

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

**APPLICATION OF STEWARD ENERGY II,
LLC FOR COMPULSORY POOLING AND
APPROVAL OF AN UNORTHODOX WELL
LOCATION, LEA COUNTY, NEW MEXICO**

Case No. 20939

INDEX

Application

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1. Self-Affirmed Statement of Mark Taylor Warren II
 - A. C-102
 - B. List of uncommitted mineral interests
 - C. Copy of well proposal letter and associated USPS return green cards
 - D. Sample hearing notice letter sent to uncommitted mineral interests and the Texas General Land Office and associated USPS return green cards
 - E. Affidavit of Publication
 - F. Authorization for Expenditure for proposed well
2. Self-Affirmed Statement of Shane Seals
 - A. Map showing location of proposed well
 - B. Structure map of San Andres formation
 - C. West to east cross section

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APPLICATION

Pursuant to NMSA § 70-2-17 and 19.15.16.15(C)(6) NMAC, Steward Energy II, LLC (“Steward”) applies for an order (i) pooling all uncommitted mineral interests in the San Andres formation in a 358.05-acre, more or less, horizontal spacing unit comprised of the E/2 of Section 23 and the NE/4 of Section 26, Township 13 South, Range 38 East in Lea County, New Mexico, and (ii) approving an unorthodox well location for the Slippin Jimmy Fee #1H well. In support of its Application, Steward states:

1. Steward (OGRID No. 371682) is a working interest owner in the the E/2 of Section 23 and the NE/4 of Section 26 and has the right to drill a well thereon.
2. The horizontal spacing unit will be dedicated to the Slippin Jimmy Fee #1H well, which will be horizontally drilled from a surface location in Lot 3 in Section 26 to a bottom hole location in Lot 1 in Section 23, Township 13 South, Range 38 East.
3. The completed interval for the Slippin Jimmy Fee #1H well will be unorthodox in relation to the eastern boundary of the proposed horizontal spacing unit. Consequently, Steward requests Division approval of the unorthodox well location.
4. Steward has undertaken diligent, good-faith efforts to obtain voluntary agreements from all mineral interest owners within the horizontal spacing unit to participate in the drilling of

the well, but has been unable to obtain voluntary agreements from all of the mineral interest owners.

5. The pooling of all uncommitted mineral interests in the San Andres formation underlying the E/2 of Section 23 and the NE/4 of Section 26 will avoid the drilling of unnecessary wells, prevent waste, and protect correlative rights.

6. In order to allow Steward to obtain its just and fair share of the oil and gas underlying the subject lands, all uncommitted mineral interest owners in the horizontal spacing unit should be pooled.

WHEREFORE, Steward requests that this Application be set for hearing on December 12, 2019 and that, after notice and hearing, the Division enter an order:

A. Pooling all uncommitted mineral interests in the San Andres formation underlying the E/2 of Section 23 and the NE/4 of Section 26;

B. Approving the unorthodox location for the Slippin Jimmy Fee #1H well;

C. Designating Steward as the operator of the Slippin Jimmy Fee #1H well;

D. Authorizing Steward to recover its costs of drilling, equipping, and completing the Slippin Jimmy Fee #1H and allocating the costs among the well's working interest owners;

E. Approving the actual operating charges and costs of supervision during drilling and after completion, together with a provision for adjusting the rates pursuant to the COPAS accounting procedure; and

F. Imposing a 200% penalty for the risk assumed by Steward in drilling and completing the Slippin Jimmy Fee #1H well against any mineral interest owner who does not voluntarily participate in the drilling of the well.

HINKLE SHANOR LLP



Gary W. Larson

P.O. Box 2068

Santa Fe, NM 87504-2068

Phone: (505) 982-4554

Facsimile: (505) 982-8623

glarson@hinklelawfirm.com

Counsel for Steward Energy II, LLC

**STATE OF NEW MEXICO
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**SELF-AFFIRMED STATEMENT OF
MARK TAYLOR WARREN II**

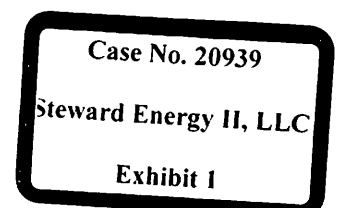
1. I am over 18 years of age and am competent to provide this Self-Affirmed Statement. I have personal knowledge of the matters addressed herein.

2. I am the Land Manager at Steward Energy II, LLC ("Steward Energy"). I have had direct involvement with Steward Energy's development of the 358.05-acre, more or less, horizontal spacing unit ("HSU") that is the subject of Steward Energy's application in this case.

3. The HSU will be dedicated to the Slippin Jimmy Fee #1H well. The C-102 for the well is attached hereto as Exhibit A. As indicated on the C-102, the proposed HSU is comprised of the E/2 of Section 23 and the NE/4 of Section 26, Township 13 South, Range 38 East in Lea County.

4. Steward Energy seeks to pool all uncommitted interests in the San Andres formation underlying the HSU. A listing of the uncommitted mineral interests is attached hereto as Exhibit B. 86.733453% of the working interests in the HSU are committed to the proposed well.

5. The Slippin Jimmy Fee #1H well is to be horizontally drilled from a surface location in Lot 3 in Section 26 to a bottom hole location in Lot 1 in Section 23, Township 13 South, Range 38 East.



6. As also indicated on the C-102, the completed interval for the well will be unorthodox at the eastern boundary of the HSU. Consequently, Steward Energy is requesting approval of the unorthodox well location. With regard to the offset acreage on the Texas side, Steward Energy is the only operator in the offset acreage, and there is one unleased mineral interest owner, the Texas General Land Office, in the offset acreage.

7. There are no depth exceptions in the San Andres formation underlying the proposed HSU.

8. Steward Energy has the right to pool the overriding royalty owners in the HSU.

9. I sent certified mail well proposal letters to all of the uncommitted mineral interests identified in Exhibit B. A true and correct sample of my well proposal letter and the associated green cards are attached hereto as Exhibit C.

10. Subsequently, Steward Energy conducted follow-up communications with a number of the uncommitted mineral interests, ten of whom have leased their interest to Steward Energy.

11. In my opinion, Steward Energy has made a good faith effort to obtain the voluntary joinder of the uncommitted interests in the proposed well.

12. Certified mail notice of Steward Energy's application and the Division hearing was provided by Steward Energy's counsel to the uncommitted mineral interests in the HSU and to the Texas General Land Office. A sample of the notice letter sent to the uncommitted interests, the letter sent to the Texas General Land Office, and the associated green cards are attached hereto as Exhibit D.

13. Steward Energy also published notice of the hearing in the Hobbs News-Sun. A true and correct copy of the newspaper's Affidavit of Publication is attached hereto as Exhibit E.

14. The AFE for the proposed Slippin Jimmy Fee #1H well is attached hereto as Exhibit E. The estimated cost of the San Andres well is fair and reasonable, and is comparable to the cost of other wells of similar depth and length drilled in Lea County.

15. Steward Energy requests overhead and administrative rates of \$6,500 per month while the well is being drilled and \$650 per month while the well is producing. These rates are fair, and are comparable to the rates charged by Steward Energy and by other operators in the vicinity. They are also the rates set forth in the Joint Operating Agreement for the HSU. Steward Energy requests that the rates be adjusted periodically in accordance with the COPAS Accounting Procedure.

16. Steward Energy requests that it be designated the operator of the Slippin Jimmy Fee #1H well.

17. Steward Energy requests that a 200% risk charge be assessed against non-consenting working interest owners.

18. The exhibits attached hereto are true and correct copies of documents that were either prepared by me or under my supervision, or were compiled from company business records.

19. In my opinion, the granting of Steward Energy's application would serve the interests of conservation and the prevention of waste.

20. I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 19 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.


Mark Taylor Warren II

12.11.19
Date

District I
1625 N French Dr., Hobbs, NM 88240
Phone (575) 393-6161 Fax (575) 393-0720
District II
811 S First St., Artesia, NM 88210
Phone (575) 748 1283 Fax (575) 748 9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone (505) 334-6178 Fax (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 7500	³ Pool Name BRONCO; SAN ANDRES, SOUTH
⁴ Property Code	⁵ Property Name SLIPPIN JIMMY FEE	⁶ Well Number 1H
⁷ OGRID No. 371682	⁸ Operator Name STEWARD ENERGY II, LLC	⁹ Elevation 3791'

¹⁰ Surface Location									
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	26	13S	38E		2048	SOUTH	333	EAST	LEA

¹¹ Bottom Hole Location If Different From Surface									
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	23	13S	38E		100	NORTH	394	EAST	LEA

¹² Dedicated Acres 358.05	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

<p>Defining Well</p> <p>SHEET 1 OF 3 JOB No. R4003_001_C REV 5 JCS 11/7/2019</p>	<p>17 OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division</p> <p>Signature: <u>Scott Stedman</u> Date: <u>11-7-19</u></p> <p>Printed Name: <u>Scott Stedman</u></p> <p>E-mail Address: <u>scott.stewardenergy.com</u></p>
	<p>18 SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>NOVEMBER 7, 2019</p> <p>Date of Survey</p> <p>Signature and Seal of Professional Surveyor: <u>[Signature]</u></p> <p>Certificate Number LLOYD P. SHORT 21653</p>
	<p>LAST TAKE POINT/BOTTOM HOLE LOCATION</p> <p>100' FNL 394' FEL, SECTION 23 NAD 83, SPCS NM EAST X: 930233.98' / Y: 796931.31' LAT: 33.18424328N / LON: 103.06221342W NAD 27, SPCS NM EAST X: 889058.09' / Y: 796868.68' LAT: 33.18413664N / LON: 103.0617148W</p>
	<p>KICK OFF POINT / FIRST TAKE POINT</p> <p>2503' FNL 247' FEL, SECTION 26 NAD 83, SPCS NM EAST X: 930335.73' / Y: 789238.76' LAT: 33.16310221N / LON: 103.06218613W NAD 27, SPCS NM EAST X: 889159.81' / Y: 789176.36' LAT: 33.16299555N / LON: 103.06168772W</p>

Distances/areas relative to NAD 83 Combined Scale Factor: 1.000081596 Convergence: 00°41'37 78218"



Uncommitted Mineral Interests

Alma L. & Kelly B. Tisher
P.O. Box 533
Littleton, CO 80160

Baxsto, LLC
P.O. Box 302857
Austin, TX 78703

Billy Glen Spradlin
29 Rim Road
Kilgore, TX 75662

Bonnie L. McGurn
699 Constellation Ct.
Davidsonville, MD 21035

Brook Colby Gruszka
2541 Prairie Avenue
Apartment 2
Evanston, IL 30201

Buffy Energy, LLC
P.O. Box 1649
Austin, TX 78767

Cathie McCown Cone
Post Office Box 658
Dripping Springs, TX 78620

Chatfield Company
308 West 104th Avenue
Suite 2A
New York City, NY 10025

Christa L. Leavell
Post Office Box 470
Robinson, IL 62454

Colby Family Revocable Living
Marital Deduction Trust
c/o Paul J. Colby, Co-Trustee
7 Ramsel Way
Byford, W.A., 6122
Australia

Daniel Alden Hill, Jr.
185 Massachusetts Avenue
Apartment 202
Boston, MA 02115

Donald Marshall Markham
Family Trust
c/o Donald Marshall Markham, Trustee
P.O. Box 241
Center Point, TX 78010

Douglas A. Denton
1501 Princeton Avenue
Midland, TX 79701

Edward and Bessie O'Neal
P.O. Box 241
Center Point, TX 78010

FFF, Inc.
Post Office Box 8687
Denver, CO 80210

Frannifin, LLC, an Oklahoma limited
liability company
501 W. Main Street
Yukon, OK 73099

Grady Hunnicutt Paul
Larry Hunnicutt, Custodian
14046 Rolling Hills Lane
Dallas, TX 75240

Harle, Inc.
1504 Hess Creek Road
Newberg, OR 97132
Howard H. Cone Trust "A"
u/w/o Herbert E. Cone
117 Seaview Lane
Corpus Christi, TX 78411

Jan C. Ice
P.O. Box 7366
Covington, WA 98042

Jennifer Moynihan
1301 Clover Valley Way, Apt. K
Edgewood, MD 21040

John Raymond Hill, Jr.
175 Willowgreen Place
Santa Rosa, CA 95403

Justin Hunnicutt Travis
14046 Rolling Hills Lane
Dallas, TX 75240

Kenneth G. Cone
c/o Cathie Cone McGowan, AIF
P.O. Box 507
Dripping Springs, TX 78620

L.S. & M.E. Anderson Family Trust
Dated 5/26/2004
61166 Stoney Point Road
Vernonia, OR 97064

L.S. & M.E. Anderson Family Trust
Dated 5/26/2004
71332 San Gorgonio Rd.
Rancho Mirage, CA 92207

Lavern W. Colby Revocable Trust
Dt. 2/15/00 & amended 7/13/2000
c/o Paul J. Colby, Co-Trustee
7 Ramsel Way
Byford, W.A., 6122
Australia

Louis A. Oswald, III
5360 S. Marshall St.
Littleton, CO 80218

Lowe Minerals & Land Family Ptship, Ltd.
2313 Broadway
Lubbock, TX 79401

M.W. Oil Investment Company
5454 Washington St.
Denver, CO 80216

Margaret E. Moynihan
8605 Soaring Eagle Ln.
Waxhaw, NC 28173

Michelle Leavell
P.O. Box 470
Robinson, IL 62454

Motowi, LLC
501 W. Main St.
Yukon, OK 73099

Oswald Family Trust
Louis A. Oswald, III, Trustee
5360 S. Marshall St.
Littleton, CO 80218

Patrick B. Moynihan
1807 Flagstaff Rd, #179
Bell Air, MD 21015

Paula M. Schneider
1902 Thomas Run Cir.
Bell Air, MD 21015

Pumpkin Buttes, LLC
P.O. Box 1989
Casper, WY 86202

Robert Edwards Eckels, Jr., LLC
13637 Happy Hollow Rd.
Eckert, CO 91418

Roy G. Barton & Opal Barton
Revocable Trust, u/t/a 1/28/1982
c/o Roy G. Barton, Jr., Trustee
1919 N. Turner St.
Hobbs, NM 88240

The Long Trusts
Larry T. Long, Managing Trustee
P.O. Box 3096
Kilgore, TX 75663

Wytex Oil Company
8690 S. Marshall St.
Littleton, CO 80218



*****VIA CERTIFIED U.S.P.S. MAIL*****

September 25, 2019

**Re: Steward Energy II, LLC
Well Proposal – SLIPPIN JIMMY FEE #1H
Sections 23 and 26, Township 13 South, Range 38 East, N.M.P.M.
Lea County, New Mexico**

Billy Spradlin
29 Rim Road
Kilgore, TX 75662

To Whom it may concern,

This letter will serve as notice regarding the plans of Steward Energy II, LLC ("Steward") to drill the Slippin Jimmy Fee #1H ("Well") with its surface location in the N/2 of the SE/4 of Section 26, Township 13 South, Range 38 East, Lea County, New Mexico. The Well will target the San Andres formation and will be drilled as a horizontal well with an approximate total depth drilled of 13,500 feet. The producing intervals of the Well will be located within the standard horizontal spacing unit ("Spacing Unit") approved by the New Mexico Oil Conservation Division.

Steward's ownership records indicate that you own an unleased mineral interest located within the Well's Spacing Unit, and as an unleased mineral owner you are offered participation in the Well based upon your proportionate mineral interest in the Spacing Unit. Your proportionate interest and share of cost in the Well are noted at the bottom of the attached Authorization for Expenditure ("AFE"). The itemized cost of the Well is listed on the AFE, and the total cost for drilling is \$1,479,830.00, with an additional \$3,219,396.00 to complete the well.

Please indicate your election as to your participation in the Well by checking the appropriate box in the space provided below.

In the even you elect to participate in the well, please sign the bottom of the attached AFE and return the AFE along with this signed letter.

In the event you elect NOT to participate in the well, please return a signed copy of this letter. Please be advised that Steward has requested a risk penalty in accordance with New Mexico law. In the event you elect NOT to participate, but do desire to lease your mineral interest, please contact Steward's Land Department at any of the contacts listed below.

C

Your election must be received by Steward within 30 days of the date this proposal was received by you. Failure to respond within 30 days shall be deemed an election NOT to participate. Please send your election to:

Steward Energy II, LLC
Land Department
2600 N. Dallas Parkway, Suite 400
Frisco, Texas 75094

For questions regarding this well proposal please contact the Land Department at land@stewardenergy.net or call (214) 297-0500

Respectfully,



Taylor Warren
Land Manager

Attachment

Proportionate Interest: 0.221815%

The undersigned elects to ☐ not to ☐ participate in the SLIPPIN JIMMY FEE #1H well with their proportionate interest.

Billy Glen Spradlin

By: _____ Date: _____

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 Address

L.S. and M.E. Anderson Family Trust
Jay Anderson
61166 Stoney Point Road
Vernonia, OR 97064

2. Article Number (Transfer from service label)

7017 3380 0000 7347 4848

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Carol Anderson

B. Received by (Printed Name)

Carol Anderson

C. Date of Delivery

10-3-19

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

If YES, enter delivery address below:

3. Service Type

☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Return Receipt for Merchandise
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

5. Article Address

Violette Lewis
678 Kaipo Drive
Corpus Christi, TX 78418

6. Article Number (Transfer from service label)

7019 0700 0000 5805 0330

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

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Vernonia, OR 97064

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7017 3380 0000 7347 4848

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COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Carol Anderson

B. Received by (Printed Name)

Carol Anderson

C. Date of Delivery

10-3-19

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

If YES, enter delivery address below:

3. Service Type

☐ Priority Mail Express®
☐ Registered Mail™
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☐ Certified Mail®
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1. Article Address

Christa L. Leavell, Custodian
Post Office Box 470
Robinson, IL 62454

2. Article Number (Transfer from service label)

7017 3380 0000 7347 4831

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Michelle C Leavell

B. Received by (Printed Name)

Michelle C Leavell

C. Date of Delivery

10/3/19

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

If YES, enter delivery address below:

3. Service Type

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

4. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

5. Article Address

Christa L. Leavell, Custodian
Post Office Box 470
Robinson, IL 62454

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

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1. Article Address

Christa L. Leavell
Post Office Box 470
Robinson, IL 62454

2. Article Number (Transfer from service label)

7017 3380 0000 7347 4824

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Michelle C Leavell

B. Received by (Printed Name)

Michelle C Leavell

C. Date of Delivery

10/3/19

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

If YES, enter delivery address below:

3. Service Type

☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Return Receipt for Merchandise
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

5. Article Address

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Post Office Box 470
Robinson, IL 62454

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COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Michelle C Leavell

B. Received by (Printed Name)

Michelle C Leavell

C. Date of Delivery

10/3/19

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

If YES, enter delivery address below:

3. Service Type

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Robinson, IL 62454

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Post Office Box 470
Robinson, IL 62454

2. Article Number (Transfer from service label)

7017 3380 0000 7347 4824

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Michelle C Leavell

B. Received by (Printed Name)

Michelle C Leavell

C. Date of Delivery

10/3/19

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

If YES, enter delivery address below:

3. Service Type

☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Return Receipt for Merchandise
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

5. Article Address

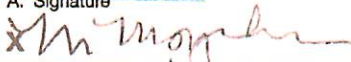
Christa L. Leavell, Custodian
Post Office Box 470
Robinson, IL 62454


6. Article Number (Transfer from service label)

7017 3380 0000 7347 4831

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

MAIL CERTIFICATE <small>UNITED STATES POSTAL SERVICE PERMIT NO. 10 WASHINGTON, DC 20540-0001</small>		ON DELIVERY	
SENDER: COMPLETE ■ 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: <div style="text-align: center; padding: 10px;"> Bonnie L. McGurn 699 Constellation Court Davidsonville, MD 21035 </div>	
2. Signature <div style="text-align: center; padding: 10px;"> </div>		<input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Registered Mail Restricted Delivery		B. Received by (Printed Name) <div style="border: 1px solid black; height: 30px; width: 100%;"></div>	
4. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		C. Date of Delivery <div style="text-align: center; padding: 10px;"> <div style="border: 1px solid black; display: inline-block; padding: 5px;">10-5-19</div> </div>	
5. Barcode <div style="text-align: center; padding: 10px;"> </div>		6. Return Receipt for Merchandise <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Signature Confirmation Restricted Delivery	
7. Tracking Number <div style="text-align: center; padding: 10px;"> <div style="border: 1px solid black; display: inline-block; padding: 5px;">9590 9402 5071 9092 1687 12</div> </div>		8. Restricted Delivery <input type="checkbox"/> Restricted Delivery (over \$500)	

MAIL CERTIFIED MAIL <small>REGISTERED MAIL RETURN RECEIPT MAIL LIMITED MAIL</small>		ON/ON DELIVERY
SENDER: CC		
<p> <input checked="" type="checkbox"/> Complete items 1, 2, and 3. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits. </p>		
1. Article Addressed to: <div style="text-align: center;"> Margaret E. Moynihan 8605 Soaring Eagle Lane Waxhaw NC 28171 </div>		A. Signature  <div style="text-align: right;"> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee </div>
B. Received by (Printed Name) M Moynihan		C. Date of Delivery 10.15.19
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		



9590 9402 5071 9092 1687 29

3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
---	--

2.

7017 2620 0000 3197 3626


every Restricted Delivery

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:

The Long Trusts
Larry T. Long, Managing Trustee
Post Office Box 3096
Kilgore, TX 75663



9590 9402 5090 9092 0571 03

2. Article Number (Transfer from service label)

7017 3380 0000 7347 468

SENDER'S USE ONLY - DO NOT WRITE 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, front if space permits.

1. Address to which this card should be returned (if different from address on mailpiece)

Patrick B. Moynihan
1807 Flastaff Rd. #179
Bel Air, MD 21015

2. Article Number (Transfer from service label)

7017 2620 0000 3197 3

COMPLETE THIS SECTION ON DELIVERY

A. Signature _____ Agent _____
 B. Received by (Printed Name) _____ Address _____
 C. L _____
 D. Is delivery address different from item 12? ☐ Yes ☒ No
 If YES, enter delivery address below: _____
 USPS 75662-9998
 OCT 03 2019
 3. Service Type ☐ Priority Mail Express®
☐ Adult Signature ☐ Registered Mail™
☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted Delivery
☐ Certified Mail® ☐ Return Receipt for Merchandise
☐ Certified Mail Restricted Delivery ☐ Signature Confirmation®
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery Restricted Delivery
 (over 500)

COMP		DELIVERY
A. Signature		
<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Address		
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		
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Signature Confirmation Restricted Delivery		

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:

Pumpkin Buttes, LLC
Post Office Box 1989
Casper, WY 82602

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Sacile Spillers

C. Date of Delivery

10/17/15

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☐ 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

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. Roy G. Barton & Opal Barton Revocable Trust

c/o Roy G. Barton, Jr., Trustee
1919 North Turner Street
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Deborah Brummet

C. Date of Delivery

10/31/15

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☐ 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

2. Article Number (Transfer from service label)

7017 3380 0000 7347 4640

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

Domestic Return Receipt

SENDER: COMPLETE

- 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:

Motowi, LLC
501 W. Main Street
Yukon, OK 73099

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ *[Signature]* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

10/21/15

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☐ 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

2. Article Number (Transfer from service label)

7017 2620 0000 3197 3763

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Billy Glen Spradlin
29 Rim Road
Kilgore, TX 75662

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ *[Signature]* ☐ Agent
☐ Addressee

B. Received by

[Signature]

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☐ 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

2. Article Number (Transfer from service label)

7017 3380 0000 7347 4909

PS Form 3811, July

REGISTERED MAIL

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:

Baxsto, LLC
PO Box 302857
Austin, TX 78703



9590 9402 5090 9092 0573 56

2. A 7017 2620 0000 3197

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*☐ Agent☐ Addressee

B. Received by (Printed Name)

Hba Mack

C. Date of Delivery

10/15/19

D. Is delivery address different from item 1? ☐ YesIf 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

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:

Buffy Energy, LLC
PO Box 1649,
Austin, TX 78767



9590 9402 5090 9092 0573 49

2. 7017 3380 0000 7347 5005

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

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:

Jerry T. and Janice A. Carlisle
P.O. Box 324
Lovington, NM 88260



9590 9402 5090 9092 0569 77

2. 7019 0700 0000 5805 0125

PS Form 3811, July 2015

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*☐ Agent☐ Addressee

B. Received by (Printed Name)

Hba Mack

C. Date of Delivery

10/15/19

D. Is delivery address different from item 1? ☐ YesIf 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

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.

William N. Heiss Profit Sharing Plan
Post Office Box 2944
Casper, WY, 82602



9590 9402 5071 9092 1687 74

2. Article Number (Transfer from service label)

7017 2620 0000 3197 3855

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*☐ Agent☐ Addressee

B. Received by (Printed Name)

Hba Mack

C. Date of Delivery

10/15/19

D. Is delivery address different from item 1? ☐ YesIf 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

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

Kenneth G. Cone
c/o Cathie Cone McCown, AIF
PO Box 507
Dripping Springs TX 78620

3. Service Type

☐ Adult Signature

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Priority Mail Express®

2. Article Number (Transfer from service label)

9590 9402 5090 9092 0571 27

7017 3380 0000 7347 4664

Domestic Return Receipt

☐ Restricted Delivery

☐ Signature Confirmation™

☐ Signature Confirmation™

☐ Return Receipt for Merchandise

☐ Return Receipt for Delivery

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Priority Mail Express®

PS Form 3811, July 2015 PSN 7530-02-000-90053

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.

2. ☐ *Artistic Addressed to*

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

7019 0700 0000 5805 0101

9590 9402 5090 9092 0569 53

3. Service Type
☐ Adult Signature
☐ Registered MailTM
☐ Registered Mail Restr Delivery
☐ Certified Mail[®]
☐ Certified Mail Restrict Delivery
☐ Collect on Delivery
☐ Restricted Delivery

4. Signature
☐ Agent
☐ Address
☐ Date of Delivery
☐ Is delivery address different from item 1? ☐ Yes ☐ No

Bozeman, MT 59718
108 Lamplight Dr.
Tammy J. Cook

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *TJ Cook*

B. Received by (Printed Name)
TJ Cook

C. Date of Delivery
10-3-12

Domestic Return Receipt

5. Signature
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restr Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation
☐ Restricted Delivery

Tammy J. Cook
108 Lamplight Dr.
Bozeman, MT 59718

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. Donald Marshall Markham Family Trust
c/o Donald Marshall Markham, Trustee
PO Box 241
Center Point, TX 78010



9590 9402 5090 9092 0571 89

2. Article Number (Transfer from service label)

7017 3380 0000 2347 4886

PS Form 3811, J

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Donald Marshall Markham ☒ Agent
☐ Addressee

B. Received by (Printed Name)

APRIL MARKHAM

C. Date of Delivery

*10-4-19*D. Is delivery address different from item 1? ☐ YesIf 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

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. Fall River Resources, Inc.
Post Office Box 13456
Denver, CO 80201



9590 9402 5090 9092 0562 05

2. Article Number (Transfer from service label)

7017 2620 0000 3197 3633

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Robert Desma ☒ Agent
☐ Addressee

B. Received by (Printed Name)

Robert Desma

C. Date of Delivery

*10-2-19*D. Is delivery address different from item 1? ☐ YesIf 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

(over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Elizabeth Jane Kay Family Trust
Elizabeth Kay, Trustee
Post Office Box 9602
Colorado Springs, CO 80932



9590 9402 5090 9092 0556 97

2. Article Number (Transfer from service label)

7017 2620 0000 3197 3640

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Elizabeth Kay ☒ Agent
☐ Addressee

B. Received by (Printed Name)

Elizabeth Kay

C. Date of Delivery

*10-3-19*D. Is delivery address different from item 1? ☐ YesIf 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

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:

FFF, Inc.
Post Office Box 8687
Denver, CO 80210



9590 9402 5090 9092 0556 80

2. Article Number (Transfer from service label)

7017 2620 0000 3197 3657

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

FFF, Inc. ☒ Agent
☐ Addressee

B. Received by (Printed Name)

FFF, Inc.

C. Date of Delivery

*10-21-19*D. Is delivery address different from item 1? ☐ YesIf 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

(over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

J Bar Cane, Inc.
3660 Highway #41
Stanley, NM 87056



9590 9402 5090 9092 0569 46

2. Article Number (Transfer from service label)

7019 0700 0000 5805 0095

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Michael Richardson ☐ Agent
☒ Addressee

B. Received by (Printed Name)

Michael Richardson C. Date of Delivery *10-3-19*

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

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.

Jan C. Ice
Post Office Box 7366
Covington, WA 98042



9590 9402 5071 9092 1686 51

2. Article Number (Transfer from service label)

7017 2620 0000 3197 3749

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jan C. Ice ☐ Agent
☒ Addressee

B. Received by (Printed Name)

Jan C. Ice C. Date of Delivery *10/3/19*

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
☐ Insured Mail ☐ Insured Mail Restricted Delivery (500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

The Jonathan S. Roderick Trust
Jonathan S. Roderick, Trustee
Post Office Box 7961
Boulder, CO 80306



9590 9402 5090 9092 0562 50

2. Article Number (Transfer from service label)

7017 2620 0000 3197 3725

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jonathan S. Roderick ☐ Agent
☒ Addressee

B. Received by (Printed Name)

Jonathan S. Roderick C. Date of Delivery *10/17/19*

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

Restricted Delivery (over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

Richard D. Jones, Jr.
200 North Gaines Road
Cedar Creek, TX, 78612



9590 9402 5090 9092 0569 84

2.

7019 0700 0000 5805 0132

PS Form 3811,

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Patrick Higgins ☐ Agent
☒ Addressee

B. Received by (Printed Name)

Patrick Higgins C. Date of Delivery *10/17/19*

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
☐ Insured Mail ☐ Insured Mail 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.

Frannifin, LLC
501 W. Main Street
Yukon, OK 73099



9590 9402 5071 9092 1686 68

Article Number (Transfer from service label)

7017 2620 0000 3197 3756

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X-Mahab

☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

10/2/19

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

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

Douglas K. Garrett
2637 NW 152nd St.
Edmond, OK 73013



9590 9402 5071 9092 1687 43

2. Article Number (Transfer from service label)

7017 2620 0000 3197 3824

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X-Douglas K. Garrett

☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Jackie Garrett
2637 NW 152nd St
Edmond, OK 73013



9590 9402 5071 9092 1687 50

2

7017 2620 0000 3197 3831

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X-Douglas K. Garrett

☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt



HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE, NEW MEXICO 87504

505-982-4554 (FAX) 505-982-8623

WRITER:

Gary W. Larson,
Partner
glarson@hinklelawfirm.com

November 20, 2019

VIA CERTIFIED MAIL

Wytex Oil Company
5360 S. Marshall St.
Littleton, CO 80218

Re: Steward Energy II, LLC New Mexico Oil Conservation Division Application

Dear Sir or Madam:

Enclosed is a copy of an application that Steward Energy II, LLC ("Steward") has filed with the New Mexico Oil Conservation Division ("the Division"). The application requests an order (i) pooling all uncommitted mineral interests in the San Andres formation in a 358.05-acre, more or less, horizontal spacing unit comprised of the E/2 of Section 23 and the NE/4 of Section 26, Township 13 South, Range 38 East in Lea County, New Mexico, and (ii) approving an unorthodox well location for Steward's Slippin Jimmy Fee #1H horizontal well.

This matter (Case No. 20939) is scheduled for hearing at 8:15 a.m. on Thursday, December 12, 2019 in Porter Hall at the Division's offices located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. Wytex Oil Company ("Wytex") is not required to attend this hearing, but as an owner of an interest that may be affected by Steward's application, it may appear at the hearing and present testimony. If Wytex does not appear at that time and become a party of record, it will be precluded from contesting the matter at a later date.

A party appearing in a Division case is required by the Division's Rules to file a Pre-Hearing Statement, which in this matter must be filed no later than Thursday, December 5, 2019. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: the name of the party and the party's attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate amount of time the party will need to present the party's case; and an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to me.

Thank you for your attention to this matter.

Very truly yours,

Gary W. Larson

GWL:jwl
Enclosure



PO BOX 10
ROSWELL, NEW MEXICO 88202
575-622-6510
(FAX) 575-623-9332

PO BOX 1720
ARTESIA, NEW MEXICO 88211
575-622-6510
(FAX) 575-746-6316

PO BOX 2068
SANTA FE, NEW MEXICO 87504
505-982-4554
(FAX) 505-982-8623

7601 JEFFERSON ST NE - SUITE 180
ALBUQUERQUE, NEW MEXICO 87109
505-858-8320
(FAX) 505-858-8321



HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE, NEW MEXICO 87504

505-982-4554 (FAX) 505-982-8623

WRITER:

Gary W. Larson,
Partner

glarson@hinklelawfirm.com

November 20, 2019

VIA CERTIFIED MAIL

Texas General Land Office
Attn: Mineral Division
1700 N. Congress Ave., Suite 600
Austin, TX 78701-1495

Re: Steward Energy II, LLC New Mexico Oil Conservation Division Application

Dear Sir/Madam:

Enclosed is a copy of an application that Steward Energy II, LLC ("Steward") has filed with the New Mexico Oil Conservation Division ("the Division"). The application requests an order (i) pooling all uncommitted mineral interests in the San Andres formation in a 358.05-acre, more or less, horizontal spacing unit comprised of the E/2 of Section 23 and the NE/4 of Section 26, Township 13 South, Range 38 East in Lea County, New Mexico, and (ii) approving an unorthodox well location for Steward's Slippin Jimmy Fee #1H horizontal well.

This matter (Case No. 20939) is scheduled for hearing at 8:15 a.m. on Thursday, December 12, 2019 in Porter Hall at the Division's offices located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. The General Land Office is not required to attend this hearing, but as an owner of an interest that may be affected by Steward's application, it may appear at the hearing and present testimony. If the General Land Office does not appear at that time and become a party of record, it will be precluded from contesting the matter at a later date.

A party appearing in a Division case is required by the Division's Rules to file a Pre-Hearing Statement, which in this matter must be filed no later than Thursday, December 5, 2019. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: the name of the party and the party's attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate amount of time the party will need to present the party's case; and an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to me.

Thank you for your attention to this matter.

Very truly yours,

Gary W. Larson

GWL:jwl

Enclosure

PO BOX 10
ROSWELL, NEW MEXICO 88202
575-622-6510
(FAX) 575-623-9332

PO BOX 1720
ARTESIA, NEW MEXICO 88211
575-622-6510
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PO BOX 2068
SANTA FE, NEW MEXICO 87504
505-982-4554
(FAX) 505-982-8623

7601 JEFFERSON ST NE • SUITE 180
ALBUQUERQUE, NEW MEXICO 87109
505-858-8320
(FAX) 505-858-8321

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		<p>A. Signature <input checked="" type="checkbox"/> <i>Jim L. Anderson</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Jim L. Anderson</i></p> <p>C. Date of Delivery <i>4 Dec 09</i></p> <p>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: L.S. & M.E. Anderson Dated 5/26/2004 7133 San Geronio Rd. Rancho Mirage, CA 92207</p>			
<p>2. Article Number (Transfer from service label) 7018 3090 0001 4741 6957</p>		<p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
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"> 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. 		<p>A. Signature <input checked="" type="checkbox"/> <i>Alma L. & Kelly B. Tisher</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Alma Tisher</i></p> <p>C. Date of Delivery <i>12/15</i></p> <p>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: Alma L. & Kelly B. Tisher P.O. Box 533 Littleton, CO 80160</p>			
<p>2. Article Number (Transfer from service label) 7018 3090 0001 4738 0241</p>		<p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
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"> 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. 		<p>A. Signature <input checked="" type="checkbox"/> <i>Laurel Eckels</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Laurel Eckels</i></p> <p>C. Date of Delivery <i>12-4-19</i></p> <p>Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><i>13637 Happy Hollow Rd Eckert CO 81418</i></p>	
<p>1. Article Addressed to: Robert Edwards Eckels, Jr., LLC 13637 Happy Hollow Rd. Eckert, CO 91418</p>			
<p>2. Article Number (Transfer from service label) 7018 3090 0001 4738 0371</p>		<p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

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<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> <i>Jim L. Anderson</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to: L.S. & M.E. Anderson Dated 5/26/2004 71332 San Geronio Rd. Rancho Mirage, CA 92207</p>		<p>B. Received by (Printed Name) <i>Jim L. Anderson</i></p> <p>C. Date of Delivery 4 Dec 19</p>	
<p>2. Article Number (Transfer from service label) 7018 3090 0001 4741 6957</p>		<p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

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<p>1. Article Addressed to: Alma L. & Kelly B. Tisher P.O. Box 533 Littleton, CO 80160</p>		<p>B. Received by (Printed Name) <i>Alma Tisher</i></p> <p>C. Date of Delivery 12/15</p>	
<p>2. Article Number (Transfer from service label) 7018 3090 0001 4738 0241</p>		<p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

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<p>1. Article Addressed to: Robert Edwards Eckels, Jr., LLC 13637 Happy Hollow Rd. Eckert, CO 91418</p>		<p>B. Received by (Printed Name) <i>Laurel Eckels</i></p> <p>C. Date of Delivery 12-4-19</p>	
<p>2. Article Number (Transfer from service label) 7018 3090 0001 4738 0371</p>		<p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

M.W. Oil Investment Company
5454 Washington St.
Denver, CO 80216



9590 9402 4582 8278 5945 23

2. Article Number (Transfer from service label)

7018 3090 0001 4738 0340

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

11/25/19

- 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

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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:

Motowi, LLC
501 W. Main St.
Yukon, OK 73099



9590 9402 4582 8278 5948 99

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6810

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Elizabeth Lovelace

C. Date of Delivery

11/25/19

- 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

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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. Lowe Minerals & Land Family Ptship, Ltd.

2313 Broadway
Lubbock, TX 79401



9590 9402 4582 8278 5945 30

2. Article Number (Transfer from service label)

7018 3090 0001 4738 0357

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Mary Jaramillo

C. Date of Delivery

11-25-19

- 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

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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:
Cathie McCown Cone
Post Office Box 658
Dripping Springs, TX 78620



9590 9402 4582 8278 5946 53

2. 7018 3090 0001 4738 0289

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
- JEFF ALEN 11/27/19
- 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
 - ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Registered Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery

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:
Chaffin Company
308 West 104th Avenue
Suite 2A
New York City, NY 10025



9590 9402 4582 8278 5946 91

7018 3090 0001 4738 0326

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
- PAUL 11/26/19
- 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
 - ☐ 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:
Edward and Bessie O'Neal
c/o Donald Marshall Markham, Trustee
P.O. Box 241
Center Point, TX 78010



9590 9402 4582 8278 5947 07

2. Article Number (Transfer from service label)
7018 3090 0001 4738 0333


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
- DAVID MARKHAM 11-25-19
- 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
 - ☐ 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
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to: Christa L. Leavell Post Office Box 470 Robinson, IL 62454</p>	<p>A. Signature X <i>Michelle C. Leavell</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Michelle C. Leavell</i></p> <p>C. Date of Delivery <i>11-26-19</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
 9590 9402 4582 8278 5946 84	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article <i>7018 3090 0001 4738 0319</i></p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053 SJ Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to: Frannifin, LLC, 501 W. Main Street Yukon, OK 73099</p>	<p>A. Signature X <i>Elizabeth Lovelace</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Elizabeth Lovelace</i></p> <p>C. Date of Delivery <i>11/25/19</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
 9590 9402 4582 8278 5948 68	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article <i>7018 3090 0001 4741 6988</i></p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053 SJ Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to: Kenneth G. Cone c/o Cathie Cone McGowan, AIF P.O. Box 507 Dripping Springs, TX 78620</p>	<p>A. Signature X <i>Jeff Allen</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>JEFF ALLEN</i></p> <p>C. Date of Delivery <i>11/27/19</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
 9590 9402 4582 8278 5948 20	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article <i>7018 3090 0001 4741 6940</i></p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053 SJ 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:
Michelle Leavell
P.O. Box 470
Robinson, IL 62454



9590 9402 4582 8278 5975 62

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6919

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Michelle C. Leavell

☐ Agent☐ Addressee

B. Received by (Printed Name)

Michelle C. Leavell

C. Date of Delivery

11-26-19

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

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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:
Jan C. Ice
P.O. Box 7366
Covington, WA 98042



9590 9402 4582 8278 5945 85

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6926

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Jan C. Ice

☐ Agent☐ Addressee

B. Received by (Printed Name)

JANICE S. ICE

C. Date of Delivery

11/30/19

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

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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:
Howard H. Cone Trust "A"
u/w/o Herbert E. Cone
117 Seaview Lane
Corpus Christi, TX 78411



9590 9402 4582 8278 6081 21

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6896

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature]

☐ Agent☐ Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

11-28-19

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

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Delivery

Restricted Delivery

(over \$500)

Domestic Return Receipt

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

For delivery information, visit our website at 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 and Fees

\$

Sent To Kenneth G. Cone
c/o Cathie Cone McGowan, AIF

Street and Apt. P.O. Box 507
Dripping Springs, TX 78620

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

ss, and ZIP+4® in this box®

RECEI

DEC - 2 2019

HINKLE SM
SANTA FE, NM 87504

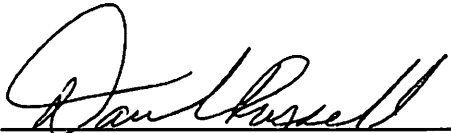
7018 3090 0001 4741 6940

Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA

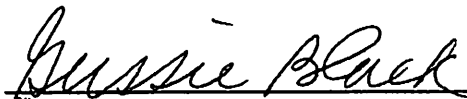
I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated
November 24, 2019
and ending with the issue dated
November 24, 2019.

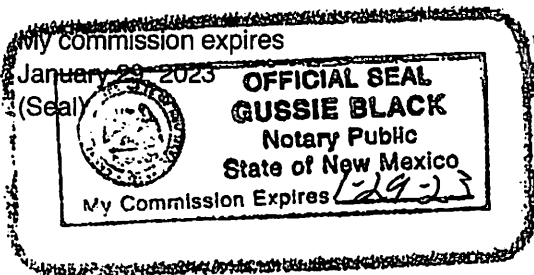


Publisher

Sworn and subscribed to before me this
24th day of November 2019.



Business Manager



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

LEGAL NOTICE NOVEMBER 24, 2019

This is to notify all interested parties, including the Texas General Land Office, Alma L. Tisher, Kelly B. Tisher, Baxsto, LLC, Billy Glen Spradlin, Bonnie L. McGurn, Brook Colby Gruszka, Buffy Energy, LLC, Cathia McCown Cone, Chatfield Company, Christa L. Leavell, the Colby Family Revocable Living Marital Deduction Trust dated 1/7/1999, Daniel Alden Hill, Jr., the Donald Marshall Markham Family Trust dated 4/12/1995, Douglas A. Denton, Edward O'Neal, Bessie O'Neal, FFF, Inc., Frannifin, LLC, Grady Hunnicutt Paul, Harle, Inc., the Howard H. Cone Trust "A", u/w/o Hubert E. Cone, Jan C. Ice, Jennifer Moynihan, John Raymond Hill, Jr. Justin Hunnicutt Travis, Kenneth G. Cone, the L.S. and M.E. Anderson Family Trust dated 5/26/2004, the Laverne W. Colby Revocable Trust dated 5/26/2000 and amended 7/13/2000, Louis A. Oswald, III, Lowe Minerals and Land Family Partnership, Ltd., M.W. Oil Investment Company, Margaret E. Moynihan, Michelle Leavell, Motowi, LLC, the Oswald Family Trust, Patrick B. Moynihan, Paula M. Schneider, Pumpkin Buttes, LLC, Robert Edward Eckels, Jr., LLC, the Roy G. Barton & Opal Barton Revocable Trust u/a 1/28/1982, The Long Trusts, Wyotex Oil Company and their successors and assigns, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Steward Energy II, LLC at 8:15 a.m. on December 12, 2019 in Porter Hall at 1220 South St. Francis Drive, Santa Fe, New Mexico. Steward Energy II, LLC seeks an order (i) pooling all uncommitted mineral interests in the San Andres formation in a 358.05 acre, more or less, horizontal spacing unit comprised of the E/2 of Section 23 and the NE/4 of Section 26, Township 13 South, Range 38 East in Lea County, and (ii) approving an unorthodox well location. The horizontal spacing unit is to be dedicated to the Slippin Jimmy Fee #1H well, which will be horizontally drilled from a surface location in Lot 3 of Section 26 to a bottom hole location in Lot 1 in of Section 23, Township 13 South, Range 38 East. Also to be considered will be the cost of drilling and completing the well and the allocation of the cost, the designation of Steward Energy II, LLC as the operator of the well, and a 200% charge for the risk involved in drilling and completing the well. The proposed well location is approximately sixteen (16) miles southeast of Tatum, New Mexico.
#34910

02107475

00236367

HINKLE, HENSLEY, SHANOR & MARTIN, LLP
PO BOX 2068
SANTA FE, NM 87504

E



AUTHORIZATION FOR EXPENDITURE

Well Name:	Slippin Jimmy Fee #1H			AFE Number:	1804142DR
Operator:	Steward Energy II, LLC			AFE Date:	09/25/2019
Well Type:	Oil	AFE Type:	Development Drlg/Comp		
Q/Q/Q-S/T/R:	N/2SE/4 / Sec. 26 / 13S / 38E	Prop. Depth:	5500.00 TVD, 13500.00 MD		
		Field:	Platang (San Andres)		
Surface Location:	Long. -103.062468	Lat. 33.161053	XLoc: 930258	YLoc: 788492	
Bottom Hole Location:	Long. -103.062258	Lat. 33.118423	XLoc: 930220	YLoc: 796931	
Project Description:	Drill & Complete 1.5 mile San Andres Horizontal				

Justification:

Drill & Complete 1.5 mile San Andres Horizontal; New Tank Battery & SWD line to system

Account #	Cost Breakdown	Drilling	Dry Hole	Completion Cost	Workover	Total
8200.100	Land, Surveying & Legal	\$30,000	\$30,000			\$30,000
8200.101	Abstract, Title & Permit	\$30,000	\$30,000			\$30,000
8200.102	ROW & Surface Damages	\$40,000	\$40,000			\$40,000
8200.103	Road, Pad Location & Pit Building	\$40,000	\$40,000			\$40,000
8200.104	Environ, Reg & Safety	\$3,500	\$3,500			\$3,500
8200.113	Contract Labor	\$5,500	\$5,500			\$5,500
8200.114	Consulting Services & Contract Supervision	\$40,000	\$40,000			\$40,000
8200.122	Material Transportation	\$6,000	\$6,000			\$6,000
8200.126	Fuel	\$30,550	\$30,550			\$30,550
8200.131	Chemical-Downhole Treating	\$1,700	\$1,700			\$1,700
8200.132	Mud & Additives	\$65,000	\$65,000			\$65,000
8200.140	Mob/Demob	\$60,000	\$60,000			\$60,000
8200.141	Mud Disposal/Pit Closure	\$150,000	\$150,000			\$150,000
8200.142	Trailer Rental, Camp & Catering	\$20,000	\$20,000			\$20,000
8200.144	Drilling Rig - Daywork or Footage	\$180,000	\$180,000			\$180,000
8200.149	Bits, Mills & Reamers	\$35,000	\$35,000			\$35,000
8200.151	Directional Services	\$126,000	\$126,000			\$126,000
8200.160	Casing Crews & Services	\$30,000	\$30,000			\$30,000
8200.161	Cementing Services	\$100,000	\$100,000			\$100,000
8200.170	Water Purchase & Transfer	\$30,000	\$30,000			\$30,000
8200.175	Surface Equipment Rental & Services	\$67,500	\$67,500			\$67,500
8200.176	Downhole Equipment Rental & Services	\$32,500	\$32,500			\$32,500
8200.193	Downhole Inspection/Testing - Casing, Tubing & Rods	\$6,200	\$6,200			\$6,200
8200.301	Overhead	\$7,500	\$7,500			\$7,500
IDC Total:		\$1,136,950	\$1,136,950			\$1,136,950
8250.200	Conductor/Drive Pipe	\$15,000	\$15,000			\$15,000
8250.201	Surface Casing	\$51,504	\$51,504			\$51,504
8250.203	Production Casing	\$233,376	\$233,376			\$233,376
8250.205	Wellhead Equipment, Flow Tee & Meter Run	\$13,000	\$13,000			\$13,000
8250.214	Other Downhole Equipment	\$30,000	\$30,000			\$30,000
TDC Total:		\$342,880	\$342,880			\$342,880
Drilling Total:		\$1,479,830	\$1,479,830			\$1,479,830

F

8300.100	Land, Surveying & Legal		\$1,000	\$1,000	\$1,000
8300.102	ROW & Surface Damages		\$11,250	\$11,250	\$11,250
8300.111	Company Supervision		\$5,000	\$5,000	\$5,000
8300.113	Contract Labor		\$5,000	\$5,000	\$5,000
8300.114	Consulting Services & Contract Supervision		\$50,000	\$50,000	\$50,000
8300.120	Vacuum & Pump Truck		\$25,000	\$25,000	\$25,000
8300.122	Material Transportation		\$10,000	\$10,000	\$10,000
8300.126	Fuel		\$100,000	\$100,000	\$100,000
8300.143	Well Control - BOP, Isolation Assy		\$65,000	\$65,000	\$65,000
8300.146	Completion/Workover Rig		\$41,300	\$41,300	\$41,300
8300.148	Reverse Unit		\$12,600	\$12,600	\$12,600
8300.163	Cased Hole Logs		\$4,500	\$4,500	\$4,500
8300.164	Wireline & Perforating		\$140,000	\$140,000	\$140,000
8300.170	Water Purchase & Transfer		\$174,100	\$174,100	\$174,100
8300.171	Stimulation - Frac, Acid, Gravel Pack		\$1,401,690	\$1,401,690	\$1,401,690
8300.175	Surface Equipment Rental & Services		\$35,000	\$35,000	\$35,000
8300.176	Downhole Equipment Rental & Services		\$85,000	\$85,000	\$85,000
8300.193	Downhole Inspection/Testing - Casing, Tubing & Rods	\$2,500	\$2,500	\$2,500	\$2,500
ICC Total:			\$2,168,940	\$2,168,940	\$2,168,940
8350.205	Wellhead Equipment, Flow Tee & Meter Run	\$15,000	\$15,000	\$15,000	\$15,000
8350.206	Tubing		\$25,948	\$25,948	\$25,948
8350.211	Electric Submersible Pumps		\$198,500	\$198,500	\$198,500
8350.213	Frac Plugs, Bridge Plus, Packers, Tubing Anchors		\$52,500	\$52,500	\$52,500
8350.214	Other Downhole Equipment	\$7,008	\$7,008	\$7,008	\$7,008
8350.221	Surface VSD, Transformer, POC & Associated Equipment		\$22,000	\$22,000	\$22,000
TCC Total:			\$320,956	\$320,956	\$320,956
8600.120	Vacuum & Pump Truck	\$8,750	\$8,750		\$8,750
8600.175	Surface Equipment Rental & Services	\$8,000	\$8,000		\$8,000
8600.179	Elect & Generator R&M	\$48,000	\$48,000		\$48,000
IFC Total:			\$64,750		\$64,750
8650.221	Surface VSD, Transformer, POC & Associated Equipment	\$10,000	\$10,000		\$10,000
8650.222	Instrumentation & Meters	\$25,000	\$25,000		\$25,000
8650.223	SCADA & Communications	\$40,000	\$40,000		\$40,000
8650.224	Electrical Installation & Power Generation	\$85,000	\$85,000		\$85,000
8650.229	Prod & SWD Facility Inst.	\$105,000	\$105,000		\$105,000
8650.230	Compressor, Dehy, Line Heater	\$17,500	\$17,500		\$17,500
8650.231	Separator, Heater Treater, FWKO	\$68,000	\$68,000		\$68,000
8650.232	Tanks, Walkways & Stairs	\$134,250	\$134,250		\$134,250
8650.233	Flowline & Gathering Lines	\$40,000	\$40,000		\$40,000
8650.234	Surface Pump & LACTs	\$15,000	\$15,000		\$15,000
8650.235	Miscellaneous Non-Controllable - Pipe, Valves & Fittings	\$125,000	\$125,000		\$125,000
TFC Total:			\$664,750		\$664,750
Completion Total:			\$3,219,396	\$2,489,896	\$3,219,396
Drilling & Completion Total:					\$4,699,226
Net %:			Net Total:		\$
Approved by:			Signature		
			Date		

This AFE is an estimate only and non-operator, by execution of same, commits to pay its proportionate share of actual cost incurred.

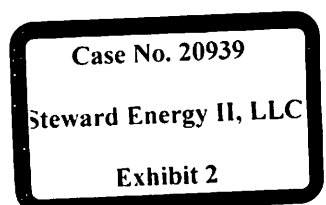
**STATE OF NEW MEXICO
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES
OIL CONSERVATION DIVISION**

**APPLICATION OF STEWARD ENERGY II,
LLC FOR COMPULSORY POOLING AND
APPROVAL OF AN UNORTHODOX WELL
LOCATION, LEA COUNTY, NEW MEXICO**

Case No. 20939

**SELF-AFFIRMED STATEMENT OF
SHANE SEALS**

1. I am over 18 years of age and am competent to provide this Self-Affirmed Statement. I have personal knowledge of the matters addressed herein.
2. I am a geologist at Steward Energy II, LLC ("Steward Energy"). I am familiar with the geological matters that pertain to Steward Energy's application.
3. Attached hereto as Exhibit A in a map showing the location of the proposed Slippin Jimmy Fee #1H well.
4. Attached hereto as Exhibit B is a structure map of the San Andres formation. The map shows that the structure generally dips to the south.
5. Attached hereto as Exhibit C is a west to east cross section that identifies the target interval for Slippin Jimmy #1H well. The interval is continuous across the HSU.
6. Based on the information contained in Exhibits A, B and C, I am able to conclude that:
 - a) The HSU is justified from a geologic standpoint;
 - b) There is no faulting or other geologic impediment that could adversely affect the drilling of the proposed well;



c) The preferred orientation for horizontal wells in the area is south to north or north to south because there is a slightly dominant stress regime that makes the orientation optimal for completion purposes; and

d) The proposed well will produce from each quarter-quarter section in the HSU and each quarter-quarter section will contribute more or less equally to production.

7. In my opinion, the granting of Steward Energy's application will serve the interests of conservation and the prevention of waste.

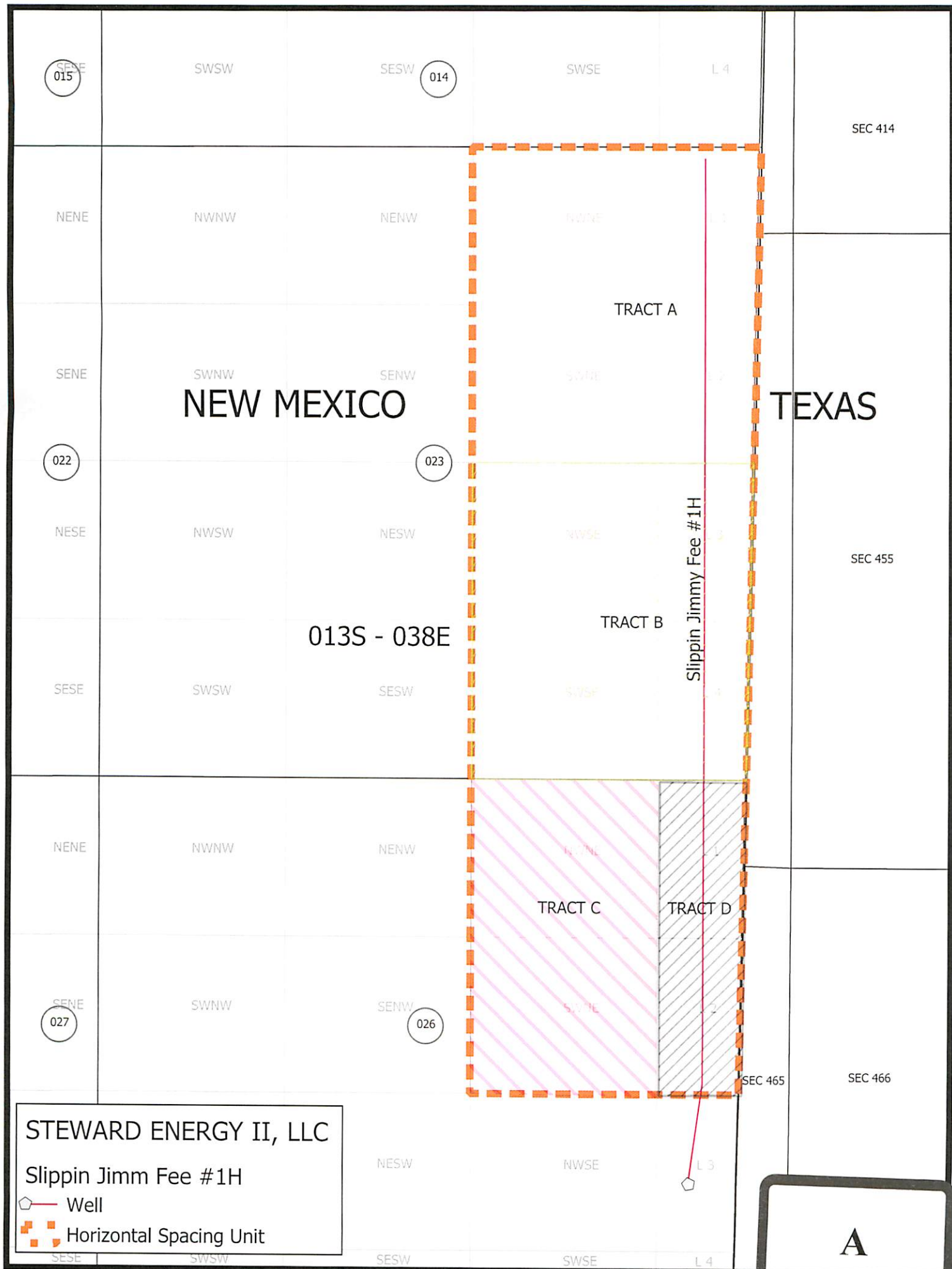
8. Exhibits A through C were either prepared by me or compiled from company records.

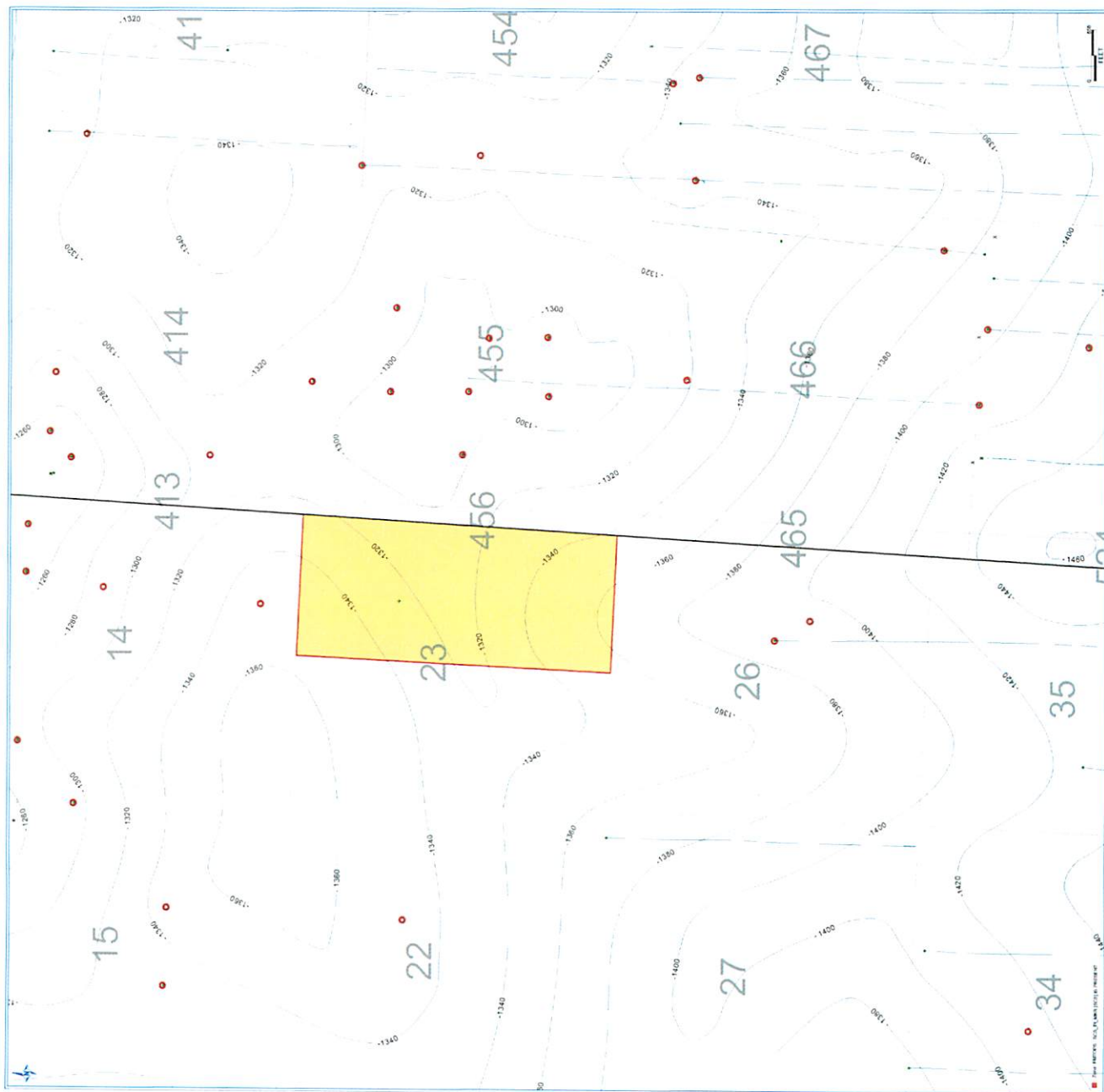
9. I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 8 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.



Shane Seals

12/11/19
Date





B

