

Pope 36 #10

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

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

CASE NO. 14612  
ORDER NO. R-13387

APPLICATION OF CELERO ENERGY II, LP FOR APPROVAL OF A  
COOPERATIVE WATERFLOOD PROJECT, AND TO QUALIFY THE  
PROJECT FOR THE RECOVERED OIL TAX RATE, LEA COUNTY, NEW  
MEXICO.

ORDER OF THE DIVISION

BY THE DIVISION:

This case came on for hearing at 8:15 a.m. on March 31, 2011, at Santa Fe, New Mexico, before Examiner Terry Warnell.

NOW, on this 5<sup>th</sup> day of May, 2011, the Division Director, having considered the testimony, the record, and the recommendations of the Examiner,

FINDS THAT:

1. Due public notice has been given, and the Division has jurisdiction of this case and its subject matter.
2. The applicant, Celero Energy II, LP ("Celero" or "Applicant"), seeks authority to institute a cooperative waterflood project in a portion of the Denton-Devonian Pool (16910) by injection of produced Devonian water. The Applicant is the operator in the Devonian formation of the three leases described below, insofar as they cover the following described 320 acres of fee lands:

TOWNSHIP 14 SOUTH, RANGE 37 EAST, NMPM

Section 25: S/2 SW/4	(Buckley Lease)
Section 36: W/2 NE/4	(W.T. Mann Lease)
Section 36: NW/4	(T.D. Pope 36 Lease)

**Application of Wishbone Texas Operating  
Company, LLC  
Case No. 20406  
NMOCD Order EXHIBIT #1**

3. The applicant further requests approval to inject Devonian produced water into the following two proposed injection wells in Lea County, New Mexico:

<u>Well Name &amp; Number</u>	<u>API No.</u>	<u>Well Location</u>
W.T. Mann A Well No. 2	30-025-05204	Unit B, Section 36, T-14 South, R-37 East
T.D. Pope 36 Well No. 10	30-025-39999	Unit D, Section 36, T-14 South, R-37 East

4. Applicant further requests that the project be called the Denton Devonian Waterflood Project.

5. Celero further seeks provisions allowing for the administrative approval of additional injection wells and seeks to qualify the proposed project as an "Enhanced Oil Recovery Project" pursuant to the "Enhanced Oil Recovery Act" (NMSA 1978 Sections 7-29A-1 through 7-29A-5, as amended).

6. The proposed 320-acre project area is fully contained within the Denton-Devonian Pool.

7. No other parties entered an appearance in this case or otherwise indicated opposition to the cooperative waterflood project.

8. Celero presented the testimony of land director Jim Grisham as follows:

(a) Celero seeks to institute a cooperative waterflood project consisting of three fee leases.

(b) Celero also requests approval to inject produced Devonian formation water into two Devonian wells.

(c) Celero is the operator of these three fee leases in the Devonian formation and has Devonian working interest in all three leases.

(d) Surface owner of the entire 320-acre project area is Mr. Donald Spears.

9. Celero presented the testimony of petroleum geologist John Baker as follows:

(a) The primary stratigraphic interval of interest in the proposed Denton Devonian Waterflood Project is the Celero Devonian, which is continuous across the project area. The low porosity highly fractured Devonian aged rock contains hydrocarbons and is a good candidate for water injection.

(b) The cross-section from West to East across the project area shows the consistency of the reservoir. When the Type Log and the Structure Map are compared, it is clear that the portion of the reservoir that is the proposed waterflood is reasonably defined by development.

- (c) The project area shows good continuity, the entire proposed unit area should contribute enhanced recovery reserves, and it is well suited for secondary recovery operations.
  - (d) The entire project area reservoir is capped by the Woodford Shale and there is no Woodford Shale production in the area.
10. Celero presented the testimony of petroleum engineer John Anderson as follows:
- (a) The secondary recovery operation will be initiated with two injection wells and six production wells.
  - (b) Each of the two proposed injection wells is expected to take an average of 10,000 barrels of produced Devonian water per day, with a maximum of about 20,000 barrels per well per day.
  - (c) Injection pressures are expected to initially be low and will likely start on a vacuum. The proposed maximum surface injection pressure for each injection well is based on 0.2 psig per foot of depth to the top of the injection interval. If a higher pressure is needed, Celero will justify the pressure increase with a step rate test.
  - (d) There are four plugged and abandoned wells in the two areas of review that penetrated into the Devonian formation.
  - (e) There is no evidence of inadequately cemented wellbores between the proposed waterflood interval and protectable waters. The proposed injection operation will not pose a threat to any freshwater supplies.
  - (f) The fresh ground water in this area consists of the Ogallala formation that produces from intervals approximately 193 feet in depth.
11. Celero estimates that it will cost approximately \$4.3 million dollars to implement waterflood operations within the proposed project area. Estimated value of incremental production on a cash value basis is approximately \$1.3 million.
12. Celero estimates that implementation of the proposed secondary recovery project will result in the recovery of an additional 200,000-250,000 barrels of oil that would otherwise not be recovered, thereby preventing waste.
13. The proposed waterflood project should be approved, and Celero should be authorized to utilize its W.T. Mann A Well No. 2 and T.D. Pope 36 Well No. 10 as injection wells within the project area.

14. The applicant further seeks to qualify the waterflood project as an "Enhanced Oil Recovery Project" pursuant to the "Enhanced Oil Recovery Act" (NMSA 1978 Sections 7-29A-1 through 7-29A-5).

15. The evidence presented demonstrates that:

- (a) the application for approval of the proposed secondary recovery project has not been prematurely filed either for economic or technical reasons;
- (b) the area affected by the proposed project has been so depleted by primary operations that it is prudent to apply secondary recovery techniques to maximize the ultimate recovery of crude oil from the pool; and
- (c) the proposed secondary recovery project meets all the criteria for certification by the Division as a qualified "Enhanced Oil Recovery Project" pursuant to the "Enhanced Oil Recovery Act" (NMSA 1978 Sections 7-29A-1 through 7-29A-5).

16. At such time as a positive production response occurs, and within five years from the date of this order, the applicant must apply to the Division for certification of a positive production response. This application shall identify the area benefiting from enhanced oil recovery operations and the specific wells eligible for the EOR tax rate. The Division may review the application administratively or set it for hearing. Based upon the evidence presented, the Division will certify to the New Mexico Taxation and Revenue Department those wells that are eligible for the EOR tax rate.

**IT IS THEREFORE ORDERED THAT:**

1. Celero Energy II, LP is hereby authorized to institute a cooperative waterflood project that shall comprise the following described 320 acres, more or less, of fee lands located in Lea County, New Mexico:

**TOWNSHIP 14 SOUTH, RANGE 37 EAST, NMPM**

Section 25: S/2 SW/4 (Buckley Lease)  
Section 36: W/2 NE/4 (W.T. Mann Lease)  
Section 36: NW/4 (T.D. Pope 36 Lease)

2. Celero is further authorized to inject produced Devonian water into the Devonian formation, through the following two wells, in Lea County, New Mexico:

<u>Well Name &amp; Number</u>	<u>API No.</u>	<u>Well Location</u>	<u>Inject. Zone</u>
W.T. Mann A Well No. 2	30-025-05204	Section 36, T-14S, R-37E	12376-12900
T.D. Pope 36 Well No. 10	30-025-39999	Section 36, T-14S, R-37E	12175-12720

injection operations into the well; provided, however, the Division, upon written request by the operator, may grant an extension for good cause.

13. The Denton Devonian Waterflood Project is hereby certified as an "Enhanced Oil Recovery Project." The project area shall initially comprise the area described in Ordering Paragraph No. (1), provided however, the project area and/or the producing wells eligible for the enhanced oil recovery (EOR) tax rate may be contracted and reduced based upon the evidence presented by the applicant in its demonstration of a positive production response.

14. At such time as a positive production response occurs, and within five years from the date of this order, the applicant must apply to the Division for certification of a positive production response. This application shall identify the area benefiting from enhanced oil recovery operations and the specific wells eligible for the EOR tax rate. The Division may review the application administratively or set it for hearing. Based upon the evidence presented, the Division will certify to the New Mexico Taxation and Revenue Department those wells that are eligible for the EOR tax rate.

15. The injection authority granted under this order is not transferable except upon Division approval. The Division may require the operator to demonstrate mechanical integrity of any injection well that will be transferred prior to approving transfer of authority to inject.

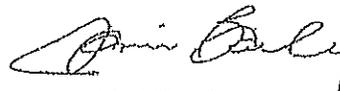
16. The Division may revoke the injection authority for any well after notice and hearing if the operator is in violation of 19.15.5.9 NMAC.

17. Compliance with this order does not relieve the operator of the obligation to comply with other applicable federal, state or local laws or rules, or to exercise due care for the protection of fresh water, public health and safety and the environment.

18. Jurisdiction is retained by the Division for the entry of such further orders as may be necessary for the prevention of waste and/or protection of correlative rights or upon failure of the operator to conduct operations (i) to protect fresh or protectable waters or (ii) consistent with the requirements in this order, whereupon the Division may, after notice and hearing, or without notice and hearing in case of emergency, terminate the injection authority granted herein.

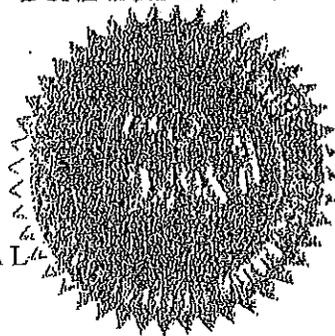
DONE at Santa Fe, New Mexico, on the day and year hereinabove designated.

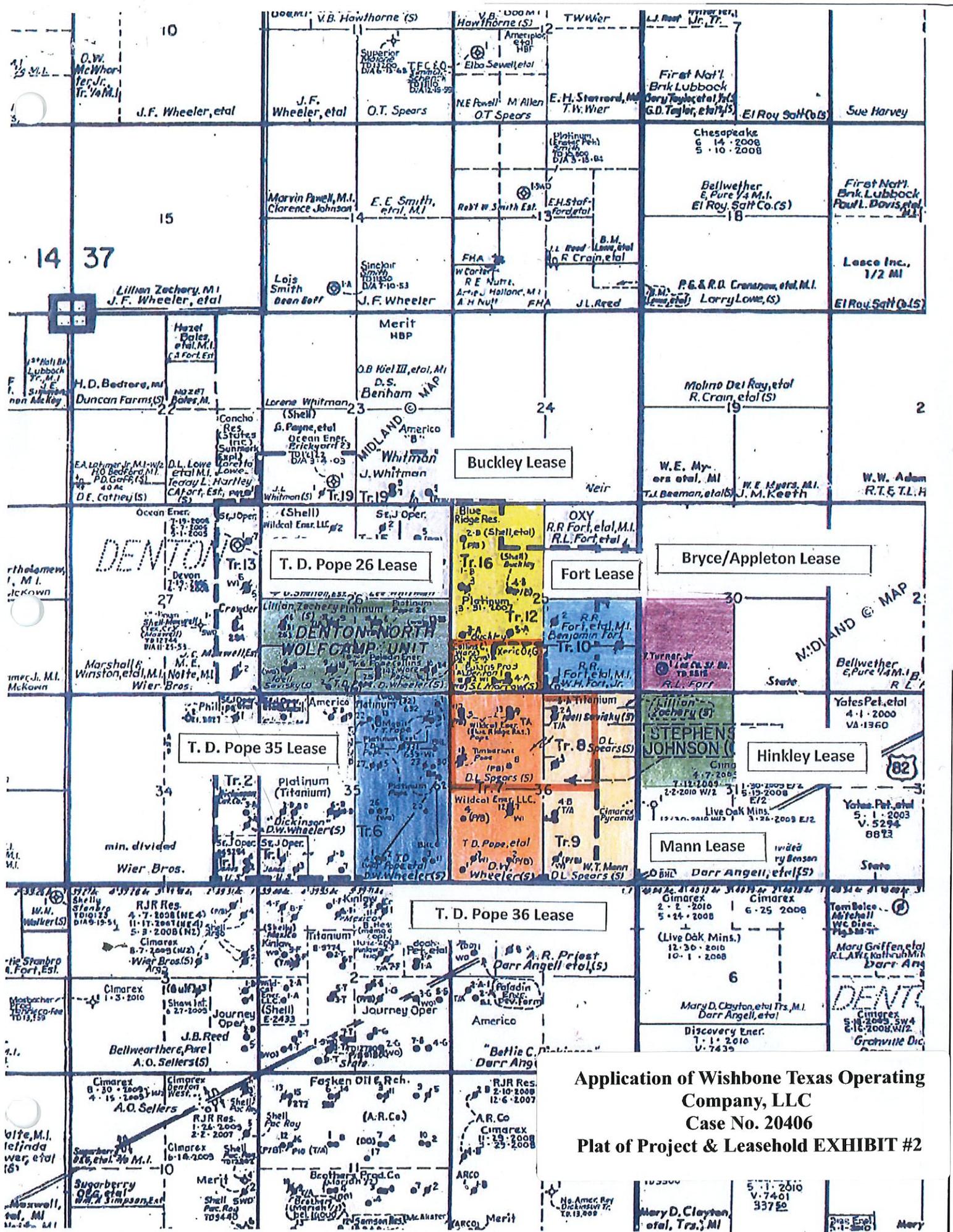
STATE OF NEW MEXICO  
OIL CONSERVATION DIVISION



JAMI BAILBY  
Director

SEAL





**Application of Wishbone Texas Operating Company, LLC  
Case No. 20406  
Plat of Project & Leasehold EXHIBIT #2**

Mary D. Clayton, et al, Trs., MI  
5-1-2010 V-7401 93752  
Darr Angell, et al, Trs., MI  
5-1-2010 V-7401 93752

Township 14 South, Range 37 East, N.M.P.M. (Buckley Lease)

Section 25: S $\frac{1}{2}$ SW $\frac{1}{4}$

Township 14 South, Range 37 East, N.M.P.M. (W.T. Mann Lease)

Section 36: W $\frac{1}{2}$ NE $\frac{1}{4}$

Township 14 South, Range 37 East, N.M.P.M. (T.D. Pope 36 Lease)

Section 36: NW $\frac{1}{4}$

**EXHIBIT 3 – CASE NO. 20406  
APPLICATION OF WISHBONE TEXAS  
OPERATING COMPANY, LLC FOR  
REINSTATEMENT OF INJECTION WELL PERMITS  
TO ENHANCE OIL RECOVERY IN  
DENTON DEVONIAN WATERFLOOD**

**OPERATORS/LEASEHOLD OWNERS WITHIN 1/2 MILE AOR FOR  
T D POPE 36 WELL NO. 10 and W T MANN A WELL NO. 2**

Portions of Sections 25 T14S, R 37E and Sections 30 and 31 of T14S, R38E

**1) SE4 of Section 25 T14S, R 37E:**

Occidental Oil and Gas Corporation  
ATTENTION: LAUREN GUEST  
Land Department  
5 Greenway Plaza, Suite 110  
Houston, TX, 77046-0521

**2) SW4SW4 of Section 30 T14S, R 38E:**

Wells Fargo Bank N.A., as Trustee of the Angelica S. Bryce T/U/W FBO Marc Appleton  
PO Box 5383  
Denver, CO 80217

Wells Fargo Bank N.A., as Trustee of the Angelica S. Bryce T/U/W FBO Lee Appleton  
PO Box 5383  
Denver, CO 80217

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Angelica S. Bryce, deceased  
PO Box 5383  
Denver, CO 80217

Wells Fargo Bank N.A., as Trustee of the Sylvie Bryce Trust FBO Clifford Potter created under the will  
of Angelica S. Bryce, deceased  
PO Box 5383

**Application of Wishbone Texas Operating  
Company, LLC  
Case No. 20406  
Operators/ WI Owners EXHIBIT #3**

Denver, CO 80217

Wells Fargo Bank N.A., as Trustee of the Sylvie Bryce Trust FBO Angelica Schuyler Roop created under the will of Angelica S. Bryce, deceased

PO Box 5383

Denver, CO 80217

Karl Mark Dunlap

127 A. Chevy Chase Street

Gaithersburg MD 20878

Christopher L. Doran

15 Stranhope Street

Mt. Gravatt

Queensland,4122 Australia

Edwin Kim Dunlap

3019 Del Cerro

Almogordo, NM 88310

Margaret D. Barklind

605 Sudden Valley

Bellingham WA 98229

Ursel S. Doran

1421 N. Virginia, Apt A.

Reno, NV 89503

Edward Armstrong Elkan Jr., by his Attorney in Fact, Harold Alston Elkan

3731 Shade tree Terrace

Portage, MI 49024-1036

Harold Alston Elkan and Nancy Hastings Elkan, Joint Tenants

3731 Shade tree Terrace

Portage, MI 49024-1036

James Reed McCrory

PO Box 25764

Albuquerque, NM 8712-0764

Western Commerce Bank, Trustee of the W.T. Reed Trust OF

PO Box 1627

Lovington, NM 88260-1627

John David Dunlap

PO Box 1259

Crown Point, NM 87313

**3) W2NW4 of Section 31 T14S, R38E**

James Reed McCrory  
PO Box 25764  
Albuquerque, NM 8712-0764

Western Commerce Bank, Trustee of the W.T. Reed Trust OF  
PO Box 1627  
Lovington, NM 88260-1627

Herd Partners Ltd.  
PO Box 130  
Midland, TX 79702

Jane B. Ramsland Oil and Gas Partnership  
Christy B. Mallams  
V. Elaine Barnes  
Steven C. Barnes  
Laurie B. Barr  
Julie Ellen Barnes  
Shirley B. Wynn  
PO Box 10505  
Midland, TX 79702

Wells Fargo Bank, N.A., Trustee for the Lois Mae Wallace Revocable Trust "A"  
PO Box 1959  
Midland, TX 79702

Bank of America N.A., and Brian Tony Kirk co Trustees of the Golda Raechel Watkins Trust  
PO Box 830308  
Dallas, TX 75283

Bank of America N.A., and Brian Tony Kirk co Trustees of the Monte Forrest Byers Trust  
PO Box 830308  
Dallas, TX 75283

Bank of America N.A., and Brian Tony Kirk co Trustees of the Edward Wesley Salem Trust  
PO Box 830308  
Dallas, TX 75283

Alton C. White, Jr.  
31 12 Above Stratford Place  
Austin, TX 78746

Muirfield Resources Company  
PO Box 3166  
Tulsa, OK 74101-3166

Silverado Oil and Gas, LLP  
PO Box 52308  
Tulsa, OK 74152

Waikiki Partners, LP  
PO Box 2127  
Midland, TX 79702

Live Oak Mineral Partners  
PO Box 341981  
Austin, TX 78734

Devon Production Company, LP  
20 N. Broadway  
OKC, OK 73102

Clifford N. Hair, Jr.  
PO Box 8122  
Midland, TX 79708

Cimarex Energy Co.  
15 East 5th Street, Suite 1000  
Tulsa, OK 74103

**BUCKLEY LEASE**

**PARTY**

WISHBONE TEXAS OPERATING COMPANY, LLC	98.63496%
ROY G. BARTON, et al	1.16961%
J.T. HANNERS	0.09770%
TRABAJO DEL SPEAR, LP	0.09773%
TOTAL	100.0000%

**T. D. POPE 36 LEASE**

**PARTY**

WISHBONE TEXAS OPERATING COMPANY, LLC	98.33334%
HERD OIL AND GAS CO.	1.66666%
TOTAL	100.0000%

**MANN LEASE**

**PARTY**

WISHBONE TEXAS OPERATING COMPANY, LLC	100.000000%
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# BEATTY & WOZNAK, P.C.

ATTORNEYS AT LAW  
500 DON GASPAR AVENUE  
SANTA FE, NEW MEXICO 87505-2626  
TELEPHONE (505) 983-8545  
FACSIMILE (505) 983-8547  
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NORTH DAKOTA  
UTAH  
WYOMING

CANDACE CALLAHAN

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

March 12, 2019

## VIA CERTIFIED MAIL-RETURN RECEIPT

To: Donna Spears Johnson

Re: New Mexico Oil Conservation Division Application of Wishbone Texas Operating Company, LLC for Reinstatement of Injection Well Permits to Enhance Oil Recovery in Denton Devonian Waterflood Project, Lea County, New Mexico, Case No. 20406  
**T.D Pope "36" Well No. 10**

Dear Ladies and Gentlemen:

This letter is to advise you that Wishbone Texas Operating Company, LLC has filed with the New Mexico Oil Conservation Division the enclosed Application for Reinstatement of Injection Well Permits to Enhance Oil Recovery in the Denton Devonian Waterflood Project, Lea County, New Mexico. A copy of the accompanying C-108 is also enclosed. This application is to be set for hearing before a Division Examiner at 8:15 a.m. on April 4, 2019 by order of the Director of the Oil Conservation Division. 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 the surface owner underlying the T. D. Pope "36" Well No. 10 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 H. Craig Clark at +1 (832-807-2207) or hcclark@wishboneep.com.

Very truly yours,



Candace Callahan  
Attorney for Wishbone Texas Operating Company LLC.

**BEATTY & WOZNAK, P.C.**

ATTORNEYS AT LAW  
500 DON GASPAR AVENUE  
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CANDACE CALLAHAN

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

March 12, 2019

VIA CERTIFIED MAIL-RETURN RECEIPT

To: Resolute Natural Resources

Re: New Mexico Oil Conservation Division Application of Wishbone Texas Operating Company, LLC for Reinstatement of Injection Well Permits to Enhance Oil Recovery in Denton Devonian Waterflood Project, Lea County, New Mexico, Case No. 20406  
**W.T. Mann A Well No. 2**

Dear Ladies and Gentlemen:

This letter is to advise you that Wishbone Texas Operating Company, LLC has filed with the New Mexico Oil Conservation Division the enclosed Application for Reinstatement of Injection Well Permits to Enhance Oil Recovery in the Denton Devonian Waterflood Project, Lea County, New Mexico. A copy of the accompanying C-108 is also enclosed. This application is to be set for hearing before a Division Examiner at 8:15 a.m. on April 4, 2019 by order of the Director of the Oil Conservation Division. 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 the surface owner underlying the W.T Mann A Well No. 2 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 H. Craig Clark at +1 (832-807-2207) or hcclark@wishboneep.com.

Very truly yours,



Candace Callahan

Attorney for Wishbone Texas Operating Company LLC.

Exhibit A

Resolute Natural Resources  
1700 Lincoln St.  
Suite 2800  
Denver CO 80203

Donna Spears Johnson  
618 W Avenue A  
Lovington NM 88260

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NORTH DAKOTA  
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CANDACE CALLAHAN

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

March 12, 2019

## VIA CERTIFIED MAIL-RETURN RECEIPT

To: PARTIES ON ATTACHED EXHIBIT A

Re: New Mexico Oil Conservation Division Application of Wishbone Texas Operating Company, LLC Reinstatement of Injection Well Permits to Enhance Oil Recovery in Denton Devonian Waterflood Project, Lea County, New Mexico, Case No. 20406  
**W.T. Mann A Well No. 2 and T.D Pope "36" Well No. 10**

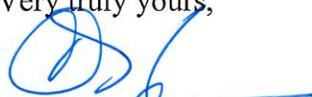
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A party appearing in a Division case is required by Division Rule 19.15.4.13:B to file a Pre-Hearing Statement four days in advance of a scheduled hearing. This statement must be filed with the Division's Santa Fe office at the above address and should 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 H. Craig Clark at +1 (832-807-2207) or hcclark@wishboneep.com.

Very truly yours,



Candace Callahan  
Attorney for Wishbone Texas Operating Company LLC.

Exhibit A

Occidental Oil and Gas Corporation  
ATTENTION: LAUREN GUEST  
Land Department  
5 Greenway Plaza, Suite 110  
Houston, TX, 77046-0521

Wells Fargo Bank N.A., as Trustee of the  
Angelica S. Bryce T/U/W FBO Marc Appleton  
PO Box 5383  
Denver, CO 80217

Wells Fargo Bank N.A., as Trustee of the  
Angelica S. Bryce T/U/W FBO Lee Appleton  
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Angelica S. Bryce T/U/W FBO Lynne Appleton  
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Bryce Trust FBO Nina Potter created under the  
will of Angelica S. Bryce, deceased  
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Denver, CO 80217

Wells Fargo Bank N.A., as Trustee of the Sylvie  
Bryce Trust FBO Angelica Schuyler Roop created  
under the will of Angelica S. Bryce, deceased  
PO Box 5383  
Denver, CO 80217

Karl Mark Dunlap  
127 A. Chevy Chase Street  
Gaithersburg MD 20878

Christopher L. Doran  
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Mt. Gravatt  
Queensland,4122 Australia

Edwin Kim Dunlap  
3019 Del Cerro  
Almogordo, NM 88310

Margaret D. Barklind  
605 Sudden Valley  
Bellingham WA 98229

Ursel S. Doran  
1421 N. Virginia, Apt A.  
Reno, NV 89503

Wells Fargo Bank N.A Wealth Management as  
Agent for Desert Waterfall LLC  
201 Main Street, Suite 400  
Attn: Bryan Frazier, CPL  
Vice President, Sr. Oil & Gas Manager

Harold Alston Elkan and Nancy Hastings Elkan,  
Joint Tenants  
3731 Shade tree Terrace  
Portage, MI 49024-1036

James Reed McCrory  
PO Box 25764  
Albuquerque, NM 8712-0764

Western Commerce Bank, Trustee of the W.T.  
Reed Trust OF  
PO Box 1627  
Lovington, NM 88260-1627

John David Dunlap  
PO Box 1259  
Crown Point, NM 87313

Herd Partners Ltd.  
PO Box 130  
Midland, TX 79702

Jane B. Ramsland Oil and Gas Partnership  
PO Box 10505  
Midland, TX 79702

Christy B. Mallams  
PO Box 10505  
Midland, TX 79702

V. Elaine Barnes  
PO Box 10505  
Midland, TX 79702

Steven C. Barnes  
PO Box 10505  
Midland, TX 79702

Laurie B. Barr  
PO Box 10505  
Midland, TX 79702

Julie Ellen Barnes  
PO Box 10505  
Midland, TX 79702

Shirley B. Wynn  
PO Box 10505  
Midland, TX 79702

Wells Fargo Bank, N.A., Trustee for the Lois Mae  
Wallace Revocable Trust "A"  
PO Box 1959  
Midland, TX 79702

Farmers National Company and Brian Tony Kirk  
Co-Trustees of the Golda Raechel Watkins Trust  
5110 S. Yale Ave. STE 400  
Tulsa, OK 74135  
ATTN: Oil/ Gas Mineral Management Dept

Farmers National Company and Brian Tony Kirk  
Co-Trustees of the Edward Wesley Salem Trust  
5110 S. Yale Ave. STE 400  
Tulsa, OK 74135  
ATTN: Oil/ Gas Mineral Management Dept

Farmers National Company and Brian Tony Kirk  
Co-Trustees of the Monte Forrest Byers Trust  
5110 S. Yale Ave. STE 400  
Tulsa, OK 74135  
ATTN: Oil/ Gas Mineral Management Dept

Alton C. White, Jr.  
3112 Above Stratford Place  
Austin, TX 78746

Muirfield Resources Company  
PO Box 3166  
Tulsa, OK 74101-3166

Silverado Oil and Gas, LLP  
PO Box 52308  
Tulsa, OK 74152

Waikiki Partners, LP  
PO Box 2127  
Midland, TX 79702

Live Oak Mineral Partners  
PO Box 341981  
Austin, TX 78734

Devon Production Company, LP  
333 West Sheridan Avenue  
Oklahoma City, Oklahoma 73102-5015

Clifford N. Hair, Jr.  
PO Box 8122  
Midland, TX 79708

Cimarex Energy Co.  
15 East 5th Street, Suite 1000  
Tulsa, OK 74103

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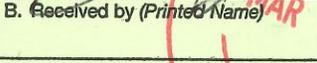
7018 2290 0001 8731 6928

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	\$ _____
Postage	
\$	
Total Postage	
\$	

Postmark  
Here

Sent To	9404-0002 S
Street and Apt.	Donna Spears Johnson 618 W Avenue A
City, State, ZIP	Lovington NM 88260

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

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</p> <p>X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p style="text-align: right;">9404-0002 S</p> <p>Donna Spears Johnson 618 W Avenue A Lovington NM 88260</p>		<p>B. Received by (Printed Name)  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>C. Date of Delivery <b>MAR 18 2018</b></p>	
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 3146 7166 1217 09</p> <p>7018 2290 0001 8731 6928</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>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 checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2015 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	\$ _____

Postmark  
Here

Postage  
 \$ \_\_\_\_\_

**Total Postage**  
 \$ \_\_\_\_\_

9404 -0002 S

Sent To Resolute Natural Resources  
 Street and Apt. 1700 Lincoln St.  
 Suite 2800  
 City, State, Zip Denver CO. 80203

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

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                  X _____ <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</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>1. Article Addressed to:</p> <p style="text-align: right;">9404 -0002 S</p> <p>Resolute Natural Resources                  1700 Lincoln St.                  Suite 2800                  Denver CO. 80203</p>	<p style="text-align: center; color: red; font-size: 24px;">RECEIVED</p> <p style="text-align: center; color: red; font-size: 24px;">MAR 18 2019</p> <p style="text-align: center; color: blue; font-weight: bold;">CIMAREX ENERGY CO</p>												
<p>2. Article Number (Transfer from service label)</p> <p>7018 2290 0001 8731 6911</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
<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												
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>												

7018 2290 0001 8731 7482

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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	\$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____	
Postage	\$ _____	
Total Postage and Fees	\$ _____	
Sent To	9404 -0002	
Street and Apt. No.	Occidental Oil and Gas Corporation	
City, State, ZIP+4®	ATTENTION: LAUREN GUEST	
	Land Department	
	5 Greenway Plaza, Suite 110	
	Houston, TX, 77046-0521	

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

<b>SENDER: COMPLETE THIS SECTION</b>	<b>COMPLETE THIS SECTION ON DELIVERY</b>
<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 type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <u>Lauren Guest</u> C. Date of Delivery  <u>MAR 16 2019</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>1. Article Addressed to:</p> <p style="text-align: right;">9404 -0002</p> <p>Occidental Oil and Gas Corporation  ATTENTION: LAUREN GUEST  Land Department  5 Greenway Plaza, Suite 110  Houston, TX, 77046-0521</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7018 2290 0001 8731 7482</p>	
<p>3. Service Type</p> <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"/> Insured Mail	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt

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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	\$ _____
Postage	
\$	
Total Postage and	
\$	

Postmark  
Here

Sent To  
 Street and Apt. No.  
 City, State, ZIP+4

9404 -0002  
 Wells Fargo Bank N.A., as Trustee of the Angelica S.  
 Bryce T/U/W FBO Marc Appleton  
 PO Box 5383  
 Denver, CO 80217

PS Form 3800, April 2013 PSN 7530-02-000-9047 SEE REVERSE FOR INSTRUCTIONS

7018 1130 0000 8506 3018

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</p> <p>X <i>[Signature]</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p style="text-align: center;">9404 -0002                  Wells Fargo Bank N.A., as Trustee of the Angelica S.                  Bryce T/U/W FBO Marc Appleton                  PO Box 5383                  Denver, CO 80217</p>		<p>B. Received by (Printed Name)</p> <p><i>STAROBINE</i></p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 3146 7166 1216 17</p> <p>7018 1130 0000 8506 3018</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>all 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 checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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>Steele</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>													
<p>1. Article Addressed to:</p> <p style="text-align: center;">9404 -0002</p> <p>Wells Fargo Bank N.A., as Trustee of the            Angelica S. Bryce T/U/W FBO Lee Appleton            PO Box 5383            Denver, CO 80217</p>  <p style="text-align: center;">9590 9402 3146 7166 1216 24</p>	<p>B. Received by (Printed Name)  <i>STARROBINEY</i></p>	<p>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)  <span style="font-size: 1.2em;">7018 1130 0000 8506 3025</span></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
<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													
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>												

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<p>Postage \$ _____</p> <p><b>Total Postage \$ _____</b></p>	<p>9404 -0002</p>
<p>Sent To _____</p> <p>Street and Apt. _____</p> <p>City, State, ZIP+ _____</p>	<p>Wells Fargo Bank N.A., as Trustee of the            Angelica S. Bryce T/U/W FBO Lee Appleton            PO Box 5383            Denver, CO 80217</p>

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

5206 9059 7018 1130 0000 8506 3025

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7018 1130 0000 8506 3032

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

Postage	\$ _____
Total Postage	\$ _____

9404 -0002

Sent To	Wells Fargo Bank N.A., as Trustee of the
Street and Apt.	Angelica S. Bryce T/U/W FBO Peter Appleton
City, State, ZIP	PO Box 5383 Denver, CO 80217

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

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</p> <p><input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>STAROBINER</i></p> <p>C. Date of Delivery</p>												
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px;"> <p style="text-align: center;">9404 -0002</p> <p>Wells Fargo Bank N.A., as Trustee of the              Angelica S. Bryce T/U/W FBO Peter Appleton              PO Box 5383              Denver, CO 80217</p> </div>	<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 style="font-size: 1.2em; font-weight: bold;">7018 1130 0000 8506 3032</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
<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												
<p>9590 9402 3146 7166 1216 31</p> 													
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p>													

7018 1130 0000 8506 3049

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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

Postage  
\$ \_\_\_\_\_

Total Postage a  
\$ \_\_\_\_\_

9404 -0002

Sent To  
Street and Apt. #  
City, State, ZIP+4

Wells Fargo Bank N.A., as Trustee of the  
Angelica S. Bryce T/U/W FBO Lynne Appleton  
PO Box 5383  
Denver, CO 80217

PS Form 3800, April 2015 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:

9404 -0002  
Wells Fargo Bank N.A., as Trustee of the  
Angelica S. Bryce T/U/W FBO Lynne Appleton  
PO Box 5383  
Denver, CO 80217



9590 9402 3146 7166 1216 48

2. Article Number (Transfer from service label)

7018 1130 0000 8506 3049

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
 Agent  
 Addressee

X *[Signature]*

B. Received by (Printed Name)  
STAROBINEV

C. Date of Delivery

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

3. Service Type

Priority Mail Express®

Adult Signature

Registered Mail™

Adult Signature Restricted Delivery

Registered Mail Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Return Receipt for Merchandise

Collect on Delivery

Signature Confirmation™

Collect on Delivery Restricted Delivery

Signature Confirmation Restricted Delivery

Mail 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 \$ \_\_\_\_\_

Postmark  
Here

Postage \$ \_\_\_\_\_

Total Postage and \$ \_\_\_\_\_

9404 -0002

Sent To \_\_\_\_\_

Street and Apt. No. \_\_\_\_\_

City, State, ZIP+4 \_\_\_\_\_

Wells Fargo Bank N.A., as Trustee of the Sylvie Bryce  
 Trust FBO Nina Potter created under the will of  
 Angelica S. Bryce, deceased  
 PO Box 5383  
 Denver, CO 80217

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

7018 1130 0000 8506 3056

**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:**

9404 -0002  
 Wells Fargo Bank N.A., as Trustee of the Sylvie Bryce  
 Trust FBO Nina Potter created under the will of  
 Angelica S. Bryce, deceased  
 PO Box 5383  
 Denver, CO 80217



9590 9402 3146 7166 1216 55

**2. Article Number (Transfer from service label)**

7018 1130 0000 8506 3056

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**

X *[Signature]*

- Agent  
 Addressee

**B. Received by (Printed Name)**

STAN ROBINET

**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  Return Receipt for Merchandise
- Collect on Delivery  Signature Confirmation™
- Collect on Delivery Restricted Delivery  Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 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 [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

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

Postage \$ \_\_\_\_\_

Total Postage \$ \_\_\_\_\_

Sent To \_\_\_\_\_

Street and Apt. \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

9404 -0002  
 Wells Fargo Bank N.A., as Trustee of the Sylvie Bryce  
 Trust FBO Clifford Potter created under the will of  
 Angelica S. Bryce, deceased  
 PO Box 5383  
 Denver, CO 80217

PS Form 3800

See Reverse for Instructions

7018 1130 0000 8506 2929

**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:

9404 -0002  
 Wells Fargo Bank N.A., as Trustee of the Sylvie Bryce  
 Trust FBO Clifford Potter created under the will of  
 Angelica S. Bryce, deceased  
 PO Box 5383  
 Denver, CO 80217



9590 9402 3146 7166 1216 62

2. Article Number (Transfer from service label)

7018 1130 0000 8506 2929

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X Sylvie Bryce

- Agent  
 Addressee

B. Received by (Printed Name)

STH ROBINEM

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
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

**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**

7018 0680 0002 2179 8012

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

Postage  
\$ \_\_\_\_\_

Total Postage \$ \_\_\_\_\_

9404 -0002

Sent To  
Street and Apt.  
City, State, ZIP

Wells Fargo Bank N.A., as Trustee of the Sylvie Bryce  
Trust FBO Angelica Schuyler Roop created under the  
will of Angelica S. Bryce, deceased  
PO Box 5383  
Denver, CO 80217

PS Form 3800, April 2015 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:

9404 -0002  
Wells Fargo Bank N.A., as Trustee of the Sylvie Bryce  
Trust FBO Angelica Schuyler Roop created under the  
will of Angelica S. Bryce, deceased  
PO Box 5383  
Denver, CO 80217



9590 9402 3146 7166 1216 79

2. Article Number (Transfer from service label)

7018 0680 0002 2179 8012

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee

X *Sylvie Bryce*

B. Received by (Printed Name)  
STAROBINEK

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
  - Return Receipt for Merchandise
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

## Track Another Package +

**Tracking Number:** 70182290000187316867

Remove X

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

### In-Transit

March 19, 2019  
In Transit to Next Facility

Get Updates ✓

Text & Email Updates

### Tracking History

**March 19, 2019**

In Transit to Next Facility

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

**March 15, 2019, 7:36 pm**

Departed USPS Regional Facility  
GAITHERSBURG MD DISTRIBUTION CENTER

**March 14, 2019, 9:32 am**

Arrived at USPS Regional Facility  
GAITHERSBURG MD DISTRIBUTION CENTER

7018 2290 0001 8731 6867

<b>U.S. Postal Service™</b>	
<b>CERTIFIED MAIL® RECEIPT</b>	
Domestic Mail Only	
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)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	\$ _____
<b>Total Postage</b>	\$ _____
Sent To	Karl Mark Dunlap
Street and Apt.	127 A. Chevy Chase Street
City, State, Zip	Gaithersburg MD 20878
PS Form 3800, April 2015 PSN 7530-02-000-9047	

Postmark Here

9404 -0002