>3 Bean C-108</i> Robt. Yaguista, Trustee 509 N. Montclair Ave. Dallas TX 75208	B. Received by (Printed Name) <i>Betty Brunitt</i>	C. Date of Delivery <i>3/28/19</i>
	D. Is delivery address different from Item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
	<p>3. Service Type</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"/> 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"/> Insured Mail Restricted Delivery (over \$500)	
9590 9402 2370 6249 0042 65 2. Article Number (Transfer from service label) 7016 1970 0000 8250 7807	PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt	

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  <input checked="" type="checkbox"/> <i>H. Fuentes</i>      <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
1. Article Addressed to: <i>(3 Bean C-108)</i> Triston Engineering 700 Rockwood Dr. #159 Kingwood TX 77339	B. Received by (Printed Name)	C. Date of Delivery
	D. Is delivery address different from Item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
	<p>3. Service Type</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 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"/> Insured Mail Restricted Delivery (over \$500)	
9590 9402 2370 6249 0042 72 2. Article Number (Transfer from service label) 7016 1970 0000 8250 7562	PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt	

# USPS Tracking®

[Tracking FAQs](#)

**Tracking Number:** 70161970000082507562 (TRATON ENGINEERING)

**Expected Delivery by**

**THURSDAY 28** MARCH 2019 by

**8:00pm**

**Status**

**Delivered**

March 28, 2019 at 12:23 pm  
Delivered, Front Desk/Reception/Mail Room  
KINGWOOD, TX 77339

**Tracking Number:** 70161970000082507807 (R. YAQUINTA, TRUSTEE)

**On Time**

**Expected Delivery on**

**THURSDAY 28** MARCH 2019 by

**8:00pm**

**Status**

**Delivered**

March 28, 2019 at 10:21 am  
Delivered, Left with Individual  
DALLAS, TX 75208

3 Bear Field Services, LLC Case 20409 Mailing Status

	Recipient	Delivered	Certified Mail Return Receipt	Returned	Status
1	3 Bear Delaware Operating- NM LLC	X	X		Delivered
2	Bureau of Land Management	X	X		Delivered
3	Plains Pipeline LP	X	X		Delivered
4	S&S Inc.	X	X		Delivered
5	Martha W. Skeen	X	X		Delivered
	The Kelly Skeen Testamentary Trust, Linda Ann Jurva & Curtis Kelly Skeen, Trustees	X	X		Delivered
6	Ann Jurva & Curtis Kelly Skeen, Trustees	X	X		Delivered
7	Curtis K. Skeen & Carole D. Skeen	X	X		Delivered
8	Linda Skeen Jurva	X	X		Delivered
9	T Over V Ranch Land LLP	X	X		Delivered
10	3 Bear Field Services, LLC	X	X		Delivered
11	Apache Corporation	X	X		Delivered
12	BC Operating, Inc.	X	X		Delivered
13	Burk Royalty Co., Ltd	X	X		Delivered
14	Chestnut Exploration & Production, Inc.				Submitted to new owner & operator Robert Yaquinta & Traton Engineering
15	Chisholm Energy Operating, LLC	X	X		Delivered
16	Cimarex Energy Company	X	X		Delivered
17	COG Operating LLC	X	X		Delivered
18	Marathon Oil Permian LLC	X	X		Delivered
19	Mas Operating Co.	X	X		Delivered
20	Robert Yaquinta, Trustee	X	X		Delivered
21	Traton Engineering	X	X		Delivered