

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

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

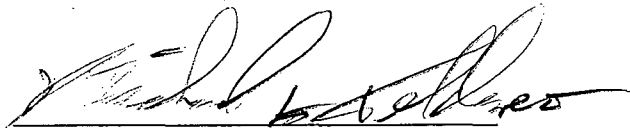
**APPLICATION OF COG OPERATING LLC  
FOR A NON-STANDARD SPACING AND  
PRORATION UNIT AND COMPULSORY  
POOLING, EDDY COUNTY, NEW MEXICO.**

**CASE NO. 14852**

**AFFIDAVIT**

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

Michael H. Feldewert, attorney in fact and authorized representative of COG Operating LLC, the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application was provided under the notice letter and proof of receipt attached hereto.



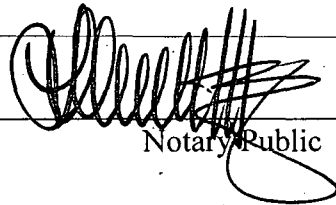
Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 23rd day of May 2012 by Michael H.

Feldewert.



OFFICIAL SEAL  
LISAMARIE ORTIZ  
NOTARY PUBLIC-STATE OF NEW MEXICO  
My commission expires 01/14/15

  
Notary Public

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 4  
Submitted by:  
**COG OPERATING LLC**  
Hearing Date: May 24, 2012

**EXHIBIT A  
COG OPERATING LLC  
OUIMET STATE COM #4H**

Paul Slayton et ux Patricia  
Slayton  
704 E. College Boulevard  
Roswell, New Mexico 88201

Peggy Runyan  
6290 Olohena Road, Apt. C.  
Kapaa, Hawaii 96746-8705

Vicky Moser  
3555 Comal Springs  
Canyon Lake, Texas 78133

Rodney Well  
2409 W. Cerro Road  
Artesia, New Mexico 88210

Black Stone Natural Resources  
1001 Fannin  
Suite 2020  
Houston, Texas 77002

ZPZ Delaware, LLC  
303 Veterans Airpark Ln.  
Suite 3000  
Midland, Texas 79705  
Attn: Lee Scarborough

Herman J. Ledbetter, Trustee of the  
Hearman J. Ledbetter Family Trust  
10988 US Highway 277 South  
Abilene, Texas 79606

Synergy Resources  
2106 West Centre Avenue  
Artesia, New Mexico 88210

Cogent Energy, Inc.  
Defined Benefit Plan  
c/o Randy Cate  
6824 Island Circle  
Midland, Texas 79707

Devon Energy Production Company,  
LP, successor to Cambridge Related  
Assets  
1500 Mid America Tower  
20 North Broadway  
Oklahoma City, OK 73102-8260

Louis Fulton, dba  
CFM Oil Company  
Post Office Box 1176  
Artesia, New Mexico 88210

**Mewbourne Oil Company;  
Mewbourne Development  
Corporation; 3MG Corporation;  
CWM 2000-B, Ltd.; Mewbourne  
Energy Partners 07-A, LP**

Murchison Oil & Gas, Inc.  
1100 Mira Vista Blvd.  
Plano, Texas 75093  
Attn: Bret Austin

ConocoPhillips Company  
600 North Dairy Ashford  
3WL-14066  
Houston, Texas 77079

Attn: Steve Smith  
500 West Texas, Suite 1020  
Midland, Texas 79701

HOLLAND & HART<sup>LLP</sup>



**Michael H. Feldewert**  
Recognized Specialist in the  
Area of Natural Resources - oil  
and gas law New Mexico Board  
of Legal Specialization  
mfeldewert@hollandhart.com

May 2, 2012

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

**TO AFFECTED INTEREST OWNERS**

**Re: Application of COG Operating LLC for a non-standard spacing and  
proration unit and compulsory pooling, Eddy County, New Mexico.  
Ouimet State Com #4H**

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. This application has been set for hearing before a Division Examiner at 8:15 a.m. on May 24, 2012. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 1208.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

Questions concerning this application should be directed to Brandon K. Gaynor at (432) 221-0308.

Sincerely,

Michael H. Feldewert  
ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone [505] 988-4421 Fax [505] 983-6043 [www.hollandhart.com](http://www.hollandhart.com)

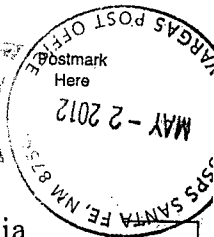
110 North Guadalupe Suite 1 Santa Fe, NM 87501 Mailing Address P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Billings Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C. ♻

7006 0100 0005 0626 5542

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)  
 For delivery information visit **OFFIC**  
**MHF/COG**  
**OUMET 4H**

|   |         |
|---|---------|
| Postage   | \$ .65  |
| Certified Fee                                     | 2.95    |
| Return Receipt Fee<br>(Endorsement Required)      | 2.35    |
| Restricted Delivery Fee<br>(Endorsement Required) |         |
| Total Postage & Fees                              | \$ 5.95 |



Sent To: Paul Slayton et ux Patricia  
 Slayton  
 Street, or PO: 704 E. College Boulevard  
 City, S: Roswell, New Mexico 88201

PS Form 3800, June 2002 See Reverse for Instructions

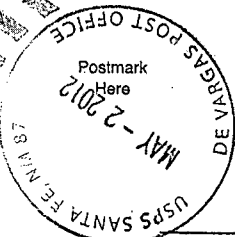
**Returned**

ouimet 4H p.1

7006 0100 0005 0626 5462

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)  
 For delivery information visit **OFFIC**  
**MHF/COG**  
**OUMET 4H**

|   |         |
|---|---------|
| Postage   | \$ .65  |
| Certified Fee                                     | 2.95    |
| Return Receipt Fee<br>(Endorsement Required)      | 2.35    |
| Restricted Delivery Fee<br>(Endorsement Required) |         |
| Total Postage & Fees                              | \$ 5.95 |



Sent To: Peggy Runyan  
 Street, or PO: 6290 Olohena Road, Apt. C.  
 City, I: Kapaa, Hawaii 96746-8705

PS Form 3800, June 2002 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION** **PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE** **ON DELIVERY**

☒ Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  
☒ 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:  
 Peggy Runyan  
 6290 Olohena Road, Apt. C.  
 Kapaa, Hawaii 96746-8705

2. Article Number  
 (Transfer from service label) 7006 0100 0005 0626 5462

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature: *Peggy Runyan*  
☐ Agent ☐ Addressee  
 B. Received By (Printed Name): *Peggy Runyan*  
 C. Date of Delivery: *5/1/12*  
 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5479

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

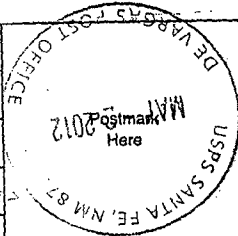
For delivery information visit **OFFIC**

**MHF/COG**  
**OUMMET 4H**

Postage \$ **.65**  
 Certified Fee **2.95**  
 Return Receipt Fee (Endorsement Required) **2.35**  
 Restricted Delivery Fee (Endorsement Required)  
 Total Postage & Fees \$ **5.95**

Sent To  
 Vicky Moser  
 3555 Comal Springs  
 Canyon Lake, Texas 78133

PS Form 3800, June 2002 See Reverse for Instructions



**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **OFFIC**

**MHF/COG**  
**OUMMET 4H**

Postage \$ **.65**  
 Certified Fee **2.95**  
 Return Receipt Fee (Endorsement Required) **2.35**  
 Restricted Delivery Fee (Endorsement Required)  
 Total Postage & Fees \$ **5.95**

Sent To  
 Vicky Moser  
 3555 Comal Springs  
 Canyon Lake, Texas 78133

PS Form 3800, June 2002 See Reverse for Instructions

**SENDER: COI** **ON DELIVERY**

1. Article Addressed to:  
 Vicky Moser  
 3555 Comal Springs  
 Canyon Lake, Texas 78133

2. Article Number  
 (Transfer from service label) **7006 0100 0005 0626 5479**

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature  
☒ Agent ☐ Addressee  
**Charles E Moser**

B. Received by (Printed Name)  
**Charles E Moser**

C. Date of Delivery  
**5-5-11**

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

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

Oummet 4H P.2

7006 0100 0005 0626 5486

**U.S. Postal Service™**  
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For delivery information visit **OFFIC**

**MHF/COG**  
**OUMMET 4H**

Postage \$ **.65**  
 Certified Fee **2.95**  
 Return Receipt Fee (Endorsement Required) **2.35**  
 Restricted Delivery Fee (Endorsement Required)  
 Total Postage & Fees \$ **5.95**

Sent To  
 Rodney Well  
 2409 W. Cerro Road  
 Artesia, New Mexico 88210

PS Form 3800, June 2002 See Reverse for Instructions



**SENDER: COI** **ON DELIVERY**

1. Article Addressed to:  
 Rodney Well  
 2409 W. Cerro Road  
 Artesia, New Mexico 88210

2. Article Number  
 (Transfer from service label) **7006 0100 0005 0626 5486**

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature  
☒ Agent ☐ Addressee  
**SARA ANNE B**

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

C. Date of Delivery  
**5-3-12**

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

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5516

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
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For delivery information visit **OFFIC**

MHF/COG  
 OUMET 4H

|  |         |
|--|---------|
| Postage  | \$ .65  |
| Certified Fee                                  | 2.95    |
| Return Receipt Fee (Endorsement Required)      | 2.35    |
| Restricted Delivery Fee (Endorsement Required) |         |
| Total Postage & Fees                           | \$ 5.95 |

Postmark Here  
 MAY - 2 2012  
 DE VARGAS POST OFFICE

Sent To:  
 Herman J. Ledbetter, Trustee of the  
 Hearman J. Ledbetter Family Trust  
 10988 US Highway 277 South  
 Abilene, Texas 79606

PS Form 3800, June 2002 See Reverse for Instructions

Oumet 4H p. 3

7006 0100 0005 0626 5525

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
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For delivery information visit **OFFIC**

MHF/COG  
 OUMET 4H

|  |         |
|--|---------|
| Postage  | \$ .65  |
| Certified Fee                                  | 2.95    |
| Return Receipt Fee (Endorsement Required)      | 2.35    |
| Restricted Delivery Fee (Endorsement Required) |         |
| Total Postage & Fees                           | \$ 5.95 |

Postmark Here  
 MAY - 2 2012  
 DE VARGAS POST OFFICE

Sent To:  
 Synergy Resources  
 2106 West Centre Avenue  
 Artesia, New Mexico 88210

PS Form 3800, June 2002 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

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:  
 Synergy Resources  
 2106 West Centre Avenue  
 Artesia, New Mexico 88210

2. Article Number  
 (Transfer from service label) 7006 0100 0005 0626 5523

**RECIPIENT: COMPLETE THIS SECTION**

A. Signature  
 x Dennis Manpin

B. Received by (Printed Name)  
 Dennis Manpin

C. Date of Delivery  
 5/7/12

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

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

0655 9290 0000 0100 9002

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **OFFICE**

Postage \$ **.65**  
 Certified Fee **2.95**  
 Return Receipt Fee (Endorsement Required) **2.35**  
 Restricted Delivery Fee (Endorsement Required)  
 Total Postage & Fees \$ **5.95**

Postmark Here  
 MAY - 2 2012  
 DE VARGAS POST OFFICE

Sent **Cogent Energy, Inc.**  
 Defined Benefit Plan  
 c/o Randy Cate  
 City: **6824 Island Circle**  
**Midland, Texas 79707**

PS Form 3800, June 2002

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:  
**Cogent Energy, Inc.**  
**Defined Benefit Plan**  
**c/o Randy Cate**  
**6824 Island Circle**  
**Midland, Texas 79707**

2. Article Number  
 (Transfer from service label) **7006 0100 0005 0626 5530**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

**ON DELIVERY**

A. Signature **X** *[Signature]* ☐ Agent ☐ Addressee  
 B. Received by (Printed Name) **RANDALL CATE** C. Date of Delivery **5/4/12**  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

001met 444 P.4

7006 0100 0005 0626 5542

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **OFFICE**

Postage \$ **.65**  
 Certified Fee **2.95**  
 Return Receipt Fee (Endorsement Required) **2.35**  
 Restricted Delivery Fee (Endorsement Required)  
 Total Postage & Fees \$ **5.95**

Postmark Here  
 MAY - 2 2012  
 DE VARGAS POST OFFICE

Sent **Devon Energy Production Company,**  
**LP, successor to Cambridge Related**  
**Assets**  
 Street or PO **1500 Mid America Tower**  
 City: **20 North Broadway**  
**Oklahoma City, OK 73102-8260**

PS Form 3800, June 2002

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:  
**Devon Energy Production Company,**  
**LP, successor to Cambridge Related**  
**Assets**  
**1500 Mid America Tower**  
**20 North Broadway**  
**Oklahoma City, OK 73102-8260**

2. Article Number  
 (Transfer from service label) **7006 0100 0005 0626 5547**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

**ON DELIVERY**

A. Signature **X** *[Signature]* ☐ Agent ☐ Addressee  
 B. Received by (Printed Name) C. Date of Delivery **5-7-12**  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

4555 9290 0000 0000 7006

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
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 For delivery information visit **OFFICIAL**  
**MHF/COG**  
**OUMET 4H**

Postage \$ **.65**  
 Certified Fee **2.95**  
 Return Receipt Fee (Endorsement Required) **2.35**  
 Restricted Delivery Fee (Endorsement Required)  
 Total Postage & Fees \$ **5.95**

Postmark: SANTA FE, NM 87504  
 MAY - 2 2012  
 DE VARGAS POST OFFICE

Sent to: Louis Fulton, dba  
 CFM Oil Company  
 Post Office Box 1176  
 Artesia, New Mexico 88210

PS Form 3811, February 2004

**SENDER: COMPLETE THIS SECTION** **ON DELIVERY**

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature: *[Signature]*  
☐ Agent  
☐ Addressee  
 B. Received by (Printed Name): *[Signature]*  
 C. Date of Delivery: *[Signature]*  
 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

1. Article Addressed to:  
 Louis Fulton, dba  
 CFM Oil Company  
 Post Office Box 1176  
 Artesia, New Mexico 88210

2. Article Number: **7006 0100 0005 0626 5554**  
 (Transfer from service label)

3. Service Type:  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

OUMet 4H P. 5

**U.S. Postal Service™**  
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 For delivery information visit **OFFICIAL**  
**MHF/COG**  
**OUMET 4H**

Postage \$ **.65**  
 Certified Fee **2.95**  
 Return Receipt Fee (Endorsement Required) **2.35**  
 Restricted Delivery Fee (Endorsement Required)  
 Total Postage & Fees \$ **5.95**

Postmark: SANTA FE, NM 87504  
 MAY - 2 2012  
 DE VARGAS POST OFFICE

Sent to: Mewbourne Oil Co  
 Mewbourne Development  
 Corporation; 3MG  
 CWM 2000-B, Ltd.  
 Energy Partners 07  
 Attn: Steve Smith  
 500 West Texas, Suite 1020  
 Midland, Texas 79701

PS Form 3811, February 2004

**SENDER: COMPLETE THIS SECTION** **ON DELIVERY**

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature: *[Signature]*  
☐ Agent  
☐ Addressee  
 B. Received by (Printed Name): *[Signature]*  
 C. Date of Delivery: *[Signature]*  
 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

1. Article Addressed to:  
 Mewbourne Oil Company;  
 Mewbourne Development  
 Corporation; 3MG Corporation;  
 CWM 2000-B, Ltd.; Mewbourne  
 Energy Partners 07-A, LP  
 Attn: Steve Smith  
 500 West Texas, Suite 1020  
 Midland, Texas 79701

2. Article Number: **7006 0100 0005 0626 5561**  
 (Transfer from service label)

3. Service Type:  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



7006 0100 0005 0626 5578

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For delivery information visit **OFFIC**

**MHF/COG**  
**OUMET 4H**

|  |                |
|--|----------------|
| Postage  | \$ .65         |
| Certified Fee                                  | 2.95           |
| Return Receipt Fee (Endorsement Required)      | 2.35           |
| Restricted Delivery Fee (Endorsement Required) |                |
| <b>Total Postage &amp; Fees</b>                | <b>\$ 5.95</b> |

Postmark Here: MAY -2-2012 DE VARGAS

Ser. Murchison Oil & Gas, Inc.  
 1100 Mira Vista Blvd.  
 Plano, Texas 75093  
 City: Attn: Bret Austin

PS Form 3800, June 2002 See Reverse for Instructions

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

SENDER: CC ON DELIVERY

1. Article Addressed to:  
 Murchison Oil & Gas, Inc.  
 1100 Mira Vista Blvd.  
 Plano, Texas 75093  
 Attn: Bret Austin

2. Article Number:  
 (Transfer from service label) 7006 0100 0005 0626 5578

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5585

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **OFFIC**

**MHF/COG**  
**OUMET 4H**

|  |                |
|--|----------------|
| Postage  | \$ .65         |
| Certified Fee                                  | 2.95           |
| Return Receipt Fee (Endorsement Required)      | 2.35           |
| Restricted Delivery Fee (Endorsement Required) |                |
| <b>Total Postage &amp; Fees</b>                | <b>\$ 5.95</b> |

Postmark Here: MAY -2-2012 DE VARGAS

Ser. ConocoPhillips Company  
 600 North Dairy Ashford  
 3WL-14066  
 City: Houston, Texas 77079

PS Form 3800, June 2002 See Reverse for Instructions

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

SENDER: COM ON DELIVERY

1. Article Addressed to:  
 ConocoPhillips Company  
 600 North Dairy Ashford  
 3WL-14066  
 Houston, Texas 77079

2. Article Number:  
 (Transfer from service label) 7006 0100 0005 0626 5585

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☒ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

Oumet 4H 5578