



**MERAK 7 FEDERAL
NMOC D Exhibits**

Hearing Date: 4/22/21

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

**APPLICATION OF SPUR ENERGY
PARTNERS, LLC FOR COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO**

Case No. 21676

**SPUR ENERGY PARTNERS, LLC'S
HEARING EXHIBITS**

Compulsory Pooling Checklist

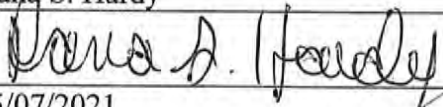
Exhibit A	Self-Affirmed Statement of Morgan Landry
A-1	Application & Proposed Notice of Hearing
A-2	C-102(s)
A-3	Plat of Tracts, Tract Ownership, Pooled Party, Unit Recapitulation
A-4	Sample Well Proposal Letter & AFE(s)
A-5	Summary of Communications
A-6	Hearing Notice Letter and Return Receipts
A-7	Affidavit of Publication
Exhibit B	Self-Affirmed Statement of C.J. Lipinski
B-1	Location Map
B-2	Structure Map
B-3	Cross Section
B-4	Gunbarrel Schematic

COMPULSORY POOLING APPLICATION CHECKLIST

ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS

Case: 21676	APPLICANT'S RESPONSE
Date	May 20, 2021
Applicant	Spur Energy Partners, LLC
Designated Operator & OGRID (affiliation if applicable)	OGRID # 328947
Applicant's Counsel:	Hinkle Shanor LLP
Case Title:	Application of Spur Energy Partners, LLC for Compulsory Pooling, Eddy County, New Mexico
Entries of Appearance/Intervenors:	N/A
Well Family	Merak
Formation/Pool	
Formation Name(s) or Vertical Extent:	Yeso
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Yeso, 4225' MD to 5000' MD.
Pool Name and Pool Code:	Loco Hills; Glorieta-Yeso Pool (Pool Code 96718)
Well Location Setback Rules:	Statewide
Spacing Unit Size:	~315 acres
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	~315 acres
Building Blocks:	Quarter-quarter
Orientation:	Laydown
Description: TRS/County	S/2 of Section 7, Township 17 South, Range 30 East in Eddy County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
Other Situations	
Depth Severance: Y/N. If yes, description	Yes, at 5,000' MD in the Loco Hills; Glorieta-Yeso Pool within the Yeso formation.
Proximity Tracts: If yes, description	Yes, the completed interval for the Merak 7 Federal 22H will be within 330' of the line separating the N/2S/2 and S/2S/2 of Section 7 to allow inclusion of this acreage into a standard 315-acre HSU.
Proximity Defining Well: if yes, description	Merak 7 Federal 22H
Applicant's Ownership in Each Tract	Exhibit A-3
Well(s)	
Name (API [if assigned]); Surface hole location; Bottom hole location; Completion target (TVD); Orientation, Completion status (standard or non-standard).	
Well #1	Merak 7 Federal 10H (API # pending) SHL: 2475' FSL & 1080' FWL, Section 8, T17S-R30E BHL: 2100' FSL & 50' FWL, Section 7, T17S-R30E Completion Target: Yeso formation (Approx. 4540' TVD)

	Completion status: Standard
Well #2	Merak 7 Federal 11H (API # pending) SHL: 875' FSL & 1060' FWL, Section 8, T17S-R30E BHL: 600' FSL & 50' FWL, Section 7, T17S- R30E Completion Target: Yeso formation (Approx. 4510' TVD) Completion status: Standard
Well #3	Merak 7 Federal 22H (API # pending) SHL: 915' FSL & 1060' FWL, Section 8, T17S-R30E BHL: 1350' FSL & 50' FWL, Section 7, T17S- R30E Completion Target: Yeso formation (Approx. 4625' TVD) Completion status: Standard
Well #4	Merak 7 Federal 51H (API # pending) SHL: 2492' FSL & 1091' FWL, Section 8, T17S-R30E BHL: 2175' FSL & 50' FWL, Section 7, T17S- R30E Completion Target: Yeso formation (Approx. 4900' TVD) Completion status: Standard
Well #5	Merak 7 Federal 52H (API # pending) SHL: 855' FSL & 1060' FWL, Section 8, T17S-R30E BHL: 400' FSL & 50' FWL, Section 7, T17S- R30E Completion Target: Yeso formation (Approx. 4865' TVD) Completion status: Standard
Horizontal Well First and Last Take Points	Exhibit A-2
Completion Target (Formation, TVD and MD)	Exhibit A-4
A/E Capex and Operating Costs	
Drilling Supervision/Month \$	7000
Production Supervision/Month \$	700
Justification for Supervision Costs	Exhibit A
Requested Risk Charge	200%
Notice of Hearing	
Proposed Notice of Hearing	Exhibit A-1
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit A-6
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit A-7
Ownership Determination	
Land Ownership Schematic of the Spacing Unit	Exhibit A-3
Tract List (including lease numbers and owners)	Exhibit A-3
Pooled Parties (including ownership type)	Exhibit A-3
Unlocatable Parties to be Pooled	N/A
Ownership Depth Severance (including percentage above & below)	Exhibits A and A-3
Joinder	
Sample Copy of Proposal Letter	Exhibit A-4
List of Interest Owners (ie Exhibit A of JOA)	Exhibit A-3
Chronology of Contact with Non-Joined Working Interests	Exhibit A-5

Overhead Rates in Proposal Letter	N/A
Cost Estimate to Drill and Complete	Exhibit A-4
Cost Estimate to Equip Well	Exhibit A-4
Cost Estimate for Production Facilities	Exhibit A-4
Geology	
Summary (including special considerations)	Exhibit B
Spacing Unit Schematic	Exhibit B-1
Gunbarrel/Lateral Trajectory Schematic	Exhibit B-4
Well Orientation (with rationale)	Exhibit B
Target Formation	Yeso
HSU Cross Section	Exhibit B-3
Depth Severance Discussion	N/A
Forms, Figures and Tables	
C-102	Exhibit A-2
Tracts	Exhibit A-3
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit A-3
General Location Map (including basin)	Exhibit B-1
Well Bore Location Map	Exhibit B-1
Structure Contour Map - Subsea Depth	Exhibit B-2
Cross Section Location Map (including wells)	Exhibit B-1
Cross Section (including Landing Zone)	Exhibit B-3
Additional Information	
CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.	
Printed Name (Attorney or Party Representative):	Dana S. Hardy
Signed Name (Attorney or Party Representative):	
Date:	05/07/2021

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

**APPLICATION OF SPUR ENERGY
PARTNERS, LLC FOR COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO**

CASE NO. 21676

**SELF-AFFIRMED STATEMENT
OF MORGAN LANDRY**

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 Senior Landman at Spur Energy Partners, LLC ("Spur"). I had direct involvement with Spur's development of the acreage that is the subject of this case. Copies of the application and proposed notice are attached as **Exhibit A-1**.

3. I have previously testified before the Division, and my qualifications as an expert in petroleum land matters were accepted.

4. None of the parties proposed to be pooled in this case indicated opposition to this matter proceeding by affidavit, therefore I do not expect any opposition at hearing.

A. Proposed Well(s) and HSU

5. Spur seeks an order pooling all uncommitted mineral interests in the Yeso formation (from the stratigraphic equivalent of 4,225' MD to 5,000' MD as observed on the Anderson-Federal I well Schlumberger Sidewall Neutron Porosity Log (API No. 30-015-20565)) in a 315-acre, more or less, standard (proximity tract) horizontal spacing unit comprised of the S/2 of Section 7, Township 17 South, Range 30 East in Eddy County, New Mexico ("HSU").

SPUR ENERGY
PARTNERS, LLC
Case No. 21676

Exhibit A

6. The HSU will be dedicated to the following proposed initial wells, which will be drilled simultaneously:

- a. **Merak 7 Federal 10H** and **Merak 7 Federal 51H**, which will be horizontally drilled from a surface location in Unit L of Section 8 to a bottom hole location in Lot 3 of Section 7;
- b. **Merak 7 Federal 11H** and **Merak 7 Federal 52H**, which will be horizontally drilled from a surface location in Unit M of Section 8 to a bottom hole location in Lot 4 of Section 7; and
- c. **Merak 7 Federal 22H**, which will be horizontally drilled from a surface location in Unit M of Section 8 to a bottom hole location in Lot 3 of Section 7.

7. The completed interval for the **Merak 7 Federal 22H** will be within 330' of the line separating the N/2S/2 and S/2S/2 of Section 7 to allow inclusion of this acreage into a standard 315-acre HSU.

8. The proposed wells are located in the Loco Hills; Glorieta-Yeso pool (Pool code 96718).

9. With respect to well setback requirements, this pool is subject to the statewide horizontal well rules set out in NMAC 19.15.16.15.

10. The completed intervals of the proposed wells will be orthodox.

11. Federal APDs for the proposed wells were submitted on or around November 11, 2020.

12. **Exhibit A-2** contains C-102s for the proposed wells.

B. Ownership Determination

13. A depth severance exists in the Loco Hills; Glorieta-Yeso pool within the Yeso formation at a stratigraphic equivalent of 5,000 feet measured depth.

14. Ownership is different above and below the depth severance line.

15. **Exhibit A-3** identifies ownership by tract in the HSU from the top of the Yeso formation to a depth of 5,000 feet. This exhibit also contains a unit recapitulation and the interests Spur seeks to pool.

16. Spur provided notice of this application to the vertical offset parties within the pool who are not subject to this application.

C. Joinder

17. **Exhibit A-4** contains a sample well proposal letter and AFEs sent to working interest owners for the proposed wells. The estimated costs reflected on the AFEs are fair and reasonable and comparable to the cost of other wells of similar depth and length drilled in the Yeso formation in the area.

18. Spur has conducted a diligent search of all public records in Eddy County, including phone directories and computer databases.

19. All working interest owners Spur seeks to pool are locatable.

20. In my opinion, Spur made a good-faith effort to reach voluntary joinder of the uncommitted interests in the wells as indicated by the chronology of contact described in **Exhibit A-5**.

D. Notice of Hearing

21. Notice of Spur's application and the Division hearing was provided to the uncommitted interests by certified mail more than 20 days prior to the hearing date. A sample of the notice letter and the associated green cards are attached as **Exhibit A-6**.

22. Notice of Spur's application and the Division hearing was published more than ten business days prior to the hearing date. The affidavit of publication is attached as **Exhibit A-7**.

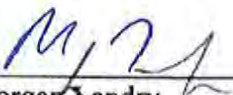
E. Drilling and Operating Costs

23. Spur requests overhead and administrative rates of \$7,000 per month while the proposed wells are being drilled and \$700 per month while the proposed wells are producing. These rates are fair and are comparable to the rates charged by Spur and by other operators in the vicinity. Spur further requests that the rates be adjusted periodically in accordance with the COPAS Accounting Procedure.

24. The exhibits attached hereto were either prepared by me or under my supervision or were compiled from company business records.

25. In my opinion, the granting of Spur's application would serve the interests of conservation, the protection of correlative rights, and the prevention of waste.

26. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 25 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.


Morgan Landry

4/15/2021
Date

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

**APPLICATION OF SPUR ENERGY
PARTNERS, LLC FOR COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO**

Case No. _____

APPLICATION

Pursuant to NMSA § 70-2-17, Spur Energy Partners, LLC ("Spur") applies for an order pooling all uncommitted mineral interests in the Yeso formation (from the stratigraphic equivalent of 4,225' MD to 5,000' MD as observed on the Anderson-Federal 1 well Schlumberger Sidewall Neutron Porosity Log (API No. 30-015-20565)) in a 315-acre, more or less, standard (proximity tract) horizontal spacing unit comprised of the S/2 of Section 7, Township 17 South, Range 30 East in Eddy County, New Mexico. In support of its application, Spur states the following.

1. Spur (OGRID No. 328947) is a working interest owner in the horizontal spacing unit and has the right to drill wells thereon.
2. The horizontal spacing unit will be dedicated to the following wells:
 - (a) Merak 7 Federal 10H well, which will be horizontally drilled from a surface location in Unit L of Section 8 to a bottom hole location in Lot 3 of Section 7;
 - (b) Merak 7 Federal 11H well, which will be horizontally drilled from a surface location in Unit M of Section 8 to a bottom hole location in Lot 4 of Section 7;
 - (c) Merak 7 Federal 22H well, which will be horizontally drilled from a surface location in Unit M of Section 8 to a bottom hole location in Lot 3 of Section 7;

**SPUR ENERGY
PARTNERS, LLC
Case No. 21676**

Exhibit A-1

- (d) Merak 7 Federal 51H well, which will be horizontally drilled from a surface location in Unit L of Section 8 to a bottom hole location in Lot 3 of Section 7; and
 - (e) Merak 7 Federal 52H well, which will be horizontally drilled from a surface location in Unit M of Section 8 to a bottom hole location in Lot 4 of Section 7.
- 3. The completed intervals of the wells will be orthodox.
 - 4. Spur has undertaken diligent, good-faith efforts to obtain voluntary agreements from all mineral interest owners to participate in the drilling of the wells but has been unable to obtain voluntary agreements from all of the mineral interest owners.
 - 5. The pooling of uncommitted mineral interests will prevent the drilling of unnecessary wells, prevent waste, and protect correlative rights.
 - 6. In order to allow Spur to obtain its just and fair share of the oil and gas underlying the subject lands, all uncommitted mineral interests in the horizontal spacing unit should be pooled and Spur should be designated the operator of the proposed horizontal wells and spacing unit.

WHEREFORE, Spur requests that this application be set for hearing on March 4, 2021 and that, after notice and hearing, the Division enter an order:

- A. Pooling all uncommitted interests in the horizontal spacing unit, as set forth above;
- B. Approving the wells in the horizontal spacing unit;
- C. Designating Spur as operator of the spacing unit and the wells to be drilled thereon;
- D. Authorizing Spur to recover its costs of drilling, equipping and completing the wells;

- E. Approving the actual operating charges and costs of supervision while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and
- F. Imposing a 200% penalty for the risk assumed by Spur in drilling and completing the wells against any working interest owner who does not voluntarily participate in the drilling of the wells.

Respectfully submitted,

HINKLE SHANOR LLP

/s/ Dana S. Hardy

Dana S. Hardy

Dioscoro A. Blanco

P.O. Box 2068

Santa Fe, NM 87504-2068

Phone: (505) 982-4554

Facsimile: (505) 982-8623

dhardy@hinklelawfirm.com

Counsel for Spur Energy Partners, LLC

Application of Spur Energy Partners, LLC for Compulsory Pooling, Eddy County, New Mexico. Applicant seeks an order pooling all uncommitted mineral interests in the Yeso formation (from the stratigraphic equivalent of 4,225' MD to 5,000' MD as observed on the Anderson-Federal 1 well Schlumberger Sidewall Neutron Porosity Log (API No. 30-015-20565)) in a 315-acre, more or less, standard (proximity tract) horizontal spacing unit comprised of the S/2 of Section 7, Township 17 South, Range 30 East in Eddy County, New Mexico. The horizontal spacing unit will be dedicated to following wells: (1) Merak 7 Federal 10H well, which will be horizontally drilled from a surface location in Unit L of Section 8 to a bottom hole location in Lot 3 of Section 7; (2) Merak 7 Federal 11H well, which will be horizontally drilled from a surface location in Unit M of Section 8 to a bottom hole location in Lot 4 of Section 7; (3) Merak 7 Federal 22H well, which will be horizontally drilled from a surface location in Unit M of Section 8 to a bottom hole location in Lot 3 of Section 7; (4) Merak 7 Federal 51H well, which will be horizontally drilled from a surface location in Unit L of Section 8 to a bottom hole location in Lot 3 of Section 7; and (5) Merak 7 Federal 52H well, which will be horizontally drilled from a surface location in Unit M of Section 8 to a bottom hole location in Lot 4 of Section 7. The completed intervals of the wells will be orthodox. Also to be considered will be the cost of drilling and completing the wells and the allocation of the cost, the designation of Spur Energy Partners, LLC as the operator of the wells, and a 200% charge for the risk involved in drilling and completing the wells. The wells are located approximately 3 miles northwest of Loco Hills, New Mexico.

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 30-015-	² Pool Code 97618	³ Pool Name Loco Hills, Glorieta-Yeso
⁴ Property Code	⁵ Property Name MERAK 7 FEDERAL	⁶ Well Number 10H
⁷ OGRID NO. 328947	⁸ Operator Name SPUR ENERGY PARTNERS LLC.	⁹ Elevation 3667'

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
L	8	17S	30E		2475	SOUTH	1080	WEST	EDDY

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
3	7	17S	30E		2100	SOUTH	50	WEST	EDDY

¹² Dedicated Acres 320	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
--------------------------------------	-------------------------------	----------------------------------	-------------------------

No allowable will be assigned to this completion until all interest have been consolidated or a non-standard unit has been approved by the division.

¹⁶ GEODEIC DATA NAD 83 GRID - NM EAST SURFACE LOCATION (SL) N: 672617.7 - E: 643937.8 LAT: 32.8486043° N LONG: 103.9992392° W FIRST TAKE POINT (FTP) 2100' FSL & 100' FEL - SEC 7 N: 672239.1 - E: 642759.3 LAT: 32.8475739° N LONG: 104.0030803° W LAST TAKE POINT (LTP) 2100' FSL & 100' FVL - SEC 7 N: 672217.9 - E: 637760.7 LAT: 32.8475576° N LONG: 104.0193568° W BOTTOM HOLE (BH) N: 672217.7 - E: 637710.7 LAT: 32.8475574° N LONG: 104.0195196° W	CORNER DATA NAD 83 GRID - NM EAST A: FOUND BRASS CAP "1914" N: 670118.1 - E: 637673.2 B: FOUND BRASS CAP "1914" N: 672751.6 - E: 637657.6 C: FOUND BRASS CAP "1914" N: 675387.8 - E: 637653.6 D: FOUND BRASS CAP "1916" N: 675403.7 - E: 640208.3 E: FOUND BRASS CAP "1916" N: 675419.9 - E: 642848.2 F: FOUND BRASS CAP "1916" N: 675428.2 - E: 645488.7 G: FOUND BRASS CAP "1916" N: 675436.4 - E: 648128.9 H: FOUND BRASS CAP "1916" N: 672796.7 - E: 648137.7 I: FOUND BRASS CAP "1916" N: 670156.3 - E: 648146.2 J: FOUND BRASS CAP "1916" N: 670148.2 - E: 645506.1 K: FOUND BRASS CAP "1916" N: 670140.1 - E: 642866.3 L: FOUND BRASS CAP "1916" N: 670128.3 - E: 640226.3 M: FOUND BRASS CAP "1916" N: 672779.6 - E: 642857.5	¹⁷ OPERATOR CERTIFICATION 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. <i>Sarah Chapman</i> 11/5/2020 Signature Date Sarah Chapman Printed Name schapman@spurepllc.com E-mail Address
		¹⁸ SURVEYOR CERTIFICATION 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. 10-21-2020 Date of Survey Signature and Seal of Professional Surveyor 19680 Certificate Number ROBERT M. HOWETT 19680 NEW MEXICO PROFESSIONAL SURVEYOR

LS20100549

SPUR ENERGY
PARTNERS, LLC
Case No. 21676

Exhibit A-2

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 30-015-		² Pool Code 97618		³ Pool Name Loco Hills; Glorieta-Yeso	
⁴ Property Code		⁵ Property Name MERAK 7 FEDERAL			⁶ Well Number 51H
⁷ GRID NO. 328947		⁸ Operator Name SPUR ENERGY PARTNERS LLC.			⁹ Elevation 3668'

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
L	8	17S	30E		2492	SOUTH	1091	WEST	EDDY

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
3	7	17S	30E		2175	SOUTH	50	WEST	EDDY

¹² Dedicated Acres 320	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
--------------------------------------	-------------------------------	----------------------------------	-------------------------

No allowable will be assigned to this completion until all interest have been consolidated or a non-standard unit has been approved by the division.

16 GEODETIC DATA NAD 83 GRID - NM EAST SURFACE LOCATION (SL) N: 672634.7 - E: 643948.4 LAT: 32.8486509° N LONG: 103.9992043° W FIRST TAKE POINT (FTP) 2175' FSL & 100' FWL - SEC 7 N: 672314.1 - E: 642759.1 LAT: 32.8477800° N LONG: 104.0030803° W LAST TAKE POINT (LTP) 2175' FSL & 100' FWL - SEC 7 N: 672292.9 - E: 637760.3 LAT: 32.8477637° N LONG: 104.0193576° W BOTTOM HOLE (BH) N: 672292.7 - E: 637710.3 LAT: 32.8477635° N LONG: 104.0195203° W	CORNER DATA NAD 83 GRID - NM EAST A: FOUND BRASS CAP "1914" N: 670118.1 - E: 637673.2 B: FOUND BRASS CAP "1914" N: 672751.6 - E: 637657.6 C: FOUND BRASS CAP "1914" N: 675387.8 - E: 637653.6 D: FOUND BRASS CAP "1916" N: 675403.7 - E: 640208.3 E: FOUND BRASS CAP "1916" N: 675419.9 - E: 642848.2 F: FOUND BRASS CAP "1916" N: 675428.2 - E: 645488.7 G: FOUND BRASS CAP "1916" N: 675436.4 - E: 648128.9 H: FOUND BRASS CAP "1916" N: 672796.7 - E: 648137.7 I: FOUND BRASS CAP "1916" N: 670156.3 - E: 648146.2 J: FOUND BRASS CAP "1916" N: 670148.2 - E: 645506.1 K: FOUND BRASS CAP "1916" N: 670140.1 - E: 642866.3 L: FOUND BRASS CAP "1916" N: 670128.3 - E: 640226.3 M: FOUND BRASS CAP "1916" N: 672779.6 - E: 642857.5	17 OPERATOR CERTIFICATION <i>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.</i> <i>Sarah Chapman</i> 11/5/2020 Signature Date Sarah Chapman Printed Name schapman@spurepllc.com E-mail Address
		18 SURVEYOR CERTIFICATION <i>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.</i> 10-21-2020 Date of Survey Signature and Seal of Professional Surveyor 19680 Certificate Number ROBERT M. HOWETT NEW MEXICO 19680 PROFESSIONAL SURVEYOR

LS20100550

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 30-015-		² Pool Code 97618		³ Pool Name Loco Hills; Glorieta-Yeso					
⁴ Property Code		⁵ Property Name MERAK 7 FEDERAL						⁶ Well Number 11H	
⁷ GRID NO. 328947		⁸ Operator Name SPUR ENERGY PARTNERS LLC.						⁹ Elevation 3666'	
¹⁰ Surface Location									
UL or lot no. M	Section 8	Township 17S	Range 30E	Lot Idn	Feet from the 875	North/South line SOUTH	Feet From the 1060	East/West line WEST	County EDDY
¹¹ Bottom Hole Location If Different From Surface									
UL or lot no. 4	Section 7	Township 17S	Range 30E	Lot Idn	Feet from the 600	North/South line SOUTH	Feet from the 50	East/West line WEST	County EDDY
¹² Dedicated Acres 320		¹³ Joint or Infill		¹⁴ Consolidation Code		¹⁵ Order No.			

No allowable will be assigned to this completion until all interest have been consolidated or a non-standard unit has been approved by the division.

¹⁶ GEODETIC DATA NAD 83 GRID - NM EAST SURFACE LOCATION (SL) N: 671018.1 - E: 643923.1 LAT: 32.8442079° N LONG: 103.9993034° W FIRST TAKE POINT (FTP) 600' FSL & 100' FWL - SEC 7 N: 670739.5 - E: 642764.3 LAT: 32.8434520° N LONG: 104.0030793° W LAST TAKE POINT (LTP) 600' FSL & 100' FWL - SEC 7 N: 670718.3 - E: 637769.7 LAT: 32.8434357° N LONG: 104.0193423° W BOTTOM HOLE (BH) N: 670718.1 - E: 637719.7 LAT: 32.8434356° N LONG: 104.0195051° W		CORNER DATA NAD 83 GRID - NM EAST A: FOUND BRASS CAP "1914" N: 670118.1 - E: 637673.2 B: FOUND BRASS CAP "1914" N: 672751.6 - E: 637657.6 C: FOUND BRASS CAP "1914" N: 675387.8 - E: 637653.6 D: FOUND BRASS CAP "1916" N: 675403.7 - E: 640208.3 E: FOUND BRASS CAP "1916" N: 675419.9 - E: 642848.2 F: FOUND BRASS CAP "1916" N: 675428.2 - E: 645488.7 G: FOUND BRASS CAP "1916" N: 675436.4 - E: 648128.9 H: FOUND BRASS CAP "1915" N: 672796.7 - E: 648137.7 I: FOUND BRASS CAP "1916" N: 670156.3 - E: 648146.2 J: FOUND BRASS CAP "1916" N: 670148.2 - E: 645506.1 K: FOUND BRASS CAP "1916" N: 670140.1 - E: 642866.3 L: FOUND BRASS CAP "1916" N: 670128.3 - E: 640226.3 M: FOUND BRASS CAP "1916" N: 672779.6 - E: 642857.5		¹⁷ OPERATOR CERTIFICATION 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. Sarah Chapman 11/9/2020 Signature Date Sarah Chapman Printed Name schapman@spurepllc.com E-mail Address
		¹⁸ SURVEYOR CERTIFICATION 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. 10-21-2020 Date of Survey Signature and Seal of Professional Surveyor 19680 Certificate Number		

LS20100552

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 30-015-	² Pool Code 97618	³ Pool Name Loco Hills; Glorieta-Yeso
⁴ Property Code	⁵ Property Name MERAK 7 FEDERAL	⁶ Well Number 52H
⁷ OGRID NO. 328947	⁸ Operator Name SPUR ENERGY PARTNERS LLC.	⁹ Elevation 3666'

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
M	8	17S	30E		855	SOUTH	1060	WEST	EDDY

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
4	7	17S	30E		400	SOUTH	50	WEST	EDDY

¹² Dedicated Acres 320	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
--------------------------------------	-------------------------------	----------------------------------	-------------------------

No allowable will be assigned to this completion until all interest have been consolidated or a non-standard unit has been approved by the division.

¹⁶ GEODETIC DATA NAD 83 GRID - NM EAST SURFACE LOCATION (SL) N: 670998.1 - E: 643923.2 LAT: 32.8441529° N LONG: 103.9993031° W FIRST TAKE POINT (FTP) 400' FSL & 100' FWL - SEC 7 N: 670539.5 - E: 642765.0 LAT: 32.8429024° N LONG: 104.0030791° W LAST TAKE POINT (LTP) 400' FSL & 100' FWL - SEC 7 N: 670518.3 - E: 637770.8 LAT: 32.8428861° N LONG: 104.0193403° W BOTTOM HOLE (BH) N: 670518.1 - E: 637720.9 LAT: 32.8428860° N LONG: 104.0195031° W		CORNER DATA NAD 83 GRID - NM EAST A: FOUND BRASS CAP "1914" N: 670118.1 - E: 637673.2 B: FOUND BRASS CAP "1914" N: 672751.6 - E: 637657.6 C: FOUND BRASS CAP "1914" N: 675387.8 - E: 637653.6 D: FOUND BRASS CAP "1916" N: 675403.7 - E: 640208.3 E: FOUND BRASS CAP "1916" N: 675419.9 - E: 642848.2 F: FOUND BRASS CAP "1916" N: 675428.2 - E: 645488.7 G: FOUND BRASS CAP "1916" N: 675436.4 - E: 648128.9 H: FOUND BRASS CAP "1916" N: 672796.7 - E: 648137.7 I: FOUND BRASS CAP "1916" N: 670156.3 - E: 648146.2 J: FOUND BRASS CAP "1916" N: 670148.2 - E: 645506.1 K: FOUND BRASS CAP "1916" N: 670140.1 - E: 642866.3 L: FOUND BRASS CAP "1916" N: 670128.3 - E: 640226.3 M: FOUND BRASS CAP "1916" N: 672779.6 - E: 642857.5	
		¹⁷ OPERATOR CERTIFICATION 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. Sarah Chapman 11/5/2020 Signature Date Sarah Chapman Printed Name schapman@spurepllc.com E-mail Address	
¹⁸ SURVEYOR CERTIFICATION 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. 10-21-2020 Date of Survey Signature and Seal of Professional Surveyor 19680 Certificate Number			

LS20100553

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 30-015	² Pool Code 97618	³ Pool Name Loco Hills; Glorieta-Yeso
⁴ Property Code	⁵ Property Name MERAK 7 FEDERAL	⁶ Well Number 22H
⁷ GRID NO. 328947	⁸ Operator Name SPUR ENERGY PARTNERS LLC.	⁹ Elevation 3668'

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
M	8	17S	30E		915	SOUTH	1060	WEST	EDDY

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
3	7	17S	30E		1350	SOUTH	50	WEST	EDDY
¹² Dedicated Acres 320		¹³ Joint or Infill		¹⁴ Consolidation Code		¹⁵ Order No.			

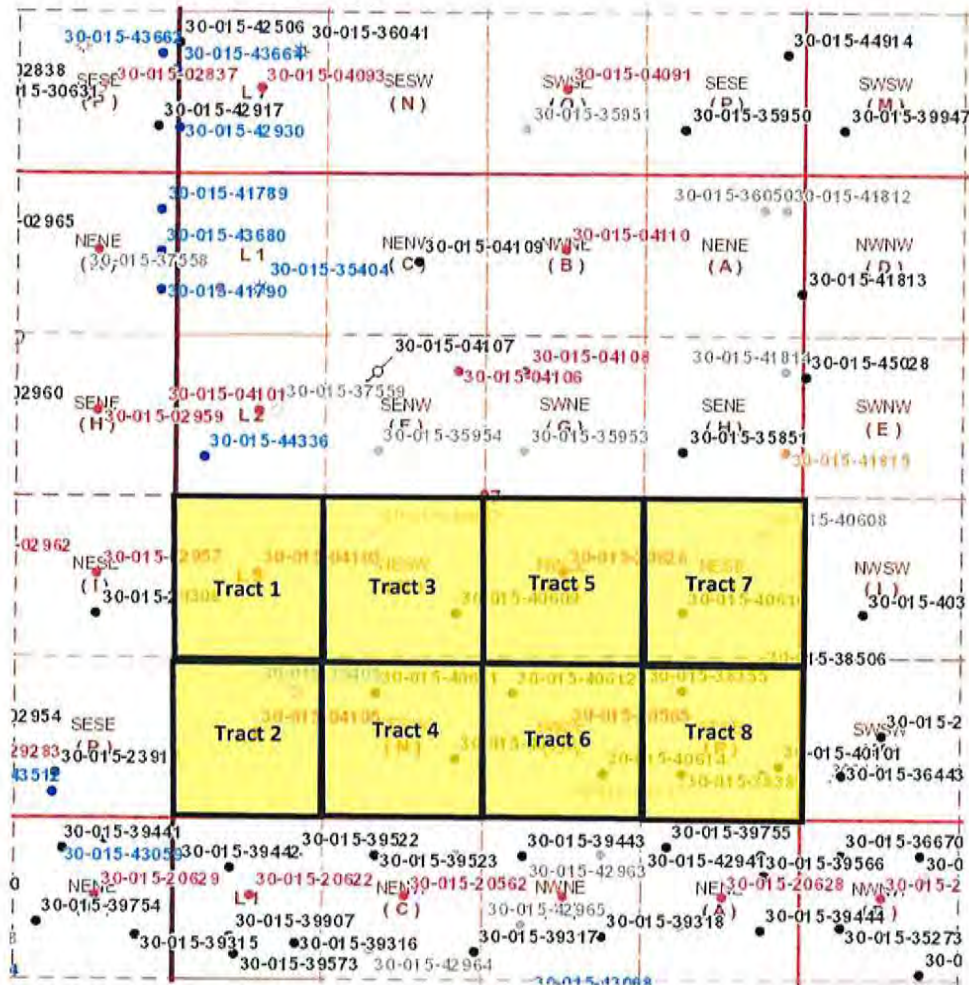
No allowable will be assigned to this completion until all interest have been consolidated or a non-standard unit has been approved by the division.

¹⁶ GEODETIC DATA NAD 83 GRID - NM EAST SURFACE LOCATION (SL) N: 671058.2 - E: 643923.0 LAT: 32.8443179° N LONG: 103.9993031° W FIRST TAKE POINT (FTP) 1350' FSL & 100' FWL - SEC 7 N: 671489.3 - E: 642761.8 LAT: 32.8455129° N LONG: 104.0030798° W LAST TAKE POINT (LTP) 1350' FSL & 100' FWL - SEC 7 N: 671468.1 - E: 637765.2 LAT: 32.8454966° N LONG: 104.0193496° W BOTTOM HOLE (BH) N: 671467.9 - E: 637715.2 LAT: 32.8454966° N LONG: 104.0195123° W		CORNER DATA NAD 83 GRID - NM EAST A: FOUND BRASS CAP "1914" N: 670118.1 - E: 637673.2 B: FOUND BRASS CAP "1914" N: 672751.6 - E: 637657.6 C: FOUND BRASS CAP "1914" N: 675387.8 - E: 637653.6 D: FOUND BRASS CAP "1916" N: 675403.7 - E: 640208.3 E: FOUND BRASS CAP "1916" N: 675419.9 - E: 642848.2 F: FOUND BRASS CAP "1916" N: 675428.2 - E: 645488.7 G: FOUND BRASS CAP "1916" N: 675436.4 - E: 648128.9 H: FOUND BRASS CAP "1916" N: 672796.7 - E: 648137.7 I: FOUND BRASS CAP "1916" N: 670156.3 - E: 648146.2 J: FOUND BRASS CAP "1916" N: 670148.2 - E: 645506.1 K: FOUND BRASS CAP "1916" N: 670140.1 - E: 642866.3 L: FOUND BRASS CAP "1916" N: 670128.3 - E: 640226.3 M: FOUND BRASS CAP "1916" N: 672779.6 - E: 642857.5		¹⁷ OPERATOR CERTIFICATION 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. <u>Sarah Chapman</u> 11/5/2020 Signature Date Sarah Chapman Printed Name schapman@spurepllc.com E-mail Address
		¹⁸ SURVEYOR CERTIFICATION 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. 10-21-2020 Date of Survey Signature and Seal of Professional Surveyor 19680 Certificate Number		

LS20100554

Exhibit A-3

South Half (S/2) of Section 7, Township 17 South, Range 30 East, Eddy County, New Mexico as to those depths from the Top of the Yezo Formation to 5,000'.



Tract 1: NW4 SW4 (Lot 3) of Section 7-17S-30E (BLM Lease LC 028785)

- SEP Permian Holding Corp 100% Working Interest

Tract 2: SW4 SW4 (Lot 4) of Section 7-17S-30E (BLM Lease LC 028785)

- SEP Permian Holding Corp 100% Working Interest

Tract 3: NE4 SW4 of Section 7-17S-R30E (NM State Lease 7752)

- SEP Permian Holding Corp 55% Working Interest
- ConocoPhillips Company 45% Working Interest

Tract 4: SE4 SW4 of Section 7-17S-R30E (NM State Lease 7752)

- SEP Permian Holding Corp 55% Working Interest

**SPUR ENERGY
PARTNERS, LLC
Case No. 21676**

Exhibit A-3

- ConocoPhillips Company 45% Working Interest

Tract 5: NW4 SE4 of Section 7-17S-30E (NM State Lease 7752)

- Southwest Royalties, Inc. 100% Working Interest

Tract 6: SW4 SE4 of Section 7-17S-30E (NM State Lease 7752)

- SEP Permian Holding Corp 100% Working Interest

Tract 7: NE4 SE4 of Section 7-17S-30E (NM State Lease 7752)

- SEP Permian Holding Corp 100% Working Interest

Tract 8: SE4 SE4 of Section 7-17S-30E (NM State Lease 7752)

- SEP Permian Holding Corp 100% Working Interest

RECAPITULATION

Tract Number	Number of Acres Committed	Percentage of Interest in Unit
1	39.34125	12.50%
2	39.34125	12.50%
3	39.34125	12.50%
4	39.34125	12.50%
5	39.34125	12.50%
6	39.34125	12.50%
7	39.34125	12.50%
8	39.34125	12.50%
TOTAL	314.73	100.00%

SEP Permian Holding Corp 76.25% Working Interest
 9655 Katy Freeway, Ste 500
 Houston, Texas 77024

ConocoPhillips Company 11.25% Working Interest
 925 N. Eldridge Pkwy.
 Houston, Texas 77079

Southwest Royalties, Inc. 12.5% Working Interest
 P.O. Box 53570
 Midland, Texas 79710-3570

Total 100% Working Interest

Leasehold Interest:

SEP Permian Holding Corp
9655 Katy Freeway, Ste 500
Houston, Texas 77024

ConocoPhillips Company
925 N. Eldridge Pkwy.
Houston, Texas 77079

Southwest Royalties, Inc.
P.O. Box 53570
Midland, Texas 79710-3570

Overriding Royalty Interests:

1. Root Family Holdings, LLC
2. Joanna L. McDermott, as her separate property
3. Mary Carolyn Johnston, as her separate property
4. RRA Minerals, L.L.C.
5. Breck Minerals LP
6. Jon Erick Anderson, as his separate property
7. Aaron Anderson, as his separate property
8. James Chester Bethel, Jr., as his separate property
9. Edward Louis Carson, Jr., as his separate property
10. Dianne Louise Carson Kostka, as her separate property
11. Valarie Rose Carson Ryckman, as her separate property
12. Gayle Angela Carson Carpenter, as her separate property
13. David Rhea Carson and Karen J. Douglas, Trustees of the Nashoba Revocable Trust dated November 25, 2019
14. Leslie Lee Bayouth, as her separate property
15. Richard M. Lowery, as his separate property
16. Jackie Kemp Jones, as her separate property
17. New Mexico Baptist Foundation, Inc., trustee for the New Mexico Baptist Children's Home, Inc.
18. SEP Permian Holding Corp
19. Platform Energy III, LLC
20. John Bedingfield, as his separate property
21. Leland Price, Inc.
22. Margaret Jean Gates, Trustee of the John W. Gates and Jean M. Gates Revocable Trust dated January 8, 1985
23. Gates Properties, Ltd.
24. Wallace Sanford Gates and Vergine Russell Gates, Trustees of the Wallace and Vergine Gates Family Trust dated April 29, 1987
25. Heirs or Devisees of Helen Gates Maxwell
26. Heirs or Devisees of Virginia Gates Irish
27. Lloyd Henderson and Jean Henderson, husband and wife
28. Rhodes Interests, Ltd.



December 22, 2020

ConocoPhillips Company
Attn: Wyn E. McCubbin
925 N. Eldridge Pkwy.
Houston, Texas 77079

RE: Well Proposal

Merak 7 Federal 10H, 11H, 22H, 51H, and 52H
South-half (S/2) of Section 7, Township 17 South, Range 30 East
Eddy County, New Mexico

Dear Working Interest Owner,

SEP Permian Holding Corp ("Spur"), an affiliate of Spur Energy Partners LLC, hereby proposes to drill and complete the **Merak 7 Federal 10H, 11H, 22H, 51H, and 52H** wells to the approximate total vertical depths as referenced below as horizontal Yeso wells (the "Subject Wells") at the following proposed locations (subject to change upon staking and survey).

Merak 7 Federal 10H well – Horizontal Yeso Well, Eddy County, NM

- Proposed Surface Hole Location – 2475' FSL & 1080' FWL, Section 8, T17S-R30E
- Proposed Bottom Hole Location – 2100' FSL & 50' FWL, Section 7, T17S-R30E
- TVD: 4540'

Merak 7 Federal 11H well – Horizontal Yeso Well, Eddy County, NM

- Proposed Surface Hole Location – 875' FSL & 1060' FWL, Section 8, T17S-R30E
- Proposed Bottom Hole Location – 600' FSL & 50' FWL, Section 7, T17S- R30E
- TVD: 4510'

Merak 7 Federal 22H well – Horizontal Yeso Well, Eddy County, NM

- Proposed Surface Hole Location – 915' FSL & 1060' FWL, Section 8, T17S-R30E
- Proposed Bottom Hole Location – 1350' FSL & 50' FWL, Section 7, T17S- R30E
- TVD: 4625'

Merak 7 Federal 51H well – Horizontal Yeso Well, Eddy County, NM

- Proposed Surface Hole Location – 2492' FSL & 1091' FWL, Section 8, T17S-R30E
- Proposed Bottom Hole Location – 2175' FSL & 50' FWL, Section 7, T17S- R30E
- TVD: 4900'

Merak 7 Federal 52H well – Horizontal Yeso Well, Eddy County, NM

- Proposed Surface Hole Location – 855' FSL & 1060' FWL, Section 8, T17S-R30E
- Proposed Bottom Hole Location – 400' FSL & 50' FWL, Section 7, T17S- R30E
- TVD: 4865'

Spur proposes to form a Drilling Spacing Unit ("DSU") covering the S/2 of Section 7-T17S-R30E, Eddy County, New Mexico, containing 320 acres of land, more or less, from the top of the Yeso formation to 5000 feet. Portions of these lands are likely governed by existing Joint Operating Agreements ("JOAs") which also cover the Yeso formation and which govern operations for vertical wells. For the mutually exclusive development of horizontal wells, and any concept wells (i.e. micro seismic wells, pilot hole wells) within the DSU, Spur hereby submits for your consideration, a new joint operating agreement dated January 1, 2021, being a modified 2015 Horizontal AAPL Form 610 Operating Agreement ("NJOA") to govern proposals and operations within the DSU. The NJOA shall supersede any existing operations under any JOAs, expressly limited however, to horizontal well development and operations within the DSU. The NJOA has the following general provisions:

- Effective Date of January 1, 2021
- S/2 of Section 7-T17S-R30E
- Limited in depth from the top of the Yeso to 5000'
- 100%/300%/300% non-consenting penalty
- \$7,000/\$700 drilling and producing monthly overhead rate
- Spur Energy Partners LLC named as Operator

The enclosed AFEs reflect the total estimated drilling and completion costs for each well. The AFEs are an estimate only and those parties electing to participate in the Subject Wells shall be responsible for their share of actual well costs, whether more or less than those shown on the enclosed AFEs.

Spur respectfully requests that you select one of the following four options with regard to your interest in the proposed wells:

Option 1: Participate in the drilling and completion of the proposed well and agree to enter into the NJOA with the terms specified above.

Option 2: Not participate in the proposed well (an election of "Non-Consent").

Term Assignment Option: Assign your working interest in the S/2 of Section 7-17S-30E, exclusive of existing wellbores, to Spur through a term assignment with a primary term of three (3) years and a bonus consideration of \$500 per net acre, delivering a 75% leasehold net revenue interest (limited to the Yeso formation).

Assignment Option: Assign your working interest in the S/2 of Section 7-17S-30E, exclusive of existing wellbores, to Spur for a bonus consideration of \$1,000 per net acre, delivering a 75% leasehold net revenue interest (all rights owned).

Should you elect Option 1 or Option 2, Spur will send the NJOA for your review and execution. If you prefer to review the NJOA prior to making an election, please request a copy by email and Spur will supply you the NJOA. In the event you elect to assign your working interest under the terms outlined above in the Term Assignment or Assignment Option, please indicate this by signing the enclosed Assignment Election page and returning an executed W-9. Upon receipt, Spur will submit an Assignment to you for your review and execution.

Spur looks forward to working with you on this matter. However, if an agreement cannot be reached within 30 days of the receipt date of this proposal, please be advised Spur may apply to the New Mexico Oil Conservation Division for Compulsory Pooling of any uncommitted interest owners into a spacing unit for the proposed wells.

Please indicate your elections as to the Subject Wells in the spaces provided below and execute and return a copy of this letter to the undersigned within 30 days of receipt of this proposal. Should you have any questions regarding this proposal, please contact me via email at mlandry@spurepllc.com.

Sincerely,

Morgan Landry
Sr. Landman

Merak 7 Federal 10H

Owner: ConocoPhillips Company

WI Decimal: 0.1125

_____ *Option 1) The undersigned elects to participate in the drilling and completion of the Merak 7 Federal 10H well and agrees to the formation of the DSU and to the terms of the NJOA as detailed in this proposal, with the cost and maintenance of all surface facilities, including any shared well pads, being reapportioned between each well drilled in the DSU.*

_____ *Option 2) The undersigned elects not to participate in the drilling and completion of the Merak 7 Federal 10H.*

Should you elect to participate, please also indicate your Well Insurance election below. If you elect to obtain individual Well Insurance coverage, please provide Spur with a copy of your Certificate of Insurance.

Well Insurance:

_____ *The undersigned requests Well Insurance coverage provided by Spur Energy Partners.*

_____ *The undersigned elects to obtain individual Well Insurance coverage.*

Agreed to and Accepted this _____ day of _____, 2020.

Company/Individual: _____

By: _____

Name: _____

Title: _____

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.: C20022		COMPANY
AFE DESC: MERAK 7 FEDERAL 10H		DIVISION
DATE: 12/21/2020	OPERATOR:	
AFE TYPE: DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET: GROSS	LLC	

DETAIL OF EXPENDITURES	DRYHOLE	COMPLETION	EQUIP-TIE	SUPPLEMENT	TOTAL	ACTUAL
LOCATION - OPS		20,000.00	0.00		20,000.00	
TOTAL:		20,000.00	0.00		20,000.00	
LOCATION/DAMAGES-LAND		10,000.00	0.00		10,000.00	
TOTAL:		10,000.00	0.00		10,000.00	
TITLE WORK/OPINIONS - LAND		60,000.00	0.00		60,000.00	
TOTAL:		60,000.00	0.00		60,000.00	
SURVEY - LAND		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
DRILLING RENTALS: SURFACE		43,000.00	0.00		43,000.00	
TOTAL:		43,000.00	0.00		43,000.00	
DRILLING RENTALS: SUBSURFACE		25,000.00	0.00		25,000.00	
TOTAL:		25,000.00	0.00		25,000.00	
DRILL MUD & COMPL FLUID		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
WELLSITE SUPERVISION		33,000.00	0.00		33,000.00	
TOTAL:		33,000.00	0.00		33,000.00	
GROUND TRANSPORT		9,000.00	0.00		9,000.00	
TOTAL:		9,000.00	0.00		9,000.00	
CONTRACT DRILLING (DAY RATE/TUF		167,000.00	0.00		167,000.00	
TOTAL:		167,000.00	0.00		167,000.00	
DIRECTIONAL TOOLS AND SERVICES		111,000.00	0.00		111,000.00	
TOTAL:		111,000.00	0.00		111,000.00	
FLUID & CUTTINGS DISPOSAL		45,000.00	0.00		45,000.00	
TOTAL:		45,000.00	0.00		45,000.00	
FRAC TANK RENTALS		250.00	0.00		250.00	
TOTAL:		250.00	0.00		250.00	
BITS		30,500.00	0.00		30,500.00	
TOTAL:		30,500.00	0.00		30,500.00	
COMPANY LABOR		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
FUEL, WATER & LUBE		41,000.00	0.00		41,000.00	
TOTAL:		41,000.00	0.00		41,000.00	
CEMENT		35,000.00	0.00		35,000.00	
TOTAL:		35,000.00	0.00		35,000.00	
CASING CREWS AND LAYDOWN SERV		8,500.00	0.00		8,500.00	
TOTAL:		8,500.00	0.00		8,500.00	
PROD CSG CEMENT AND SERVICE		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
MUD LOGGER		10,500.00	0.00		10,500.00	
TOTAL:		10,500.00	0.00		10,500.00	
MOB/DEMOB RIG		13,500.00	0.00		13,500.00	
TOTAL:		13,500.00	0.00		13,500.00	
VACUUM TRUCKING		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
DRILLPIPE INSPECTION		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
CONTRACT LABOR/SERVICES		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
MISC IDC/CONTINGENCY		68,250.00	0.00		68,250.00	
TOTAL:		68,250.00	0.00		68,250.00	
SURFACE CASING		13,000.00	0.00		13,000.00	
TOTAL:		13,000.00	0.00		13,000.00	
INTERMEDIATE CASING		24,000.00	0.00		24,000.00	
TOTAL:		24,000.00	0.00		24,000.00	
PRODUCTION/LINER CASING		201,000.00	0.00		201,000.00	
TOTAL:		201,000.00	0.00		201,000.00	
CONDUCTOR PIPE		20,000.00	0.00		20,000.00	

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.:	C20022	COMPANY	
AFE DESC:	MERAK 7 FEDERAL 10H	DIVISION	
DATE:	12/21/2020	OPERATOR:	
AFE TYPE:	DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET:	GROSS	LLC	
TOTAL:			
	20,000.00	0.00	20,000.00
WELLHEAD	19,000.00	0.00	19,000.00
TOTAL:			
	19,000.00	0.00	19,000.00
LINER HANGER/CASING ACCESSORY	25,000.00	0.00	25,000.00
TOTAL:			
	25,000.00	0.00	25,000.00
EQUIP RENT	44,000.00	0.00	44,000.00
TOTAL:			
	44,000.00	0.00	44,000.00
RENTALS: SURFACE IRON	65,000.00	0.00	65,000.00
TOTAL:			
	65,000.00	0.00	65,000.00
DRILLING RENTALS: SUBSURFACE	10,000.00	0.00	10,000.00
TOTAL:			
	10,000.00	0.00	10,000.00
DRILL MUD & COMPL FLUID	275,000.00	0.00	275,000.00
TOTAL:			
	275,000.00	0.00	275,000.00
WELLSITE SUPERVISION	46,250.00	0.00	46,250.00
TOTAL:			
	46,250.00	0.00	46,250.00
COMPLETION CHEMICALS	110,000.00	0.00	110,000.00
TOTAL:			
	110,000.00	0.00	110,000.00
GROUND TRANSPORT	10,000.00	0.00	10,000.00
TOTAL:			
	10,000.00	0.00	10,000.00
PUMPDOWN	25,000.00	0.00	25,000.00
TOTAL:			
	25,000.00	0.00	25,000.00
CASED HOLE WIRELINE	82,000.00	0.00	82,000.00
TOTAL:			
	82,000.00	0.00	82,000.00
FRAC PLUGS	44,000.00	0.00	44,000.00
TOTAL:			
	44,000.00	0.00	44,000.00
FRAC/FLUID SW DISPOSAL	10,000.00	0.00	10,000.00
TOTAL:			
	10,000.00	0.00	10,000.00
FRAC TANK RENTALS	10,000.00	0.00	10,000.00
TOTAL:			
	10,000.00	0.00	10,000.00
FLOWBACK	47,000.00	0.00	47,000.00
TOTAL:			
	47,000.00	0.00	47,000.00
STIMULATION AND PUMPING SERVIC	300,000.00	0.00	300,000.00
TOTAL:			
	300,000.00	0.00	300,000.00
PROPPANT	150,000.00	0.00	150,000.00
TOTAL:			
	150,000.00	0.00	150,000.00
FUEL, WATER & LUBE	120,000.00	0.00	120,000.00
TOTAL:			
	120,000.00	0.00	120,000.00
CASING CREWS AND LAYDOWN SER	2,500.00	0.00	2,500.00
TOTAL:			
	2,500.00	0.00	2,500.00
COMPLETION/WORKOVER RIG	51,500.00	0.00	51,500.00
TOTAL:			
	51,500.00	0.00	51,500.00
KILL TRUCK	2,500.00	0.00	2,500.00
TOTAL:			
	2,500.00	0.00	2,500.00
COIL TUBING, SNUBBING, NITRO SVC	10,000.00	0.00	10,000.00
TOTAL:			
	10,000.00	0.00	10,000.00
CONTRACT LABOR - ARTIFICIAL LIFT	17,500.00	0.00	17,500.00
TOTAL:			
	17,500.00	0.00	17,500.00
CONTRACT LABOR - ELECTRICAL/AU	20,000.00	0.00	20,000.00
TOTAL:			
	20,000.00	0.00	20,000.00
CONTRACT LABOR - WELL LEVEL	15,000.00	0.00	15,000.00
TOTAL:			
	15,000.00	0.00	15,000.00
FACILITY PAD CONSTRUCTION	17,500.00	0.00	17,500.00
TOTAL:			
	17,500.00	0.00	17,500.00
MISC INTANGIBLE FACILITY COSTS	5,000.00	0.00	5,000.00
TOTAL:			
	5,000.00	0.00	5,000.00
CONTRACT LABOR - AUTOMATION	5,750.00	0.00	5,750.00
TOTAL:			
	5,750.00	0.00	5,750.00
EQUIPMENT RENTALS	3,750.00	0.00	3,750.00

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.:	C20022	COMPANY	
AFE DESC:	MERAK 7 FEDERAL 10H	DIVISION	
DATE:	12/21/2020	OPERATOR:	
AFE TYPE:	DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET:	GROSS	LLC	

TOTAL:	3,750.00	0.00	3,750.00
FREIGHT & HANDLING	3,750.00	0.00	3,750.00
TOTAL:	3,750.00	0.00	3,750.00
CONTRACT LABOR - ELECTRICAL	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FACILITY CONSTRUCTION LABOR	45,000.00	0.00	45,000.00
TOTAL:	45,000.00	0.00	45,000.00
BITS	1,000.00	0.00	1,000.00
TOTAL:	1,000.00	0.00	1,000.00
OVERHEAD POWER	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
PARTS & SUPPLIES - ARTIFICIAL LIFT	50,000.00	0.00	50,000.00
TOTAL:	50,000.00	0.00	50,000.00
PARTS & SUPPLIES - ELECTRICAL/AU	5,000.00	0.00	5,000.00
TOTAL:	5,000.00	0.00	5,000.00
PARTS & SUPPLIES - WELL LEVEL	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
TUBING	44,250.00	0.00	44,250.00
TOTAL:	44,250.00	0.00	44,250.00
TUBING HEAD/XMAS TREE	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
VESSELS	41,750.00	0.00	41,750.00
TOTAL:	41,750.00	0.00	41,750.00
ELECTRICAL - OVERHEAD & TRANSF	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
LACT	18,750.00	0.00	18,750.00
TOTAL:	18,750.00	0.00	18,750.00
AUTOMATION METERS, SENSORS, V/I	23,750.00	0.00	23,750.00
TOTAL:	23,750.00	0.00	23,750.00
MISC FITTINGS & SUPPLIES	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
PUMPS & PUMP SUPPLIES	7,500.00	0.00	7,500.00
TOTAL:	7,500.00	0.00	7,500.00
MISC TANGIBLE FACILITY COSTS	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
TANKS (OIL & WATER)	43,750.00	0.00	43,750.00
TOTAL:	43,750.00	0.00	43,750.00
CONTAINMENT	15,000.00	0.00	15,000.00
TOTAL:	15,000.00	0.00	15,000.00
PIPING	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
ELECTRICAL - FACILITY	61,250.00	0.00	61,250.00
TOTAL:	61,250.00	0.00	61,250.00
TOTAL THIS AFE:	3,102,500.00	0.00	3,102,500.00

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

A/E NO.:	C20023	COMPANY
A/E DESC:	MERAK 7 FEDERAL 11H	DIVISION
DATE:	12/21/2020	OPERATOR:
A/E TYPE:	DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN, LLC
GROSS/NET:	GROSS	

DETAIL OF EXPENDITURES	DRYHOLE	COMPLETION	EQUIP-TIE	SUPPLEMENT	TOTAL	ACTUAL
LOCATION - OPS		20,000.00	0.00		20,000.00	
TOTAL:		20,000.00	0.00		20,000.00	
LOCATION/DAMAGES-LAND		10,000.00	0.00		10,000.00	
TOTAL:		10,000.00	0.00		10,000.00	
TITLE WORK/OPINIONS - LAND		60,000.00	0.00		60,000.00	
TOTAL:		60,000.00	0.00		60,000.00	
SURVEY - LAND		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
DRILLING RENTALS: SURFACE		43,000.00	0.00		43,000.00	
TOTAL:		43,000.00	0.00		43,000.00	
DRILLING RENTALS: SUBSURFACE		25,000.00	0.00		25,000.00	
TOTAL:		25,000.00	0.00		25,000.00	
DRILL MUD & COMPL FLUID		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
WELLSITE SUPERVISION		33,000.00	0.00		33,000.00	
TOTAL:		33,000.00	0.00		33,000.00	
GROUND TRANSPORT		9,000.00	0.00		9,000.00	
TOTAL:		9,000.00	0.00		9,000.00	
CONTRACT DRILLING (DAY RATE/TUF		167,000.00	0.00		167,000.00	
TOTAL:		167,000.00	0.00		167,000.00	
DIRECTIONAL TOOLS AND SERVICES		111,000.00	0.00		111,000.00	
TOTAL:		111,000.00	0.00		111,000.00	
FLUID & CUTTINGS DISPOSAL		45,000.00	0.00		45,000.00	
TOTAL:		45,000.00	0.00		45,000.00	
FRAC TANK RENTALS		250.00	0.00		250.00	
TOTAL:		250.00	0.00		250.00	
BITS		30,500.00	0.00		30,500.00	
TOTAL:		30,500.00	0.00		30,500.00	
COMPANY LABOR		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
FUEL, WATER & LUBE		41,000.00	0.00		41,000.00	
TOTAL:		41,000.00	0.00		41,000.00	
CEMENT		35,000.00	0.00		35,000.00	
TOTAL:		35,000.00	0.00		35,000.00	
CASING CREWS AND LAYDOWN SER		8,500.00	0.00		8,500.00	
TOTAL:		8,500.00	0.00		8,500.00	
PROD CSG CEMENT AND SERVICE		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
MUD LOGGER		10,500.00	0.00		10,500.00	
TOTAL:		10,500.00	0.00		10,500.00	
MOB/DEMOB RIG		13,500.00	0.00		13,500.00	
TOTAL:		13,500.00	0.00		13,500.00	
VACUUM TRUCKING		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
DRILLPIPE INSPECTION		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
CONTRACT LABOR/SERVICES		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
MISC IDC/CONTINGENCY		68,250.00	0.00		68,250.00	
TOTAL:		68,250.00	0.00		68,250.00	
SURFACE CASING		13,000.00	0.00		13,000.00	
TOTAL:		13,000.00	0.00		13,000.00	
INTERMEDIATE CASING		24,000.00	0.00		24,000.00	
TOTAL:		24,000.00	0.00		24,000.00	
PRODUCTION/LINER CASING		201,000.00	0.00		201,000.00	
TOTAL:		201,000.00	0.00		201,000.00	
CONDUCTOR PIPE		20,000.00	0.00		20,000.00	

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.:	C20023	COMPANY	
AFE DESC:	MERAK 7 FEDERAL 11H	DIVISION	
DATE:	12/21/2020	OPERATOR:	
AFE TYPE:	DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET:	GROSS	LLC	
TOTAL:	20,000.00	0.00	20,000.00
WELLHEAD	19,000.00	0.00	19,000.00
TOTAL:	19,000.00	0.00	19,000.00
LINER HANGER/CASING ACCESSORY	25,000.00	0.00	25,000.00
TOTAL:	25,000.00	0.00	25,000.00
EQUIP RENT	44,000.00	0.00	44,000.00
TOTAL:	44,000.00	0.00	44,000.00
RENTALS: SURFACE IRON	65,000.00	0.00	65,000.00
TOTAL:	65,000.00	0.00	65,000.00
DRILLING RENTALS: SUBSURFACE	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
DRILL MUD & COMPL FLUID	275,000.00	0.00	275,000.00
TOTAL:	275,000.00	0.00	275,000.00
WELLSITE SUPERVISION	46,250.00	0.00	46,250.00
TOTAL:	46,250.00	0.00	46,250.00
COMPLETION CHEMICALS	110,000.00	0.00	110,000.00
TOTAL:	110,000.00	0.00	110,000.00
GROUND TRANSPORT	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
PUMPDOWN	25,000.00	0.00	25,000.00
TOTAL:	25,000.00	0.00	25,000.00
CASED HOLE WIRELINE	82,000.00	0.00	82,000.00
TOTAL:	82,000.00	0.00	82,000.00
FRAC PLUGS	44,000.00	0.00	44,000.00
TOTAL:	44,000.00	0.00	44,000.00
FRAC/FLUID SW DISPOSAL	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FRAC TANK RENTALS	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FLOWBACK	47,000.00	0.00	47,000.00
TOTAL:	47,000.00	0.00	47,000.00
STIMULATION AND PUMPING SERVIC	300,000.00	0.00	300,000.00
TOTAL:	300,000.00	0.00	300,000.00
PROPPANT	150,000.00	0.00	150,000.00
TOTAL:	150,000.00	0.00	150,000.00
FUEL, WATER & LUBE	120,000.00	0.00	120,000.00
TOTAL:	120,000.00	0.00	120,000.00
CASING CREWS AND LAYDOWN SERV	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
COMPLETION/WORKOVER RIG	51,500.00	0.00	51,500.00
TOTAL:	51,500.00	0.00	51,500.00
KILL TRUCK	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
COIL TUBING, SNUBBING, NITRO SVC	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
CONTRACT LABOR - ARTIFICIAL LIFT	17,500.00	0.00	17,500.00
TOTAL:	17,500.00	0.00	17,500.00
CONTRACT LABOR - ELECTRICAL/AU	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
CONTRACT LABOR - WELL LEVEL	15,000.00	0.00	15,000.00
TOTAL:	15,000.00	0.00	15,000.00
FACILITY PAD CONSTRUCTION	17,500.00	0.00	17,500.00
TOTAL:	17,500.00	0.00	17,500.00
MISC INTANGIBLE FACILITY COSTS	5,000.00	0.00	5,000.00
TOTAL:	5,000.00	0.00	5,000.00
CONTRACT LABOR - AUTOMATION	5,750.00	0.00	5,750.00
TOTAL:	5,750.00	0.00	5,750.00
EQUIPMENT RENTALS	3,750.00	0.00	3,750.00

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.:	C20023	COMPANY	
AFE DESC:	MERAK 7 FEDERAL 11H	DIVISION	
DATE:	12/21/2020	OPERATOR:	
AFE TYPE:	DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET:	GROSS	LLC	
TOTAL:	3,750.00	0.00	3,750.00
FREIGHT & HANDLING	3,750.00	0.00	3,750.00
TOTAL:	3,750.00	0.00	3,750.00
CONTRACT LABOR - ELECTRICAL	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FACILITY CONSTRUCTION LABOR	45,000.00	0.00	45,000.00
TOTAL:	45,000.00	0.00	45,000.00
BITS	1,000.00	0.00	1,000.00
TOTAL:	1,000.00	0.00	1,000.00
OVERHEAD POWER	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
PARTS & SUPPLIES - ARTIFICIAL LIFT	50,000.00	0.00	50,000.00
TOTAL:	50,000.00	0.00	50,000.00
PARTS & SUPPLIES - ELECTRICAL/AU	5,000.00	0.00	5,000.00
TOTAL:	5,000.00	0.00	5,000.00
PARTS & SUPPLIES - WELL LEVEL	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
TUBING	44,250.00	0.00	44,250.00
TOTAL:	44,250.00	0.00	44,250.00
TUBING HEAD/XMAS TREE	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
VESSELS	41,750.00	0.00	41,750.00
TOTAL:	41,750.00	0.00	41,750.00
ELECTRICAL - OVERHEAD & TRANSF	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
LACT	18,750.00	0.00	18,750.00
TOTAL:	18,750.00	0.00	18,750.00
AUTOMATION METERS, SENSORS, V/	23,750.00	0.00	23,750.00
TOTAL:	23,750.00	0.00	23,750.00
MISC FITTINGS & SUPPLIES	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
PUMPS & PUMP SUPPLIES	7,500.00	0.00	7,500.00
TOTAL:	7,500.00	0.00	7,500.00
MISC TANGIBLE FACILITY COSTS	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
TANKS (OIL & WATER)	43,750.00	0.00	43,750.00
TOTAL:	43,750.00	0.00	43,750.00
CONTAINMENT	15,000.00	0.00	15,000.00
TOTAL:	15,000.00	0.00	15,000.00
PIPING	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
ELECTRICAL - FACILITY	61,250.00	0.00	61,250.00
TOTAL:	61,250.00	0.00	61,250.00
TOTAL THIS AFE:	3,102,500.00	0.00	3,102,500.00

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.: C20024		COMPANY
AFE DESC: MERAK 7 FEDERAL 22H		DIVISION
DATE: 12/21/2020	OPERATOR:	
AFE TYPE: DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET: GROSS	LLC	

DETAIL OF EXPENDITURES	DRYHOLE	COMPLETION	EQUIP-TIE	SUPPLEMENT	TOTAL	ACTUAL
LOCATION - OPS		20,000.00	0.00		20,000.00	
TOTAL:		20,000.00	0.00		20,000.00	
LOCATION/DAMAGES-LAND		10,000.00	0.00		10,000.00	
TOTAL:		10,000.00	0.00		10,000.00	
TITLE WORK/OPINIONS - LAND		60,000.00	0.00		60,000.00	
TOTAL:		60,000.00	0.00		60,000.00	
SURVEY - LAND		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
DRILLING RENTALS: SURFACE		43,000.00	0.00		43,000.00	
TOTAL:		43,000.00	0.00		43,000.00	
DRILLING RENTALS: SUBSURFACE		25,000.00	0.00		25,000.00	
TOTAL:		25,000.00	0.00		25,000.00	
DRILL MUD & COMPL FLUID		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
WELLSITE SUPERVISION		33,000.00	0.00		33,000.00	
TOTAL:		33,000.00	0.00		33,000.00	
GROUND TRANSPORT		9,000.00	0.00		9,000.00	
TOTAL:		9,000.00	0.00		9,000.00	
CONTRACT DRILLING (DAY RATE/TUF		167,000.00	0.00		167,000.00	
TOTAL:		167,000.00	0.00		167,000.00	
DIRECTIONAL TOOLS AND SERVICES		111,000.00	0.00		111,000.00	
TOTAL:		111,000.00	0.00		111,000.00	
FLUID & CUTTINGS DISPOSAL		45,000.00	0.00		45,000.00	
TOTAL:		45,000.00	0.00		45,000.00	
FRAC TANK RENTALS		250.00	0.00		250.00	
TOTAL:		250.00	0.00		250.00	
BITS		30,500.00	0.00		30,500.00	
TOTAL:		30,500.00	0.00		30,500.00	
COMPANY LABOR		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
FUEL, WATER & LUBE		41,000.00	0.00		41,000.00	
TOTAL:		41,000.00	0.00		41,000.00	
CEMENT		35,000.00	0.00		35,000.00	
TOTAL:		35,000.00	0.00		35,000.00	
CASING CREWS AND LAYDOWN SER		8,500.00	0.00		8,500.00	
TOTAL:		8,500.00	0.00		8,500.00	
PROD CSG CEMENT AND SERVICE		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
MUD LOGGER		10,500.00	0.00		10,500.00	
TOTAL:		10,500.00	0.00		10,500.00	
MOB/DEMOB RIG		13,500.00	0.00		13,500.00	
TOTAL:		13,500.00	0.00		13,500.00	
VACUUM TRUCKING		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
DRILLPIPE INSPECTION		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
CONTRACT LABOR/SERVICES		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
MISC IDC/CONTINGENCY		68,250.00	0.00		68,250.00	
TOTAL:		68,250.00	0.00		68,250.00	
SURFACE CASING		13,000.00	0.00		13,000.00	
TOTAL:		13,000.00	0.00		13,000.00	
INTERMEDIATE CASING		24,000.00	0.00		24,000.00	
TOTAL:		24,000.00	0.00		24,000.00	
PRODUCTION/LINER CASING		201,000.00	0.00		201,000.00	
TOTAL:		201,000.00	0.00		201,000.00	
CONDUCTOR PIPE		20,000.00	0.00		20,000.00	

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.:	C20024	COMPANY	
AFE DESC:	MERAK 7 FEDERAL 22H	DIVISION	
DATE:	12/21/2020	OPERATOR:	
AFE TYPE:	DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET:	GROSS	LLC	
TOTAL:	20,000.00	0.00	20,000.00
WELLHEAD	19,000.00	0.00	19,000.00
TOTAL:	19,000.00	0.00	19,000.00
LINER HANGER/CASING ACCESSORY	25,000.00	0.00	25,000.00
TOTAL:	25,000.00	0.00	25,000.00
EQUIP RENT	44,000.00	0.00	44,000.00
TOTAL:	44,000.00	0.00	44,000.00
RENTALS: SURFACE IRON	65,000.00	0.00	65,000.00
TOTAL:	65,000.00	0.00	65,000.00
DRILLING RENTALS: SUBSURFACE	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
DRILL MUD & COMPL FLUID	275,000.00	0.00	275,000.00
TOTAL:	275,000.00	0.00	275,000.00
WELLSITE SUPERVISION	46,250.00	0.00	46,250.00
TOTAL:	46,250.00	0.00	46,250.00
COMPLETION CHEMICALS	110,000.00	0.00	110,000.00
TOTAL:	110,000.00	0.00	110,000.00
GROUND TRANSPORT	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
PUMPDOWN	25,000.00	0.00	25,000.00
TOTAL:	25,000.00	0.00	25,000.00
CASED HOLE WIRELINE	82,000.00	0.00	82,000.00
TOTAL:	82,000.00	0.00	82,000.00
FRAC PLUGS	44,000.00	0.00	44,000.00
TOTAL:	44,000.00	0.00	44,000.00
FRAC/FLUID SW DISPOSAL	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FRAC TANK RENTALS	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FLOWBACK	47,000.00	0.00	47,000.00
TOTAL:	47,000.00	0.00	47,000.00
STIMULATION AND PUMPING SERVIC	300,000.00	0.00	300,000.00
TOTAL:	300,000.00	0.00	300,000.00
PROPPANT	150,000.00	0.00	150,000.00
TOTAL:	150,000.00	0.00	150,000.00
FUEL, WATER & LUBE	120,000.00	0.00	120,000.00
TOTAL:	120,000.00	0.00	120,000.00
CASING CREWS AND LAYDOWN SER	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
COMPLETION/WORKOVER RIG	51,500.00	0.00	51,500.00
TOTAL:	51,500.00	0.00	51,500.00
KILL TRUCK	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
COIL TUBING, SNUBBING, NITRO SVC	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
CONTRACT LABOR - ARTIFICIAL LIFT	17,500.00	0.00	17,500.00
TOTAL:	17,500.00	0.00	17,500.00
CONTRACT LABOR - ELECTRICAL/AU	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
CONTRACT LABOR - WELL LEVEL	15,000.00	0.00	15,000.00
TOTAL:	15,000.00	0.00	15,000.00
FACILITY PAD CONSTRUCTION	17,500.00	0.00	17,500.00
TOTAL:	17,500.00	0.00	17,500.00
MISC INTANGIBLE FACILITY COSTS	5,000.00	0.00	5,000.00
TOTAL:	5,000.00	0.00	5,000.00
CONTRACT LABOR - AUTOMATION	5,750.00	0.00	5,750.00
TOTAL:	5,750.00	0.00	5,750.00
EQUIPMENT RENTALS	3,750.00	0.00	3,750.00

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.: C20024		COMPANY	
AFE DESC: MERAK 7 FEDERAL 22H		DIVISION	
DATE: 12/21/2020		OPERATOR:	
AFE TYPE: DRILL COMPLETE AND EQUIP		102 - SEP PERMIAN,	
GROSS/NET: GROSS		LLC	
TOTAL:	3,750.00	0.00	3,750.00
FREIGHT & HANDLING	3,750.00	0.00	3,750.00
TOTAL:	3,750.00	0.00	3,750.00
CONTRACT LABOR - ELECTRICAL	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FACILITY CONSTRUCTION LABOR	45,000.00	0.00	45,000.00
TOTAL:	45,000.00	0.00	45,000.00
BITS	1,000.00	0.00	1,000.00
TOTAL:	1,000.00	0.00	1,000.00
OVERHEAD POWER	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
PARTS & SUPPLIES - ARTIFICIAL LIFT	50,000.00	0.00	50,000.00
TOTAL:	50,000.00	0.00	50,000.00
PARTS & SUPPLIES - ELECTRICAL/AU	5,000.00	0.00	5,000.00
TOTAL:	5,000.00	0.00	5,000.00
PARTS & SUPPLIES - WELL LEVEL	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
TUBING	44,250.00	0.00	44,250.00
TOTAL:	44,250.00	0.00	44,250.00
TUBING HEAD/XMAS TREE	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
VESSELS	41,750.00	0.00	41,750.00
TOTAL:	41,750.00	0.00	41,750.00
ELECTRICAL - OVERHEAD & TRANSF	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
LACT	18,750.00	0.00	18,750.00
TOTAL:	18,750.00	0.00	18,750.00
AUTOMATION METERS, SENSORS, V/	23,750.00	0.00	23,750.00
TOTAL:	23,750.00	0.00	23,750.00
MISC FITTINGS & SUPPLIES	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
PUMPS & PUMP SUPPLIES	7,500.00	0.00	7,500.00
TOTAL:	7,500.00	0.00	7,500.00
MISC TANGIBLE FACILITY COSTS	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
TANKS (OIL & WATER)	43,750.00	0.00	43,750.00
TOTAL:	43,750.00	0.00	43,750.00
CONTAINMENT	15,000.00	0.00	15,000.00
TOTAL:	15,000.00	0.00	15,000.00
PIPING	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
ELECTRICAL - FACILITY	61,250.00	0.00	61,250.00
TOTAL:	61,250.00	0.00	61,250.00
TOTAL THIS AFE:	3,102,500.00	0.00	3,102,500.00

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.:	C20025	COMPANY
AFE DESC:	MERAK 7 FEDERAL 51H	DIVISION
DATE:	12/21/2020	OPERATOR:
AFE TYPE:	DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN, LLC
GROSS/NET:	GROSS	

DETAIL OF EXPENDITURES	DRYHOLE	COMPLETION	EQUIP-TIE	SUPPLEMENT	TOTAL	ACTUAL
LOCATION - OPS		20,000.00	0.00		20,000.00	
TOTAL:		20,000.00	0.00		20,000.00	
LOCATION/DAMAGES-LAND		10,000.00	0.00		10,000.00	
TOTAL:		10,000.00	0.00		10,000.00	
TITLE WORK/OPINIONS - LAND		60,000.00	0.00		60,000.00	
TOTAL:		60,000.00	0.00		60,000.00	
SURVEY - LAND		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
DRILLING RENTALS: SURFACE		51,000.00	0.00		51,000.00	
TOTAL:		51,000.00	0.00		51,000.00	
DRILLING RENTALS: SUBSURFACE		25,000.00	0.00		25,000.00	
TOTAL:		25,000.00	0.00		25,000.00	
DRILL MUD & COMPL FLUID		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
WELLSITE SUPERVISION		38,750.00	0.00		38,750.00	
TOTAL:		38,750.00	0.00		38,750.00	
GROUND TRANSPORT		9,000.00	0.00		9,000.00	
TOTAL:		9,000.00	0.00		9,000.00	
CONTRACT DRILLING (DAY RATE/TUF		191,000.00	0.00		191,000.00	
TOTAL:		191,000.00	0.00		191,000.00	
DIRECTIONAL TOOLS AND SERVICES		129,000.00	0.00		129,000.00	
TOTAL:		129,000.00	0.00		129,000.00	
FLUID & CUTTINGS DISPOSAL		45,000.00	0.00		45,000.00	
TOTAL:		45,000.00	0.00		45,000.00	
FRAC TANK RENTALS		250.00	0.00		250.00	
TOTAL:		250.00	0.00		250.00	
BITS		44,000.00	0.00		44,000.00	
TOTAL:		44,000.00	0.00		44,000.00	
COMPANY LABOR		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
FUEL, WATER & LUBE		48,500.00	0.00		48,500.00	
TOTAL:		48,500.00	0.00		48,500.00	
CEMENT		35,000.00	0.00		35,000.00	
TOTAL:		35,000.00	0.00		35,000.00	
CASING CREWS AND LAYDOWN SER		8,500.00	0.00		8,500.00	
TOTAL:		8,500.00	0.00		8,500.00	
PROD CSG CEMENT AND SERVICE		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
MUD LOGGER		12,500.00	0.00		12,500.00	
TOTAL:		12,500.00	0.00		12,500.00	
MOB/DEMOB RIG		13,500.00	0.00		13,500.00	
TOTAL:		13,500.00	0.00		13,500.00	
VACUUM TRUCKING		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
DRILLPIPE INSPECTION		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
CONTRACT LABOR/SERVICES		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
MISC IDC/CONTINGENCY		78,250.00	0.00		78,250.00	
TOTAL:		78,250.00	0.00		78,250.00	
SURFACE CASING		13,000.00	0.00		13,000.00	
TOTAL:		13,000.00	0.00		13,000.00	
INTERMEDIATE CASING		24,000.00	0.00		24,000.00	
TOTAL:		24,000.00	0.00		24,000.00	
PRODUCTION/LINER CASING		205,000.00	0.00		205,000.00	
TOTAL:		205,000.00	0.00		205,000.00	
CONDUCTOR PIPE		20,000.00	0.00		20,000.00	

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.:	C20025	COMPANY	
AFE DESC:	MERAK 7 FEDERAL 51H	DIVISION	
DATE:	12/21/2020	OPERATOR:	
AFE TYPE:	DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET:	GROSS	LLC	
TOTAL:	20,000.00	0.00	20,000.00
WELLHEAD	19,000.00	0.00	19,000.00
TOTAL:	19,000.00	0.00	19,000.00
LINER HANGER/CASING ACCESSORY	25,000.00	0.00	25,000.00
TOTAL:	25,000.00	0.00	25,000.00
EQUIP RENT	44,000.00	0.00	44,000.00
TOTAL:	44,000.00	0.00	44,000.00
RENTALS: SURFACE IRON	65,000.00	0.00	65,000.00
TOTAL:	65,000.00	0.00	65,000.00
DRILLING RENTALS: SUBSURFACE	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
DRILL MUD & COMPL FLUID	275,000.00	0.00	275,000.00
TOTAL:	275,000.00	0.00	275,000.00
WELLSITE SUPERVISION	46,250.00	0.00	46,250.00
TOTAL:	46,250.00	0.00	46,250.00
COMPLETION CHEMICALS	110,000.00	0.00	110,000.00
TOTAL:	110,000.00	0.00	110,000.00
GROUND TRANSPORT	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
PUMPDOWN	25,000.00	0.00	25,000.00
TOTAL:	25,000.00	0.00	25,000.00
CASED HOLE WIRELINE	82,000.00	0.00	82,000.00
TOTAL:	82,000.00	0.00	82,000.00
FRAC PLUGS	44,000.00	0.00	44,000.00
TOTAL:	44,000.00	0.00	44,000.00
FRAC/FLUID SW DISPOSAL	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FRAC TANK RENTALS	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FLOWBACK	47,000.00	0.00	47,000.00
TOTAL:	47,000.00	0.00	47,000.00
STIMULATION AND PUMPING SERVIC	300,000.00	0.00	300,000.00
TOTAL:	300,000.00	0.00	300,000.00
PROPPANT	150,000.00	0.00	150,000.00
TOTAL:	150,000.00	0.00	150,000.00
FUEL, WATER & LUBE	120,000.00	0.00	120,000.00
TOTAL:	120,000.00	0.00	120,000.00
CASING CREWS AND LAYDOWN SERV	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
COMPLETION/WORKOVER RIG	51,500.00	0.00	51,500.00
TOTAL:	51,500.00	0.00	51,500.00
KILL TRUCK	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
COIL TUBING, SNUBBING, NITRO SVC	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
CONTRACT LABOR - ARTIFICIAL LIFT	17,500.00	0.00	17,500.00
TOTAL:	17,500.00	0.00	17,500.00
CONTRACT LABOR - ELECTRICAL/AU"	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
CONTRACT LABOR - WELL LEVEL	15,000.00	0.00	15,000.00
TOTAL:	15,000.00	0.00	15,000.00
FACILITY PAD CONSTRUCTION	17,500.00	0.00	17,500.00
TOTAL:	17,500.00	0.00	17,500.00
MISC INTANGIBLE FACILITY COSTS	5,000.00	0.00	5,000.00
TOTAL:	5,000.00	0.00	5,000.00
CONTRACT LABOR - AUTOMATION	5,750.00	0.00	5,750.00
TOTAL:	5,750.00	0.00	5,750.00
EQUIPMENT RENTALS	3,750.00	0.00	3,750.00

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.:	C20025	COMPANY	
AFE DESC:	MERAK 7 FEDERAL 51H	DIVISION	
DATE:	12/21/2020	OPERATOR:	
AFE TYPE:	DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET:	GROSS	LLC	
TOTAL:	3,750.00	0.00	3,750.00
FREIGHT & HANDLING	3,750.00	0.00	3,750.00
TOTAL:	3,750.00	0.00	3,750.00
CONTRACT LABOR - ELECTRICAL	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FACILITY CONSTRUCTION LABOR	45,000.00	0.00	45,000.00
TOTAL:	45,000.00	0.00	45,000.00
BITS	1,000.00	0.00	1,000.00
TOTAL:	1,000.00	0.00	1,000.00
OVERHEAD POWER	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
PARTS & SUPPLIES - ARTIFICIAL LIFT	50,000.00	0.00	50,000.00
TOTAL:	50,000.00	0.00	50,000.00
PARTS & SUPPLIES - ELECTRICAL/AU	5,000.00	0.00	5,000.00
TOTAL:	5,000.00	0.00	5,000.00
PARTS & SUPPLIES - WELL LEVEL	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
TUBING	44,250.00	0.00	44,250.00
TOTAL:	44,250.00	0.00	44,250.00
TUBING HEAD/XMAS TREE	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
VESSELS	41,750.00	0.00	41,750.00
TOTAL:	41,750.00	0.00	41,750.00
ELECTRICAL - OVERHEAD & TRANSF	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
LACT	18,750.00	0.00	18,750.00
TOTAL:	18,750.00	0.00	18,750.00
AUTOMATION METERS, SENSORS, V/I	23,750.00	0.00	23,750.00
TOTAL:	23,750.00	0.00	23,750.00
MISC FITTINGS & SUPPLIES	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
PUMPS & PUMP SUPPLIES	7,500.00	0.00	7,500.00
TOTAL:	7,500.00	0.00	7,500.00
MISC TANGIBLE FACILITY COSTS	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
TANKS (OIL & WATER)	43,750.00	0.00	43,750.00
TOTAL:	43,750.00	0.00	43,750.00
CONTAINMENT	15,000.00	0.00	15,000.00
TOTAL:	15,000.00	0.00	15,000.00
PIPING	12,500.00	0.00	12,500.00
TOTAL:	12,500.00	0.00	12,500.00
ELECTRICAL - FACILITY	61,250.00	0.00	61,250.00
TOTAL:	61,250.00	0.00	61,250.00
TOTAL THIS AFE:	3,195,250.00	0.00	3,195,250.00

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.: C20026		COMPANY
AFE DESC: MERAK 7 FEDERAL 52H		DIVISION
DATE: 12/21/2020	OPERATOR:	
AFE TYPE: DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET: GROSS	LLC	

DETAIL OF EXPENDITURES	DRYHOLE	COMPLETION	EQUIP-TIE	SUPPLEMENT	TOTAL	ACTUAL
LOCATION - OPS		20,000.00	0.00		20,000.00	
TOTAL:		20,000.00	0.00		20,000.00	
LOCATION/DAMAGES-LAND		10,000.00	0.00		10,000.00	
TOTAL:		10,000.00	0.00		10,000.00	
TITLE WORK/OPINIONS - LAND		60,000.00	0.00		60,000.00	
TOTAL:		60,000.00	0.00		60,000.00	
SURVEY - LAND		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
DRILLING RENTALS: SURFACE		51,000.00	0.00		51,000.00	
TOTAL:		51,000.00	0.00		51,000.00	
DRILLING RENTALS: SUBSURFACE		25,000.00	0.00		25,000.00	
TOTAL:		25,000.00	0.00		25,000.00	
DRILL MUD & COMPL FLUID		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
WELLSITE SUPERVISION		38,750.00	0.00		38,750.00	
TOTAL:		38,750.00	0.00		38,750.00	
GROUND TRANSPORT		9,000.00	0.00		9,000.00	
TOTAL:		9,000.00	0.00		9,000.00	
CONTRACT DRILLING (DAY RATE/TUF)		191,000.00	0.00		191,000.00	
TOTAL:		191,000.00	0.00		191,000.00	
DIRECTIONAL TOOLS AND SERVICES		129,000.00	0.00		129,000.00	
TOTAL:		129,000.00	0.00		129,000.00	
FLUID & CUTTINGS DISPOSAL		45,000.00	0.00		45,000.00	
TOTAL:		45,000.00	0.00		45,000.00	
FRAC TANK RENTALS		250.00	0.00		250.00	
TOTAL:		250.00	0.00		250.00	
BITS		44,000.00	0.00		44,000.00	
TOTAL:		44,000.00	0.00		44,000.00	
COMPANY LABOR		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
FUEL, WATER & LUBE		48,500.00	0.00		48,500.00	
TOTAL:		48,500.00	0.00		48,500.00	
CEMENT		35,000.00	0.00		35,000.00	
TOTAL:		35,000.00	0.00		35,000.00	
CASING CREWS AND LAYDOWN SER		8,500.00	0.00		8,500.00	
TOTAL:		8,500.00	0.00		8,500.00	
PROD CSG CEMENT AND SERVICE		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
MUD LOGGER		12,500.00	0.00		12,500.00	
TOTAL:		12,500.00	0.00		12,500.00	
MOB/DEMOB RIG		13,500.00	0.00		13,500.00	
TOTAL:		13,500.00	0.00		13,500.00	
VACUUM TRUCKING		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
DRILLPIPE INSPECTION		5,000.00	0.00		5,000.00	
TOTAL:		5,000.00	0.00		5,000.00	
CONTRACT LABOR/SERVICES		30,000.00	0.00		30,000.00	
TOTAL:		30,000.00	0.00		30,000.00	
MISC IDC/CONTINGENCY		78,250.00	0.00		78,250.00	
TOTAL:		78,250.00	0.00		78,250.00	
SURFACE CASING		13,000.00	0.00		13,000.00	
TOTAL:		13,000.00	0.00		13,000.00	
INTERMEDIATE CASING		24,000.00	0.00		24,000.00	
TOTAL:		24,000.00	0.00		24,000.00	
PRODUCTION/LINER CASING		205,000.00	0.00		205,000.00	
TOTAL:		205,000.00	0.00		205,000.00	
CONDUCTOR PIPE		20,000.00	0.00		20,000.00	

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO.:	C20026	COMPANY	
AFE DESC:	MERAK 7 FEDERAL 52H	DIVISION	
DATE:	12/21/2020	OPERATOR:	
AFE TYPE:	DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET:	GROSS	LLC	
TOTAL:	20,000.00	0.00	20,000.00
WELLHEAD	19,000.00	0.00	19,000.00
TOTAL:	19,000.00	0.00	19,000.00
LINER HANGER/CASING ACCESSORY	25,000.00	0.00	25,000.00
TOTAL:	25,000.00	0.00	25,000.00
EQUIP RENT	44,000.00	0.00	44,000.00
TOTAL:	44,000.00	0.00	44,000.00
RENTALS: SURFACE IRON	65,000.00	0.00	65,000.00
TOTAL:	65,000.00	0.00	65,000.00
DRILLING RENTALS: SUBSURFACE	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
DRILL MUD & COMPL FLUID	275,000.00	0.00	275,000.00
TOTAL:	275,000.00	0.00	275,000.00
WELLSITE SUPERVISION	46,250.00	0.00	46,250.00
TOTAL:	46,250.00	0.00	46,250.00
COMPLETION CHEMICALS	110,000.00	0.00	110,000.00
TOTAL:	110,000.00	0.00	110,000.00
GROUND TRANSPORT	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
PUMPDOWN	25,000.00	0.00	25,000.00
TOTAL:	25,000.00	0.00	25,000.00
CASED HOLE WIRELINE	82,000.00	0.00	82,000.00
TOTAL:	82,000.00	0.00	82,000.00
FRAC PLUGS	44,000.00	0.00	44,000.00
TOTAL:	44,000.00	0.00	44,000.00
FRAC/FLUID SW DISPOSAL	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FRAC TANK RENTALS	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
FLOWBACK	47,000.00	0.00	47,000.00
TOTAL:	47,000.00	0.00	47,000.00
STIMULATION AND PUMPING SERVIC	300,000.00	0.00	300,000.00
TOTAL:	300,000.00	0.00	300,000.00
PROPPANT	150,000.00	0.00	150,000.00
TOTAL:	150,000.00	0.00	150,000.00
FUEL, WATER & LUBE	120,000.00	0.00	120,000.00
TOTAL:	120,000.00	0.00	120,000.00
CASING CREWS AND LAYDOWN SERV	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
COMPLETION/WORKOVER RIG	51,500.00	0.00	51,500.00
TOTAL:	51,500.00	0.00	51,500.00
KILL TRUCK	2,500.00	0.00	2,500.00
TOTAL:	2,500.00	0.00	2,500.00
COIL TUBING, SNUBBING, NITRO SVC	10,000.00	0.00	10,000.00
TOTAL:	10,000.00	0.00	10,000.00
CONTRACT LABOR - ARTIFICIAL LIFT	17,500.00	0.00	17,500.00
TOTAL:	17,500.00	0.00	17,500.00
CONTRACT LABOR - ELECTRICAL/AU	20,000.00	0.00	20,000.00
TOTAL:	20,000.00	0.00	20,000.00
CONTRACT LABOR - WELL LEVEL	15,000.00	0.00	15,000.00
TOTAL:	15,000.00	0.00	15,000.00
FACILITY PAD CONSTRUCTION	17,500.00	0.00	17,500.00
TOTAL:	17,500.00	0.00	17,500.00
MISC INTANGIBLE FACILITY COSTS	5,000.00	0.00	5,000.00
TOTAL:	5,000.00	0.00	5,000.00
CONTRACT LABOR - AUTOMATION	5,750.00	0.00	5,750.00
TOTAL:	5,750.00	0.00	5,750.00
EQUIPMENT RENTALS	3,750.00	0.00	3,750.00

SEP Permian LLC
AUTHORITY FOR EXPENDITURE

AFE NO:	C20026	COMPANY	
AFE DESC:	MERAK 7 FEDERAL 52H	DIVISION	
DATE:	12/21/2020	OPERATOR:	
AFE TYPE:	DRILL COMPLETE AND EQUIP	102 - SEP PERMIAN,	
GROSS/NET:	GROSS	LLC	
TOTAL:			
	3,750.00	0.00	3,750.00
FREIGHT & HANDLING	3,750.00	0.00	3,750.00
TOTAL:			
	3,750.00	0.00	3,750.00
CONTRACT LABOR - ELECTRICAL	10,000.00	0.00	10,000.00
TOTAL:			
	10,000.00	0.00	10,000.00
FACILITY CONSTRUCTION LABOR	45,000.00	0.00	45,000.00
TOTAL:			
	45,000.00	0.00	45,000.00
BITS	1,000.00	0.00	1,000.00
TOTAL:			
	1,000.00	0.00	1,000.00
OVERHEAD POWER	12,500.00	0.00	12,500.00
TOTAL:			
	12,500.00	0.00	12,500.00
PARTS & SUPPLIES - ARTIFICIAL LIFT	50,000.00	0.00	50,000.00
TOTAL:			
	50,000.00	0.00	50,000.00
PARTS & SUPPLIES - ELECTRICAL/AU	5,000.00	0.00	5,000.00
TOTAL:			
	5,000.00	0.00	5,000.00
PARTS & SUPPLIES - WELL LEVEL	20,000.00	0.00	20,000.00
TOTAL:			
	20,000.00	0.00	20,000.00
TUBING	44,250.00	0.00	44,250.00
TOTAL:			
	44,250.00	0.00	44,250.00
TUBING HEAD/XMAS TREE	10,000.00	0.00	10,000.00
TOTAL:			
	10,000.00	0.00	10,000.00
VESSELS	41,750.00	0.00	41,750.00
TOTAL:			
	41,750.00	0.00	41,750.00
ELECTRICAL - OVERHEAD & TRANSF	12,500.00	0.00	12,500.00
TOTAL:			
	12,500.00	0.00	12,500.00
LACT	18,750.00	0.00	18,750.00
TOTAL:			
	18,750.00	0.00	18,750.00
AUTOMATION METERS, SENSORS, V/I	23,750.00	0.00	23,750.00
TOTAL:			
	23,750.00	0.00	23,750.00
MISC FITTINGS & SUPPLIES	20,000.00	0.00	20,000.00
TOTAL:			
	20,000.00	0.00	20,000.00
PUMPS & PUMP SUPPLIES	7,500.00	0.00	7,500.00
TOTAL:			
	7,500.00	0.00	7,500.00
MISC TANGIBLE FACILITY COSTS	2,500.00	0.00	2,500.00
TOTAL:			
	2,500.00	0.00	2,500.00
TANKS (OIL & WATER)	43,750.00	0.00	43,750.00
TOTAL:			
	43,750.00	0.00	43,750.00
CONTAINMENT	15,000.00	0.00	15,000.00
TOTAL:			
	15,000.00	0.00	15,000.00
PIPING	12,500.00	0.00	12,500.00
TOTAL:			
	12,500.00	0.00	12,500.00
ELECTRICAL - FACILITY	61,250.00	0.00	61,250.00
TOTAL:			
	61,250.00	0.00	61,250.00
TOTAL THIS AFE:			
	3,195,250.00	0.00	3,195,250.00

Communication Timeline

December 22, 2020 – Initial proposal sent to ConocoPhillips Company and Southwest Royalties, Inc. via Certified Mail for the Merak 7 Federal 10H, 11H, 22H, 51H and 52H, Section 7-17S-30E, Eddy County, New Mexico.

January through April 2021 – Multiple conversations with ConocoPhillips Company regarding their interest and SEP plan of development. Granted ConocoPhillips an extension to March 3, 2021 to make an election on the initial proposal. As of April 14, 2021, we have not received an election response, entered into a voluntary agreement, or come to terms on assignment options.

January through April 2021 – Made several attempts to contact Southwest Royalties, Inc. to discuss proposal.

SPUR ENERGY
PARTNERS, LLC
Case No. 21676

Exhibit A-5



HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE, NEW MEXICO 87504

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

WRITER:

Dana S. Hardy, Partner
dhardy@hinklelawfirm.com

February 2, 2021

VIA CERTIFIED MAIL

TO ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

Re: Spur Energy/New Mexico Oil Conservation Division Application,
NMOCD Case No. 21676

Sir/Madam:

Enclosed is a copy of an application that Spur Energy Partners, LLC ("Spur") has filed with the New Mexico Oil Conservation Division ("the Division").

Spur seeks an order pooling all uncommitted mineral interests in the Yeso formation (from the stratigraphic equivalent of 4,225' MD to 5,000' MD as observed on the Anderson-Federal 1 well Schlumberger Sidewall Neutron Porosity Log (API No. 30-015-20565)) in a 315-acre, more or less, standard (proximity tract) horizontal spacing unit comprised of the S/2 of Section 7, Township 17 South, Range 30 East in Eddy County, New Mexico.

During the COVID-19 Public Health Emergency, state buildings are closed to the public and hearings will be conducted remotely. The hearing will be conducted on March 4, 2021 beginning at 8:15 a.m. To participate in the electronic hearing, see the instructions posted on the docket for the hearing date: <http://www.emnrd.state.nm.us/OCD/hearings.html>. You are not required to attend the hearing, but as an owner of an interest that may be affected by Spur's application, you may appear at the hearing and present testimony. If you do not appear at that time and become a party of record, you 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, February 25, 2021. The Pre-Hearing Statement must be filed with the Division 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.

**SPUR ENERGY
PARTNERS, LLC
Case No. 21676**

Exhibit A-6

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

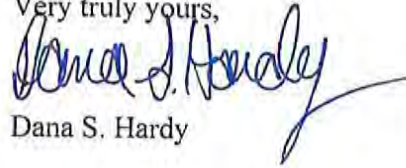
PO BOX 2068
SANTA FE, NEW MEXICO 87504
505-982-4554
(FAX) 505-982-8623

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

February 2, 2021
Page 2

Thank you for your attention to this matter.

Very truly yours,

A handwritten signature in blue ink, appearing to read "Dana S. Hardy", with a long, sweeping horizontal line extending to the right.

Dana S. Hardy

Enclosure

7020 0640 0000 1403 8773

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	\$
Postage	\$
Total Postage and Fees	\$
Sent To: Aaron Anderson, SSI	
Street: 30777 Rancho Cal Road, Unit	
City: 892391	
City: Temecula, California 92591	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

7020 0640 0000 1403 8810

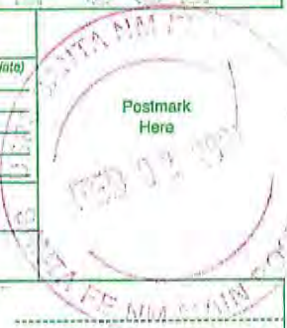
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To: James Chester Belcher, Jr., SSI	
Street: 524 Pittman Street	
City, State: Richardson, Texas 75081-4278	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

7020 0640 0000 1403 8827

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	\$
Postage	\$
Total Postage and Fees	\$
Sent To: David Renee Carson, SSI	
Street and P.O. Box: P.O. Box 3068	
City, State: Taos, New Mexico 87571-3068	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

7020 0640 0000 1403 8766

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	\$
Postage	\$
Total Postage and Fees	\$
Send to: ERICK ANDERSON, SSP 2401 Wessington Way Alexandria, Virginia 22309	
PS Form 3800, April 2015 PSN 7430-02-000-9047 See Reverse for Instructions	



SENDER	COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☐ Complete items 1, 2, and 3. ☐ Print name and address on the reverse so that it can be returned to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits.	1. Article Addressed to: ERICK ANDERSON, SSP 2401 Wessington Way Alexandria, Virginia 22309	A. Signature ☒ <i>ERICK ANDERSON</i> ☐ 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
9590 9402 5941 0062 9630 23 Article Number (Transfer from service label) 7020 0640 0000 1403 8766	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

7020 0640 0000 0143 9583

CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL	
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	\$
Postage	\$
Total Postage and Fees	\$
Sent To	
John Bedingfield, SSP	
Street	1002 W. Dallas Avenue
City, State	Artesia, New Mexico 88210-1806
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: John Bedingfield, SSP 1002 W. Dallas Avenue Artesia, New Mexico 88210-1806 2. Article Number (Transfer from service label) 7020 0640 0000 0143 9583	A. Signature X <i>John Bedingfield</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☒ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)

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 \$

Postage

\$

Total Postage and Fees

\$

Sent To: Breck Minerals, LP
Via: P.O. Box 911
City: Breckenridge, Texas 76424

City: Breckenridge, Texas 76424

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

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
Breck Minerals, LP
P.O. Box 911
Breckenridge, Texas 76424



9590 9402 5941 0062 9630 30

2. Article Number (transfer from service label)

7020-0640-0000-1403-8759

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Christie Speller

☒ Agent

☐ Addressee

B. Received by (Printed Name)

C-19 W.W. Adcox

C. Date of Delivery

02-09-21

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

If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☒ Return Receipt for Merchandise

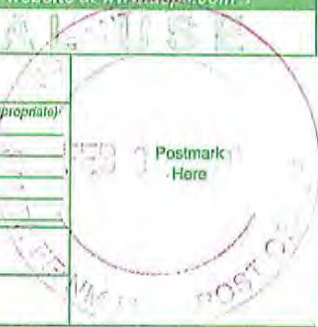
☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7020 0640 0000 1403 8179

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	\$
Postage	\$
Total Postage and Fees	\$
Sent To: <u>Gayle Angela Carson t/k/a Gayle</u> <u>Angela Carson Carpenter, SSP</u> Street and: <u>619 Rolling Mill Drive</u> City, State: <u>Sugar Land, Texas 77498-3075</u> <u>Edward Louis Carson, Jr. SSN</u>	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☒ <u>Angela Carson</u> ☐ Agent ☐ Addressee B. Received by (Printed Name) <u>Gayle Angela Carson</u> C. Date of Delivery <u>2-10-11</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No																
1. Article Addressed to: <u>Gayle Angela Carson t/k/a Gayle Angela Carson Carpenter, SSP</u> <u>619 Rolling Mill Drive</u> <u>Sugar Land, Texas 77498-3075</u>	3. Service Type <table border="0"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☒ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> <tr> <td>☐ Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	☐ 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 (over \$500)	
☐ 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 (over \$500)																	
2. Article Number (Transfer from service label) <u>7020 0640 0000 1403 8179</u>																	



7020 0640 0000 1403 8186

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	\$
Postage	\$
Total Postage and Fees	\$
Sent to: Edward Louis Carson, Jr., SSP	
7411 Sapphire Lane	
Oklahoma City, OK 73150-8028	
City: Tulsa Post Office	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for instructions	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature X <u>CARSON</u> ☒ Agent ☐ Addressee B. Received by (Printed Name) <u>DRIT</u> C. Date of Delivery <u>2/8/21</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No																
1. Article Addressed to: Edward Louis Carson, Jr., SSP 7411 Sapphire Lane Oklahoma City, Oklahoma 73150-8028	3. Service Type <table border="0"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☐ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☒ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> <tr> <td>☐ Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	☐ 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 (over \$500)	
☐ 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 (over \$500)																	
2. Article Number (Transfer from service label) 7020 0640 0000 1403 8186																	



7020 0640 0000 0143 9675

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

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 \$

Postage

\$

Total Postage and Fees

\$

Sent To: Nancy Helen Castillo, SSP

Street: 1108 Dahlia Court
Calexico, California 92231

City, S

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

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Nancy Helen Castillo, SSP
1108 Dahlia Court
Calexico, California 92231



9590 9402 5751 0003 4070 28

2. Article Number (Transfer from service label)

7020 0640 0000 0143 9675

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X N. H. Castillo☐ Agent☐ Addressee

B. Received by (Printed Name)

AN HONOR CL

C. Date of Delivery

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
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

7020 0640 0000 0143 1273

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 \$

Postage

\$

Total Postage and Fees

\$

Sent To

Nancy Helen Castillo, SSP

Street

1108 Dahlia Court

City, State, ZIP+4®

Calexico, California 92231

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

See Reverse for Instructions

Postmark
Here

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:

Nancy Helen Castillo, SSP
1108 Dahlia Court
Calexico, California 92231



9590 9402 5751 0003 4066 70

2. Article Number (Transfer from service label)

7020 0640 0000 0143 1273

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X N. Castillo

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Ann Martinez

C. Date of Delivery

7/28/11

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes

☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☒ Return Receipt for Merchandise

☐ Signature Confirmation

☐ Signature Confirmation Restricted Delivery

Domestic Return

7020 0640 0000 1403 8223

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	\$
Postage	\$
Total Postage and Fees	\$
Sent to	
Street COG Operating LLC	
600 W. Illinois Avenue	
City, State	Midland, Texas 79701
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☐ Agent ☒ Addressee B. Received by (Printed Name) C. Date of Delivery Christy Murry 2-8-21 D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:
1. Article Addressed to: COG Operating LLC 600 W. Illinois Avenue Midland, Texas 79701	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500) ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
2. Article Number (Transfer from service label) 7020 0640 0000 1403 8223	
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt

7020 0640 0000 0143 9699

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	\$
Postage	\$
Total Postage and Fees	\$
Sent To	Concho Oil & Gas LLC
Street or	600 W. Illinois Avenue
City, State, ZIP+4®	Midland, Texas 79701
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Concho Oil & Gas LLC 600 W. Illinois Avenue Midland, Texas 79701	A. Signature X <i>C. Murry</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Christy Murry</i> C. Date of Delivery <i>2-8-21</i> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:
2. Article Number (Transfer from service label) 7020 0640 0000 0143 9699	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 (over \$500)



9590 9402 5751 0003 4066 32

7020 0640 0000 0303 0771

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	\$
Postage	\$
Total Postage and Fees	\$
Service To Attn: Wyn E. McCubbin 925 N. Eldridge Pkwy. Houston, TX 77079	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

ConocoPhillips Company
Attn: Wyn E. McCubbin
925 N. Eldridge Pkwy.
Houston, TX 77079



9590 9402 5941 0062 9628 66

2. Article Number (Transfer from service label)

7020 0640 0000 0303 0771

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Jackie*

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Jackie Twine

C. Date of Delivery

2/8/14

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICE	
Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fees as appropriate)	
☐ Return Receipt (hardcopy)	\$ _____
☐ Return Receipt (electronic)	\$ _____
☐ Certified Mail Restricted Delivery	\$ _____
☐ Adult Signature Required	\$ _____
☐ Adult Signature Restricted Delivery	\$ _____
Postage	
\$	
Total Price	
\$	
Sent To	
Street or	
City, St	
PS Form	See Reverse for Instructions

INKLE SHANOR LLP
ATTORNEYS AT LAW
POST OFFICE BOX 2068
SANTA FE, NEW MEXICO 87504

CERTIFIED MAIL®

ALBUQUERQUE NM 870
2 FEB 2021 PM 3 L



UNITED STATES POSTAGE
02 1P
0000913767
MAILED FROM ZIP CODE

7020 0640 0000 0143 9576

First National Bank of Artesia, NM
Agent for Richard and Jean Bentwood Living Trust
2001 W. Main Street
Artesia, NM 87003-1116 756 756 1

NOT RETURN TO SENDER
UNABLE TO FORWARD

— 278 —

UTZ 02: 045043000000 *0000-001000-0

7020 0640 0000 0143 9552

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	\$
Postage	\$
First National Bank of Artesia, NM, Agent for Dr. John N. Brentwood, SSP	
2001 West Main Street	
Artesia, New Mexico 88210	
City	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: First National Bank of Artesia, NM, Agent for Dr. John N. Brentwood, SSP 2001 West Main Street Artesia, New Mexico 88210	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No																
2. Article Number (Transfer from service label) 7020 0640 0000 0143 9552	3. Service Type <table border="0"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☒ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> <tr> <td>☐ Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	☐ 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 (over \$500)	
☐ 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 (over \$500)																	



9590 9402 5751 0003 4071 41

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

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 \$

Postage

\$

Total

\$

Service

Street

City

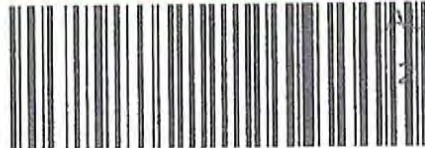
State

Zip

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

See Reverse for Instructions

7020 0640 0000 0143 9552

INKLE SHANOR LLP
ATTORNEYS AT LAWPOST OFFICE BOX 2068
NTA FE, NEW MEXICO 87504**CERTIFIED MAIL®**

7020 0640 0000 0143 9552

ALBUQUERQUE NM 870

2 FEB 2021 PM 2 L

UNITED STATES POSTAGE
PITNEY
02 1P
\$ 007
0000913767 FEB 0
MAILED FROM ZIP CODEFirst National Bank of Artesia, NM, Agent
for Dr. John N. Brentwood, SSP
2001 West Main Street
Artesia, NMRETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

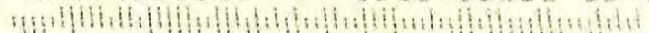
1 2460002162040240

00210437190

8750472000

SC: 87504206863

*0368-00628-03-00



7020 0640 0000 0143 9545

CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
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	\$
Postage	
\$	
Total Postage and Fees	
\$	
Sent To: First National Bank of Artesia,	
NM, Agent for Claire J. Carter,	
SSP	
Street: 2001 West Main Street, Artesia, NM 87504	
City, State, ZIP+4®	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

INKLE SHANOR LLP
ATTORNEYS AT LAW
POST OFFICE BOX 2068
BATAFE, NEW MEXICO 87504



7020 0640 0000 0143 9545

ALBUQUERQUE NM 870

2 FEB 2021 PM 2 L



First National Bank of Artesia, NM, Agent
for Claire J. Carter, SSP
2001 West Main Street
Artesia, NM

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

0400022182040245

00010197150 001 075042068800 *0968-05141-02-4
075042068800

37504206368 * 0000-0000-0000

7020 0640 0000 0143 9538

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

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 \$

Postage

\$

Total Postage and Fees

\$

Sent To: First National Bank of Artesia,

Street: NM, Agent for Fred O. McDowell
and Platform Energy III, LLC

City: P.O. Box 2078

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

See Reverse for Instructions

Postmark
Here**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:

FIRST NATIONAL BANK OF ARTESIA, NMI,
 Agent for Fred O. McDowell and
 Platform Energy III, LLC
 P.O. Box 2078
 Abilene, Texas 79604



9590 9402 5751 0003 4071 65

2. Article Number (Transfer from service label)

7020 0640 0000 0143 9538

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Brandi Hartzfield

C. Date of Delivery

2/12

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

3. Service Type

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

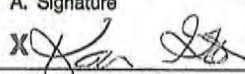
PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

[Faint, illegible handwritten notes]

7020 0640 0000 0303 0641

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 Gates Properties, Ltd. c/o Nada Gates P.O. Box 81119 Midland, Texas 79708 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☒  ☐ Agent ☐ Addressee B. Received by (Printed Name) Karen Gates C. Date of Delivery 2-20-15 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No
1. Article Addressed to: Gates Properties, Ltd. c/o Nada Gates P.O. Box 81119 Midland, Texas 79708	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500) ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
2. Article Number (Transfer from service label) 7020 0640 0000 0303 0641	



9590 9402 5751 0003 4065 95

7020 0640 0000 0143 9729

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

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 \$

Postage

\$

Total Postage and Fees

\$

Sent To John W. Gates, LLC

c/o Margaret J. Gates

706 W. Grand Avenue

City, State, Artesia, New Mexico 88210-1935

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

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

John W. Gates, LLC
c/o Margaret J. Gates
706 W. Grand Avenue
Artesia, New Mexico 88210-1935



9590 9402 5751 0003 4066 01

2. Article Number (Transfer from service label)

7020 0640 0000 0143 9729

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Margaret J. Gates* ☒ Agent ☒ Addressee

B. Received by (Printed Name)

MARGARET J. GATES

C. Date of Delivery

3/08/21

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

3. Service Type

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

Domestic Return Receipt

7020 0640 0000 0143 9590

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 \$

Postage

Total Postage and Fees

\$

Sent To

John W. Gates, SSR

Street and c/o Susan M. Shope

34 Fairview Street

City, State, Asheville, North Carolina 28803

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

See Reverse for Instructions

Postmark Here

SEP 2015
NM MAIN POST

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:

JOHN W. GATES, SSR

c/o Susan M. Shope

34 Fairview Street

Asheville, North Carolina 28803



9590 9402 5751 0003 4071 03

2. Article Number (Transfer from service label)

7020 0640 0000 0143 9590

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Susan M. Shope ☐ Agent ☒ Addressee

B. Received by (Printed Name)

Susan M. Shope

C. Date of Delivery

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

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☒ Return Receipt for Merchandise

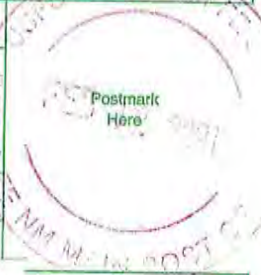
☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7020 0640 0000 0143 9606

CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL MAIL	
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	\$
Postage	\$
Total Postage and Fees	\$
Sent To	Robert B. Gates, SSP
Street and	c/o Susan M. Shope
City, State, ZIP+4	34 Fairview Street Asheville, North Carolina 28803
PS Form 3800, April 2015 PSN 7530-02-000-9037 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☐ Agent ☒ Addressee B. Received by (Printed Name) <u>Susan M. Shope</u> C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
1. Article Addressed to: Robert B. Gates, SSP c/o Susan M. Shope 34 Fairview Street Asheville, North Carolina 28803	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500) ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
2. Article Number (Transfer from service label) 7020 0640 0000 0143 9606	



9590 9402 5751 0003 4070 97

7020 0640 0000 0143 1297

U.S. Postal Service CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL MAIL	
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	\$
Postage	\$
Total Postage and Fees	\$
Sent To	Russell Sanford Gates, MSU
Street and	23 Stafford Square
City, State, ZIP+4®	Boyertown, Pennsylvania 19512
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Russell Sanford Gates, MSU
23 Stafford Square
Boyertown, Pennsylvan. 19512



9590 9402 5751 0003 4066 94

2. Article Number (Transfer from service label)

7020 0640 0000 0143 1297

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X (and 19)

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Gates

C. Date of Delivery

2/9/21

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 (over \$500) | |

Domestic Return Receipt

7020 0640 0000 0143 9613

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	\$
Postage	\$
Total Postage and Fees	
\$ Wallace S. Gates, SSF	
Sen c/o Susan M. Shope	
34 Fairview Street	
Asheville, North Carolina 28803	
City, State, ZIP+4®	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☒ Susan M. Shope ☐ Agent ☐ Addressee
1. Article Addressed to: Wallace S. Gates, SSF c/o Susan M. Shope 34 Fairview Street Asheville, North Carolina 28803	B. Received by (Printed Name) Susan M. Shope C. Date of Delivery
	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 7020 0640 0000 0143 9613	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 (over \$500)

7020 0640 0000 0143 1303

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	\$
Postage	\$
Total Postage and Fees	\$
Sent To: William Allen Gates, MSU	
Street: 208 Wren Drive	
City, State, ZIP: Greensburg, Pennsylvania 15601	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☒ Agent ☐ Addressee <i>McCarner 02/5</i> B. Received by (Printed Name) <i>Condry</i> C. Date of Delivery <i>2/5/21</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No																
1. Article Addressed to: William Allen Gates, MSU 208 Wren Drive Greensburg, Pennsylvania 15601	3. Service Type <table border="0"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☒ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> <tr> <td>☐ Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	☐ 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 (over \$500)	
☐ 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 (over \$500)																	
2. Article Number (Transfer from service label) 7020 0640 0000 0143 1303	Domestic Return Receipt																

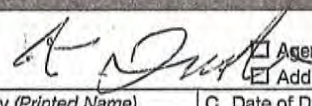


9590 9402 5751 0003 4066 56

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

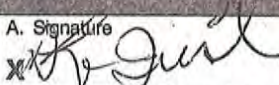
7020 0640 0000 0143 1280

CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL MAIL	
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	\$
Postage	\$
Total Postage and Fees	\$
Sent To	Kenneth William Irish, SSP
Street or	227 Rheem Boulevard
City, State, ZIP+4®	Moraga, California 94556
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  ☒ Agent ☒ Addressee	
1. Article Addressed to: Kenneth William Irish, SSP 227 Rheem Boulevard Moraga, California 94556	B. Received by (Printed Name)	C. Date of Delivery
2. Article Number (Transfer from service label) 7020 0640 0000 0143 1280	D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:	
3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt	

7020 0640 0000 0143 9682

CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL MAIL	
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	\$
Postage	\$
Total Postage and Fees	\$
Sent To	
Kenneth William Irish, SSP	
227 Rheem Boulevard	
Moraga, California 94556	
City, State, ZIP+4®	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Kenneth William Irish, SSP 227 Rheem Boulevard Moraga, California 94556	A. Signature  ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
9590 9402 5751 0003 4070 11 2. Article Number (Transfer from service label) 7020 0640 0000 0143 9682	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500) ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

7020 0640 0000 0143 9668

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	\$
Postage	\$
Total Postage and Fees	\$
Sent	Robert Morley Irish, SSP
Sir:	15155 Northwest Valley Road
City:	Yamhill, Oregon 97148
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature X  ☒ Agent ☐ Addressee B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
1. Article Addressed to: Robert Morley Irish, SSP 15155 Northwest Valley Road Yamhill, Oregon 97148	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 ☐ Signature Confirmation Restricted Delivery (over \$500)
2. Article Number (Transfer from service label) 7020 0640 0000 0143 9668	



9590 9402 5751 0003 4070 35

7020 0640 0000 0143 1259

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL MAIL

Certified Mail Fee \$
Postage \$
Total Postage and Fees \$

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	\$

Sent To
Robert Morley Irish, SSP
Street 15155 Northwest Valley Road
City, State, ZIP+4® Yamhill, Oregon 97148

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



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Robert Morley Irish, SSP 15155 Northwest Valley Road Yamhill, Oregon 97148 2. Article Number (Transfer from service label) 7020 0640 0000 0143 1259	A. Signature X (Signature) CVDIA Agent ☒ Agent ☐ Addressee B. Received by (Printed Name) CVDIA C. Date of Delivery 9/6 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® ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500) ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery



9590 9402 5751 0003 4066 87

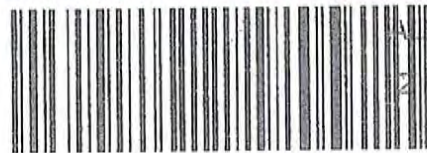
7020 0640 0000 1403 8797

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	\$
Postage	\$
Total Postage and Fees	\$
Sent To: Mary Carolyn Johnson, SSP	
Street: 5208 Hawks Point Road	
City, St.: Indianapolis, Indiana 46226	
City, St.: INDIANAPOLIS, IN	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



HINKLE SHANOR LLP
ATTORNEYS AT LAW
POST OFFICE BOX 2068
SANTA FE, NEW MEXICO 87504

CERTIFIED MAIL®



ALBUQUERQUE NM 870
12 FEB 2021 PM 2 L

7020 0640 0000 1403 8797



Handwritten initials: HWS

Mary Carolyn Johnson, SSP
5208 Hawks Point Road
Indianapolis, Indiana 46226

Handwritten circled text: LVO 2-8

NTXTE 462 DE 1 0000/20/
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

46226-1403
87504-2068

BC: 87504206868 *0566-00892-02

7020 0640 0000 1403 8209

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

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	\$

Postage \$

Total Postage and Fees \$

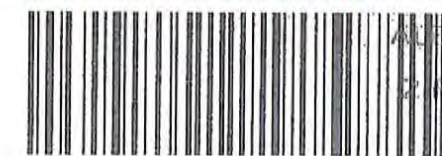
Sent To Diana Louise Carson Kostka, SSP
Street 14320 Edmond Lake Road
City, State, ZIP+4® Jones, Oklahoma 73049-3438

Postmark Here

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☐ Complete items 1, 2, and 3. ☐ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Diana Louise Carson Kostka, SSP 14320 Edmond Lake Road Jones, Oklahoma 73049-3438	A. Signature X <i>Covid 19</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>KOSTKA</i> C. Date of Delivery <i>2-8-21</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No
2. Barcode Number (Transfer from service label) 7020 0640 0000 1403 8209	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500) ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9033 Domestic Return Receipt

INKLE SHANOR LLP
ATTORNEYS AT LAW
POST OFFICE BOX 2068
ALBUQUERQUE, NEW MEXICO 87504



7020 0640 0000 1403 8209

ALBUQUERQUE NM 870
2 FEB 2021 PM 3 L



Return to
Sender
Not at this
address

Diana Louise Carson Kostka, SSP
14320 Edmond Lake Road
Jones, Oklahoma 73049-3438

731 AA N C0002
UNABLE TO FORWARD/FOR REVIEW

ANK FWD
73049-3438

BC: 73049343820 DU *2557-0718

7020 0640 0000 0143 9644

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	\$
Postage	\$
Total Postage and Fees	\$
Sent To	David L. Maxwell, SSP
Street	2912 Grampian Drive
City, State, ZIP+4®	Gastonia, North Carolina 28054
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: David L. Maxwell, SSP 2912 Grampian Drive Gastonia, North Carolina 28054	A. Signature X <i>MLA C54 C19</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery 2-8-21 D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:
2. Article Number (Transfer from service label) 7020 0640 0000 0143 9644	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500) ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery



9590 9402 5751 0003 4070 59

7020 0640 0000 0143 9637

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 \$

Postage

\$

Total Postage and Fees

\$

Sent To

Jonathan V. Maxwell, DOR
 Street at 819 Plummer Drive
 Greensboro, North Carolina 27410
 City, State

PS Form 3800, April 2015 PSN 7530-02-000-8047

See Reverse for Instructions

FEB 20 2021
Postmark
Here**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:

Jonathan V. Maxwell, SSP
 819 Plummer Drive
 Greensboro, North Carolina 27410



9590 9402 5751 0003 4070 66

2. Article Number (Transfer from service label)

7020 0640 0000 0143 9637

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X EL C1031☐ Agent☐ Addressee

B. Received by (Printed Name)

C19

C. Date of Delivery

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

3. Service Type

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

Domestic Return Receipt

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 Peter N. Maxwell, SSP

309 Frances Thacker
 Williamsburg, Virginia 23185-8238

City, State, ZIP+4®

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

See Reverse for Instructions

7020 0640 0000 0143 9620

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:

Peter N. Maxwell, SSP
 309 Frances Thacker
 Williamsburg, Virginia 23185-8238



9590 9402 5751 0003 4070 73

2. Article Number (Transfer from service label)

7020 0640 0000 0143 9620

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Peter Maxwell

C. Date of Delivery

5/10/15

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

If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☒ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

7020 0640 0000 0143 9705

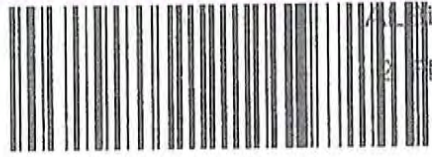
CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	
Joanna L. McDermott	
Street or	6625 E Cypress St
Scottsdale, Arizona 85257	
City, State, ZIP+4®	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



CERTIFIED MAIL®

SHANOR LLP
ATTORNEYS AT LAW
POST OFFICE BOX 2068
TA FE, NEW MEXICO 87504

02/11/2021



7020 0640 0000 0143 9705

ALBUQUERQUE NM 870

FEB 02 2021 PM 2:11



UNITED STATES POSTAGE
\$0.07
0000913767 FEB 02
MAILED FROM ZIP CODE

No
fwd

Joanna L. McDermott
6625 E Cypress St
Scot

NIXIE 850 DE 1 0002/03/11

RETURN TO SENDER
VACANT
UNABLE TO FORWARD

66257-42
87504-2068

BC: 87504206868 *0568-05227-01-42



7020 0640 0000 1403 8780

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®

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 \$

Postage

\$

Total Postage and Fees

\$ *Money, deceased,*

Sen

Joanna L. McDermott

Street

6625 E Cypress St

City

Scottsdale, Arizona 85257

PS

See Reverse for Instructions

CERTIFIED MAIL®



7020 0640 0000 1403 8780

LINKLE SHANOR LLP

ATTORNEYS AT LAW

POST OFFICE BOX 2068

ANTAFÉ, NEW MEXICO 87504

ALBUQUERQUE NM 870

FEB 2021 PM 3 L



No
fwd

Joanna L. McDermott

6625 E. Cypress St.

Scottsdale, AZ 85257

NIXIE

850 DE 1

0002/0

RETURN TO SENDER

VACANT

UNABLE TO FORWARD

VAC

85257-2068
875042068

BC: 87504206868

*0668-07364-0

7020 0640 0000 0143 9712

CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®	
OFFICIAL RECEIPT	
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	\$
Postage	\$
Total Postage and Fees	\$
Sent	Michael McDowell, MSU
Street	c/o Barbara W. McDowell
City	6 Blitzen Lane
	Shelton, Washington 98584-1286
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☒ <u>Susan Dodds</u> ☐ Agent ☐ Addressee B. Received by (Printed Name) <u>Susan Dodds</u> C. Date of Delivery <u>FEB 10 2021</u> D. Is delivery address different from Item 1? ☐ Yes If YES, enter delivery address below: ☐ No
1. Article Addressed to: Michael McDowell, MSU c/o Barbara W. McDowell 6 Blitzen Lane Shelton, Washington 98584-1286	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 ☐ Signature Confirmation Restricted Delivery (over \$500)
2. Article Number (Transfer from service label) 7020 0640 0000 0143 9712	
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt

7020 0640 0000 1403 8162

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

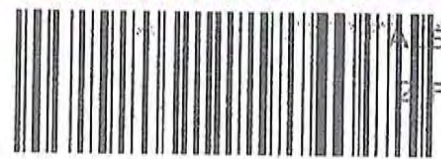
Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	
\$	
To	Melva Jean Meyers, and Earl
S	Stephen Meyers, Trustee of the Rex
Se	Thomas Meyers Exemption Trust
St	u/t/a dated 8/7/1995
City	4337 Driftwood Drive
	Plano, Texas 75074-3543
PS	See Reverse for Instructions

Postmark Here

LE SHANOR LLP
ATTORNEYS AT LAW
ST OFFICE BOX 2068
FE, NEW MEXICO 87504

03/20/2021

CERTIFIED MAIL®



7020 0640 0000 1403 8162

BUQUERQUE NM 870
2 FEB 2021 PM 2 L

UNITED STATES POSTAGE
02 1P
0000913767
MAILED FROM ZIP CODE 875

\$ 007.11

FEB 02 2021

Melva Jean Meyers; and Earl Stephen
Meyers, Trustee of the Rex Thomas Meyers
Exemption T
4337 Driftwo
Plano, Texas

NEXIE 750 DE 1 0803/11/21

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

UNC
BC: 37504206855 *0568-07842-02-21

7504206855

7020 0640 0000 1403 8216

CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL MAIL	
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	\$
Postage	\$
Total	\$
To: The New Mexico Baptist Foundation, Inc., Trustee for the New Mexico Baptist Children's Home, Inc.	
Street: 2511 Wyoming Boulevard NE	
City: Albuquerque, New Mexico 87112	
PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☐ Agent ☐ Addressee B. Received by (Printed Name) Elizabeth Allen C. Date of Delivery 2-4-21 D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:
1. Article Addressed to: The New Mexico Baptist Foundation, Inc., Trustee for the New Mexico Baptist Children's Home, Inc. 2511 Wyoming Boulevard Northeast Albuquerque, New Mexico 87112	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 ☐ Signature Confirmation Restricted Delivery (over \$500)
2. Article Number (Transfer from service label) 7020 0640 0000 1403 8216	
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt	

7020 0640 0000 0143 9507

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®

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 \$

Postage

\$

Total Postage and Fees

\$

Sent To

Leland Price, Inc.

2107 W. Clayton Avenue

Artesia, New Mexico 88210

City, State

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

See Reverse for Instructions

Postmark
Here

FEB 12 2021

NEW MEXICO
ARTEZIA
MAIN POST OFFICE

CERTIFIED MAIL



ALBUQUERQUE NM 870

FEB 2021 PM 2:11



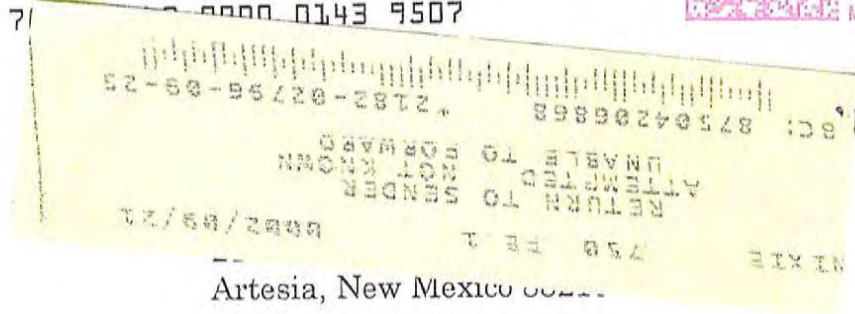
02 1P

0000913767

MAILED FROM ZIP CODE

\$ 007.11

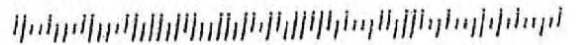
7020 0640 0000 0143 9507



Artesia, New Mexico 88210

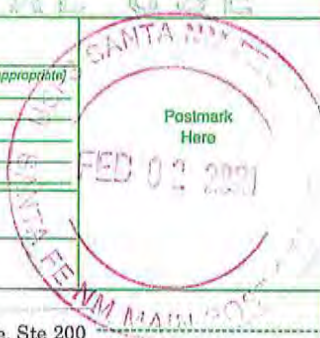
KLE SHANOR LLP
ATTORNEYS AT LAW
SUITE 200 OFFICE BOX 2068
ALBUQUERQUE, NEW MEXICO 87504

88210-256707



7020 0640 0000 0143 1310

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	\$
Postage	\$
Total Postage and Fees	\$
Sent To	Rhodes Interests, Ltd.
Street and	110 W. Louisiana Avenue, Ste 200
City, State, ZIP+4	Midland, Texas 79701
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☒ <u>Chloe Pichotta</u> ☐ Agent ☐ Addressee B. Received by (Printed Name) <u>Chloe Pichotta</u> C. Date of Delivery <u>2/9/21</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No <u>PO Box 51790</u> <u>Midland, TX 79710</u>																
1. Article Addressed to: Rhodes Interests, Ltd. 110 W Louisiana Avenue, Suite 200 Midland, Texas 79701	3. Service Type <table border="0"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☐ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☒ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> <tr> <td>☐ Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	☐ 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 (over \$500)	
☐ 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 (over \$500)																	
2. Article Number (Transfer from service label) 7020 0640 0000 0143 1310																	



9590 9402 5751 0003 4066 49

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

Domestic Return Receipt

7020 0640 0000 0303 0962

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	\$
Postage	\$
Total Postage and Fees	\$
Sent To Root Family Holdings, LLC	
c/o Bryan J. Root	
Street 13655 Duluth Drive	
City, St. Apple Valley, Minnesota 55124	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Root Family Holdings, LLC c/o Bryan J. Root 13655 Duluth Drive Apple Valley, Minnesota 55124 2. Article Number (Transfer from service label) 7020 0640 0000 0303 0962	A. Signature X BR 2429 C-19 ☒ Agent ☐ Addressee B. Received by (Printed Name) Melody Chaves C. Date of Delivery 2/5/2024 D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below: 3. Service Type <table border="0"> <tr> <td> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500) </td> <td> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		



9590 9402 5941 0062 9779 21

7020 0640 0000 1403 8193

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 \$

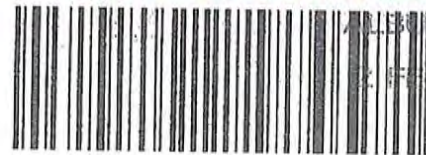
Postage
\$

Total Postage and Fees
\$

Sent To Valarie Rose Carson Ryckman, SSP
626 Longview Drive
Sugar Land, Texas 77478-3729
City, State, Zip+4
Dillon Lewis Carson Ryckman, SSP

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

INKLE SHANOR LLP
ATTORNEYS AT LAW
POST OFFICE BOX 2068
NTA FE, NEW MEXICO 87504

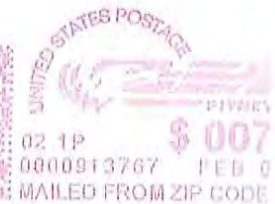


7020 0640 0000 1403 8193

CERTIFIED MAIL®

ALBUQUERQUE NM 870

2 FEB 2021 PM 2 L



Valarie Rose Carson Ryckman, SSP
626 Longview Drive
Sugar Land, TX 77478-3729

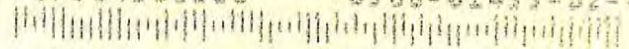
1A
2-6

NIXIE 778 DE 1 0004/02/21

RETURN TO SENDER
UNCLAIMED
CAPABLE TO FORWARD

UNC
8745972668

BC: 87384286868 *8568-81433-02-42



7020 0640 0000 0143 9651

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	\$
Postage	\$
Total Postage and Fees	\$
Sent To: Susan M. Shope, SSP	
34 Fairview Street	
Asheville, North Carolina 28803	
City, State, ZIP+4®	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
☐ Complete items 1, 2, and 3. ☐ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Susan M. Shope, SSP 34 Fairview Street Asheville, North Carolina 28803	A. Signature X <i>Susan M. Shope</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>Susan M. Shope</i> C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No																
2. Article Number (Transfer from service label) 7020 0640 0000 0143 9651	3. Service Type <table border="0"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☒ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> <tr> <td>☐ Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	☐ 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 (over \$500)	
☐ 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 (over \$500)																	



9590 9402 5751 0003 4070 42

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

Domestic Return Receipt

7020 0640 0000 0303 0764

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL MAIL

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 \$ _____

Postage
\$ _____
Total Postage and Fees
\$ _____

Sent To Southwest Royalties
Street or P.O. Box P.O. Box 53570
City, State Midland, TX 79710

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

Postmark Here

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☐ Complete items 1, 2, and 3. ☐ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Southwest Royalties P.O. Box 53570 Midland, TX 79710  9590 9402 5941 0062 9629 34 2. Article Number (Transfer from service label) 7020 0640 0000 0303 0764	A. Signature ☒ [Signature] ☐ Agent ☐ Addressee B. Received by (Printed Name) [Signature] C. Date of Delivery 2-28-21 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500) ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

7020 0640 0000 0143 9521

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	\$
Postage	\$
Total Postage and Fees	\$

Sent To First National Bank of Artesia,
NM, Agent for Abbe Kanner, SSP
Street and 2001 West Main Street
City, State Artesia, New Mexico 88210

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

7020 0640 0000 0143 1327

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	\$
Postage	\$
Total Postage and Fees	\$

Sent To D. Lloyd Henderson et ux
Street Jean E. Henderson
City, State 332 San Saba Street
Meadowlakes, Texas 78654-7009

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

7020 0640 0000 1403 8193

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	\$
Postage	\$
Total Postage and Fees	\$

Sent To Walter Rose Carson Tyckman, SSN
Street and 626 Longview Drive
City, State Sugar Land, Texas 77478-3729
Diana Louise Carson Kestler, SSN

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

Carlsbad Current Argus

PART OF THE NEWSPAPER NETWORK

Affidavit of Publication

Ad # 0004587008

This is not an invoice

HINKLE SHANOR LLP
218 MONTEZUMA

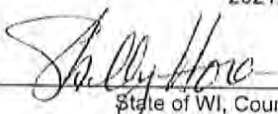
SANTA FE, NM 87501

I, a legal clerk of the **Carlsbad Current Argus**, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal notices and advertisements may be published; that the printed notice attached hereto was published in the regular and entire edition of said newspaper and not in supplement thereof on the date as follows, to wit:

02/05/2021


Legal Clerk

Subscribed and sworn before me this February 5, 2021:


State of WI, County of Brown
NOTARY PUBLIC

8-25-23
My commission expires



Ad # 0004587008

PO #: Shallow
of Affidavits: 1

This is not an invoice

This is to notify all interested parties, including Southwest Royalties, ConocoPhillips Company, Root Family Holdings, LLC, Breck Minerals, LP, Jon Erick Anderson, Aaron Anderson, Joanna L. McDermott, Mary Carolyn Johnson, RRA Minerals, L.L.C., James Chester Bethel, Jr., David Rhea Carson, Melva Jean Meyers, Earl Stephen Meyers, Gayle Angela Carson 1/k/a Gayle Angela Carson Carpenter, Edward Louis Carson, Jr., Valarie Rose Carson Ryckman, Diana Louise Carson Kostka, The New Mexico Baptist Foundation, Inc., COG Operating, LLC, Leland Price, Inc., First National Bank of Artesia, NM, Agent for Richard W. Wheatley, Sarah E. Wheatley, Abbe Kanner, Fred O. McDowell, Platform Energy III, LLC, Claire J. Carter, Dr. John N. Brentwood, Barbara Bentwood McCahen, Richard W. Bentwood, Jean T. Bentwood, John Bedingfield, John W. Gates, Robert B. Gates, Wallace S. Gates, Peter N. Maxwell, Jonathan V. Maxwell, David L. Maxwell, Susan M. Shope, Robert Morley Irish, Nancy Helen Castillo, Kenneth William Irish, Russell Sanford Gates, William Allen Gates, Rhodes Interests, Ltd. and D. Lloyd Henderson, and Jean E. Henderson, and their successors and assigns, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Spur Energy Partners LLC (Case No. 21676). During the COVID-19 Public Health Emergency, state buildings are closed to the public and hearings will be conducted remotely. The hearing will be conducted on March 4, 2021 beginning at 8:15 a.m. To participate in the electronic hearing, see the instructions posted on the docket for the hearing date: <http://www.emnrd.state.nm.us/OCDO/hearings.html>.

Applicant seeks an order pooling all uncommitted mineral interests in the Yeso formation (from the stratigraphic equivalent of 4,225' MD to 5,000' MD as observed on the Anderson-Federal 1 well Schlumberger Sidewall Neutron Porosity Log (API No. 30-015-20565)) in a 315-acre, more or less, standard (proximity tract) horizontal spacing unit comprised of the S/2 of Section 7, Township 17 South, Range 30 East in Eddy County, New Mexico. The horizontal spacing unit will be dedicated to the following wells: (1) Merak 7 Federal 10H well, which will be horizontally drilled from a surface location in Unit L of Section 8 to a bottom hole location in Lot 3 of Section 7; (2) Merak 7 Federal 11H well, which will be horizontally drilled from a surface location in Unit M of Section 8 to a bottom hole location in Lot 4 of Section 7; (3) Merak 7 Federal 22H well, which will be horizontally drilled from a surface location in Unit M of Section 8 to a bottom hole location in Lot 3 of Section 7; (4) Merak 7 Federal 51H well, which will be horizontally drilled from a surface location in Unit L of Section 8 to a bottom hole location in Lot 3 of Section 7; and (5) Merak 7 Federal 52H well, which will be horizontally drilled from a surface location in Unit M of Section 8 to a bottom hole location in Lot 4 of Section 7. The completed intervals of the wells will be orthodox. Also to be considered will be the cost of drilling and completing the wells and the allocation of the cost, the designation of Spur Energy Partners, LLC as the operator of the wells, and a 200% charge for the risk involved in drilling and completing the wells. The wells are located approximately 3 miles northwest of Loco Hills, New Mexico.

February 5, 2021

SPUR ENERGY
PARTNERS, LLC
Case No. 21676

Exhibit A-7

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

**APPLICATION OF SPUR ENERGY
PARTNERS, LLC FOR COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO**

CASE NOS. 21676

**SELF-AFFIRMED STATEMENT OF
C.J. LIPINSKI**

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 Spur Energy Partners, LLC ("Spur"). I am familiar with the geological matters that pertain to Spur's application.

3. I previously testified before the New Mexico Oil Conservation Division as an expert in geology, and my qualifications were accepted.

4. The Anderson-Federal 1 well Schlumberger Sidewall Neutron Porosity Log (API No. 30-015-20565) shows the top of the pool/top of the Yeso at 4,225' feet measured depth, and bottom of the pool/base of the Yeso at 6,341' feet measured depth.

5. **Exhibit B-1** is a general location map of the proposed horizontal spacing unit ("HSU") and shows the proposed **Merak 7 Federal 10H, 11H, 22H, 51H, and 52H** wells ("Wells") with black lines and offset Yeso producers are shown with purple squares. This map also identifies five wells penetrating the targeted intervals that I used to construct a cross-section from A to A'. I utilized these well logs because they penetrate the targeted intervals, are of good quality, and have been subjected to a petrophysical analysis of the targeted intervals.

SPUR ENERGY
PARTNERS, LLC
Case No. 21676

Exhibit B

6. **Exhibit B-2** is a structure map for the top of the Glorieta formation, which also reflects the surrounding area in Eddy County in relation to the HSU. The contour interval is 25 feet. The map demonstrates the formation is gently dipping to the east in this area. I do not observe any faulting, pinch-outs, or geologic impediments to developing the targeted intervals with horizontal wells.

7. **Exhibit B-3** is a structural cross-section using the representative wells identified on **Exhibit B-1**. It contains gamma ray, resistivity and porosity logs. In my opinion, these well logs are representative of the geology in the area. The landing zones for the Wells are labeled on the exhibit. This exhibit also shows a depth severance in a red dotted line at 5,000' feet. The cross-section demonstrates the target intervals within the Yeso formation is continuous across the HSU.

8. **Exhibit B-4** is a Gun Barrel view from B to B' of Spur's intended development of the Yeso formation in Section 7.

9. In my opinion, a laydown orientation in the Yeso formation is appropriate for proper exploitation because of consistent rock properties throughout the spacing unit and the lack of preferred fracture orientation in this portion of the trend.

10. Based on my geologic study of the area, the Yeso formation underlying the subject areas and subject HSU is suitable for development by horizontal wells and the tracts comprising the HSU will contribute more or less equally to the production of the Wells.

11. In my opinion, the granting of Spur's application will serve the interests of conservation, the protection of correlative rights, and the prevention of waste.

12. The exhibits attached hereto were either prepared by me or under my supervision or were compiled from company business records.

13. 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 12 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.


C.J. Lipinski

4/15/21
Date

Exhibit B-1: Merak 7 Federal Basemap

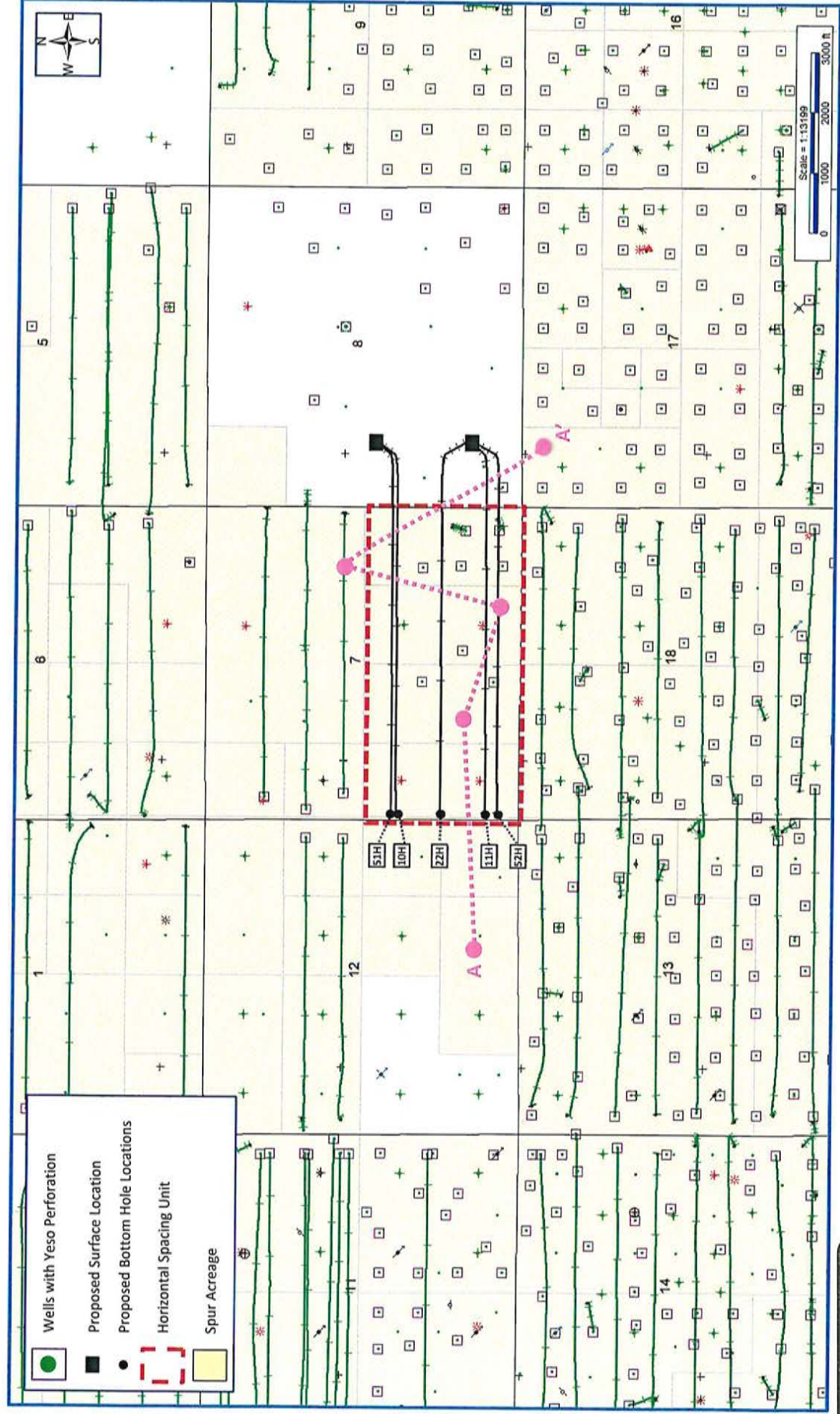
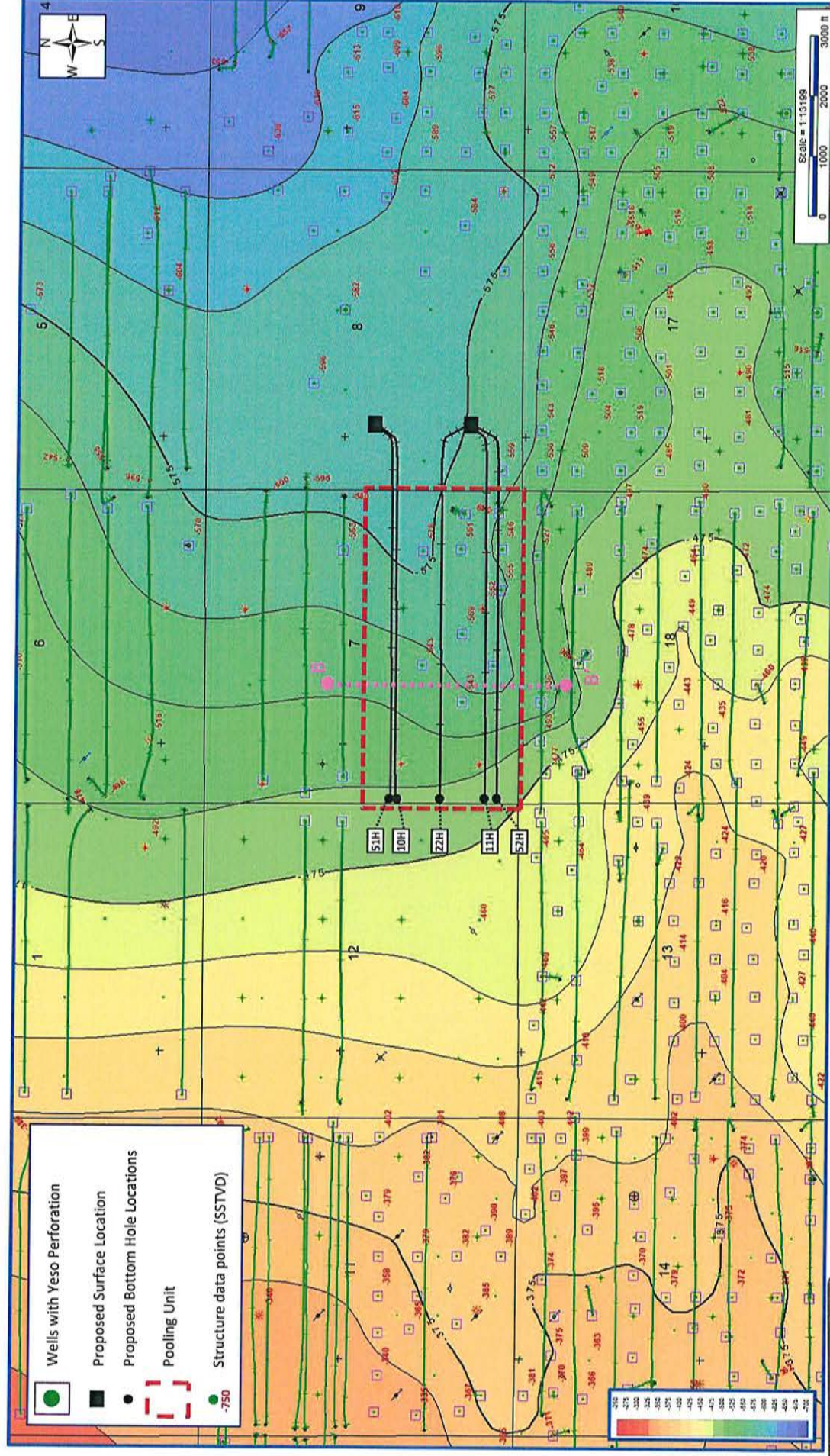


Exhibit B-2: Structure Map (SSTVD): Top Glorieta



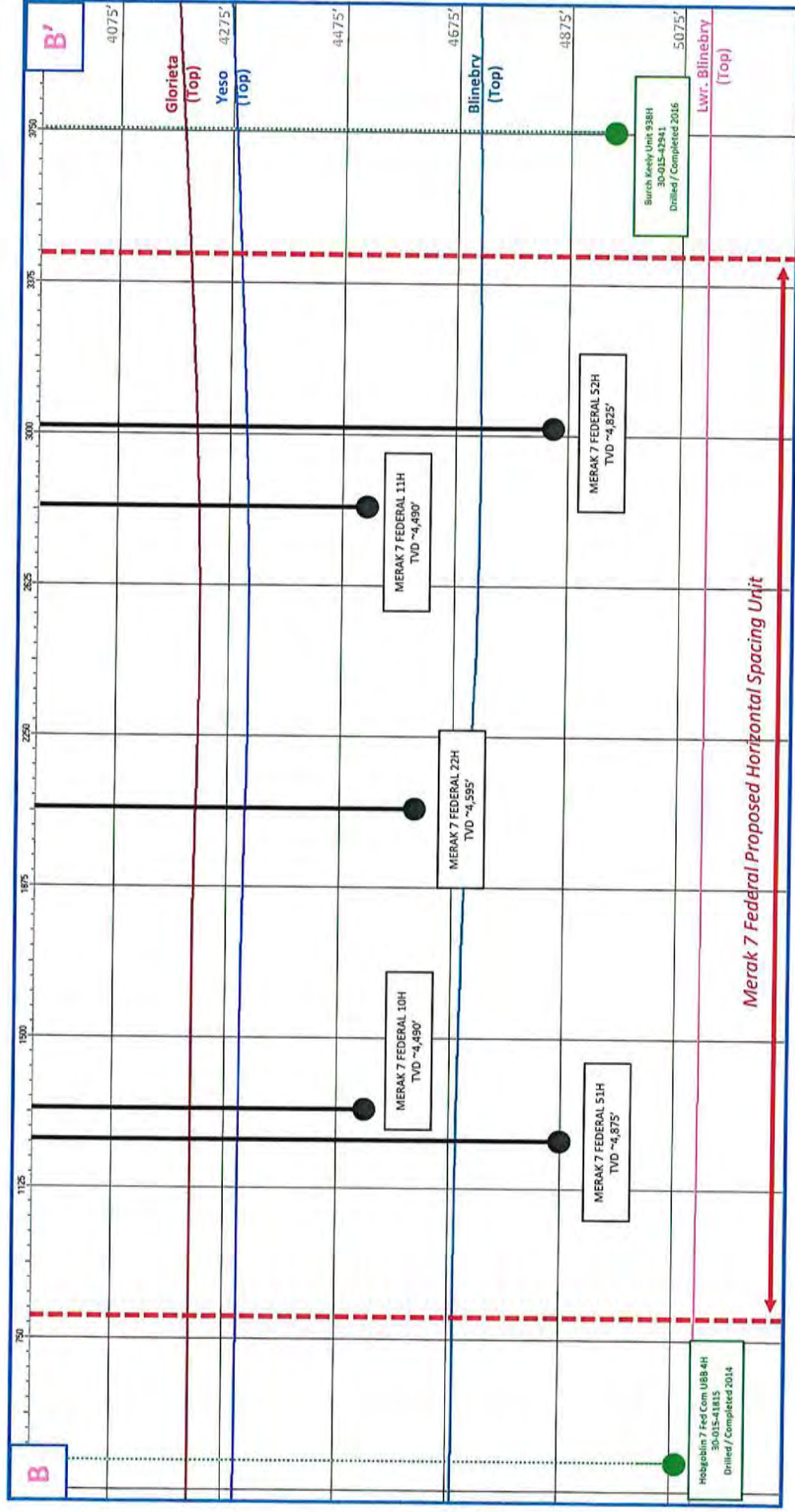
SPUR ENERGY
PARTNERS, LLC
Case No. 21676

Exhibit B-2



Exhibit B-3

Exhibit B-4: Merak 7 Federal Gun Barrel (TVD)



SPUR ENERGY
PARTNERS, LLC
Case No. 21676

Exhibit B-4