

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF LATIGO PETROLEUM,
INC. FOR AN EXCEPTION TO DIVISION RULE
104.D(3), LEA COUNTY, NEW MEXICO.

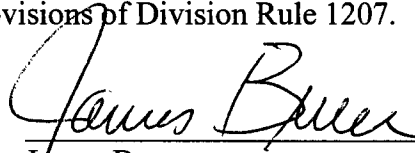
Case No. 13,408

AFFIDAVIT OF NOTICE

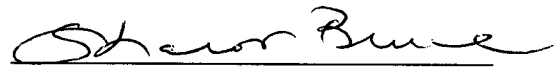
COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)

James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Latigo Petroleum, Inc., and have personal knowledge of the matters stated herein.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the proper interest owners, at their correct addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.
5. Applicant has complied with the notice provisions of Division Rule 1207.


James Bruce

SUBSCRIBED AND SWORN TO before me this 16th day of May, 2005 by James Bruce.


Notary Public

My Commission Expires:

3/14/09

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

April 14, 2005

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

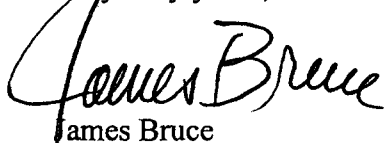
To: Mineral interest owners/lessees offsetting the SW¼ §13-9S-35E, Lea County, NM

Ladies and gentlemen:

Enclosed is a copy of an application, filed with the New Mexico Oil Conservation Division by Latigo Petroleum, Inc., requesting permission to simultaneously dedicate the SW¼ of Section 13, Township 9 South, Range 35 East, N.M.P.M., Lea County, New Mexico, to two San Andres gas wells. This matter is scheduled for hearing at 8:15 a.m. on Thursday, May 5, 2005, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an offset interest owner to the well unit, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date.

You are required to notify (in writing) the Division, and the undersigned, by Friday, April 29, 2005 if you intend to participate at the hearing.

Very truly yours,


James Bruce

Attorney for Latigo Petroleum, Inc.



Elk Oil Company

P. O. Box 310
Roswell, New Mexico 88202-0310

H. C. Hood

P. O. Box 2000
Midland, Texas 79702

**Earl E. and Jacqueline F. Gaertner, Trustees
Jacqueline F. Gaertner Trust**

300 West Texas, Suite 802
Midland, Texas 79701

Roy E. Kimsey, Jr.

500 North Big Spring, Suite 502
Midland, Texas 79701

Pomeroy Smith 69 Ltd.

3000 North Garfield, Suite 280
Midland, Texas 79705

Hilliard Oil and Gas, Inc.

601 Poydras, Suite 1900
New Orleans, Louisiana 70130

Cherokee Resources, Inc.

P. O. Box 4214
Odessa, Texas 79760

Jeff S. Votaw

13729 Research Boulevard, Suite 610, Box 105
Austin, Texas 78750

Hawkeye Resources, Inc.

P. O. Box 200715
Austin, Texas 78720-0715

Sempra Energy Production Company

8235 Douglas Avenue, Suite 525
Dallas, Texas 75225

Georgi Davis Duwwe

6802 Rockledge Cove
Austin, Texas 78731

Latigo Petroleum, Inc.

15 West 6th Street, Suite 1100
Tulsa, Oklahoma 74119

Mohammed Y. Merchant

P. O. Box 2769
Hobbs, New Mexico 88241

Floos, Inc.

P. O. Box 2769
Hobbs, New Mexico 88241

Priscilla Davis Gravelly

3510 St. Johns
Dallas, Texas 75205

Floyd Hugh Davis

22301 Hamilton Pool Road
Dripping Springs, Texas 78620

Sidney Roger Davis

4501 Spicewood Springs Road, Suite 1018
Austin, Texas 78759

Harcor Energy, Inc.

9401 Wilshire Boulevard, Suite 570
Beverly Hills, California 90212

Occidental Permian Ltd.

P. O. Box 50250
Midland, Texas 79705

Etz Oil Properties

1307 West Third
Roswell, New Mexico 88201

Patrick J. Hannifin

765 Santa Camelia Drive
Solana Beach, California 92075

Betty Hannifin Adkins

7107 South Hudson Circle
Littleton, Colorado 80121

Margaret Wygocki

721 Robins Lane Road
Lansing, Michigan 48913

D. L. Hannifin
P. O. Drawer 2588
Roswell, New Mexico 88202-2588

Robert H. Hannifin
P. O. Box 218
Midland, Texas 79702

Kathryn McCormick
2705 Westwind Road
Las Cruces, New Mexico 88007

Lena Betenbough Trust
c/o Mrs. Don Saye
P. O. Box 2374
Milan, New Mexico 87021

Ronald Toomy Betenbough, Trustee
c/o Mrs. Don Saye
P. O. Box 2374
Milan, New Mexico 87021

Wells Fargo Bank, N.A., Trustee of the
P. O. Box 1959 *Simmons Trust*
Midland, Texas 79702

Wayne Lamar Betenbough
6901 Zuni S.E.
Albuquerque, New Mexico 87108

Sheryl Ann Betenbough Dennis
18163 East Riverview Drive
Austinburg, Ohio 44010

Jean S. Sullivan Revocable Trust
c/o Carlsbad National Bank, Trustee
P. O. Box 1359
Carlsbad, New Mexico 88220

Mary Jane Hand
P. O. Box 455
La Luz, New Mexico 88337

Jack Chandler Halter
2107 New Mexico Street
Baytown, Texas 77521

Rick F. Halter
233 East Terra Alta
San Antonio, Texas 78209

Grant W. Halter
2107 New Mexico Street
Baytown, Texas 77521

Marilyn F. Menasco Trust
7714 Stuebenway
Stockton, California 95207

Virginia F. Zobeck
8003 Wayne
Lubbock, Texas 79424

Dora L. McKnight
P. O. Box 1738
Roswell, New Mexico 88202-1738

M. H. McGrail Trust
c/o Sunwest Bank of Albuquerque, Trustee
P. O. Box 26900
Albuquerque, New Mexico 87125

Irma E. Boyd
1414 West Hendricks
Roswell, New Mexico 88201

Helm Energy, LLC
1775 Sherman Street, Suite 1955
Denver, Colorado 80203

Sheila Moman
3502 East 5th Place
Tulsa, Oklahoma 74112

Katherine O. Browne Trust
4330 West Pine
St. Louis, Missouri 63108

Sarah Elizabeth Browne Trust
3207 South Utica Avenue
Tulsa, Oklahoma 74114

New Mexico Western Minerals, Inc.
P. O. Box 1738
Roswell, New Mexico 88202

Estate of Rod M. Nugent
c/o Marjorie M. Nugent, Executrix
111 Dixie Lake West
Carthage, Texas 75633

Marjorie M. Nugent
111 Dixie Lake West
Carthage, Texas 75633

Chisos, Ltd.
1221 Lamar, Suite 1600
Houston, Texas 77010

Fenix Royalty, LLC
P. O. Box 2818
Midland, Texas 79702

Nancy J. Allen
3623 Overbrook Drive
Fort Worth, Texas 75205

Pitch Energy Corporation
P. O. Box 304
Artesia, New Mexico 88211-0304

Pure Energy Group
700 North St. Mary's Street, Suite 1925
San Antonio, Texas 78205

Blackstone Mineral Company LP
1001 Fannin, Suite 2020
Houston, Texas 77002

Matthew Ernest Browne
16930 Cairibach
Houston, Texas 77084

Irene Browne Grim
12 Monadnach Road.
Worcester, Massachusetts 01609

Scythian, Ltd.
300 North Marienfeld, Suite 850
Midland, Texas 79701

Stadium 5 LLC
750 North St. Paul, Suite 1530
Dallas, Texas 75201

Kelley Leigh O'Brien
11 River Ridge Road
Broken Arrow, Oklahoma 74014

Paul F. O'Brien III Trust
P. O. Box 6655
Shreveport, Louisiana 71136-6655

Ernest Obering O'Brien Trust
P. O. Box 6655
Shreveport, Louisiana 71136-6655

Gae Ratcliff and Billy J. Markham, Co-Trustees
P. O. Box 21346
Mesa, Arizona 85277-1346

Joyce Hannifin
c/o Robert H. Hannifin
P. O. Box 218
Midland, Texas 79702

Manon M. McMullen
1500 Broadway, Suite 1212
Lubbock, Texas 79401

Roderick Allen Markham
1500 Broadway, Suite 1212
Lubbock, Texas 79401

William R. Proctor, Executor of the Estate of Pete Proctor,
82 San Clemente Circle
Odessa, Texas 79765

Billy Joe and Rosemarie Markham, Trustees
2315 Little Road, #108
Arlington, Texas 76106

Dona Edwards, Trustee of the C. B. Markham Estate Trust

2512 Metzgar Road S.W.
Albuquerque, New Mexico 87105-6336

Loneta S. Curtis, Trustee

605 South 15th Street
Artesia, New Mexico 88210

Albert D. White, Jr.

202 Sweetwater Boulevard North
Longwood, Florida 32779

Donna M. and LeDonna Markham, Trustees

P. O. Box 241
Center Point, Texas 78010

Clarence R. and Joyce Markham

3110 - 38th Street
Lubbock, Texas 79413

Penroc Oil Corporation

P.O. Box 5970
Hobbs, New Mexico 88241

Elliott Industries

P. O. Box 1355
Roswell, New Mexico 88202-1355

Raymond and Virginia Barnes Revocable Trust

400 Newly
Bloomfield, New Mexico 87412

Elliott-Hall Company

P. O. Box 1231
Ogden, Utah 84402

Crook Family Revocable Trust

c/o Jerry and Ann M. Crook
1041 Fairway Terrace
Clovis, New Mexico 88101

Nuevo Seis L.P.

P. O. Box 2588
Roswell, New Mexico 88202

Billy Pat Barnes

8513 North Crane Road
Oakdale, California 95361

College of the Southwest Foundation

6610 Lovington Highway
Hobbs, New Mexico 88240

Jo Nan Price

P. O. Box 2186
Ruidoso, New Mexico 88345

ExxonMobil

P. O. Box 4610
Houston, Texas 77210-4610

Jesse F. Barnes

3200 Highway 91
Dillion, Montana 59725

Tip and Naoma Barnes Revocable Trust

P. O. Box 216
Tatum, New Mexico 88267

Elmer L. Barnes

114 Variety Tree Circle
Altamonte, Florida 32701

Wayne L. Betenbough
11100 Gibson S.E.
No. B-23
Albuquerque, NM 87123

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Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
Occidental Perminia Ltd.
P. O. Box 50250
Midland, Texas 79705
Street, Apt. No., or PO Box No.
City, State, Zip+4

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:

Jo Nam Price
P. O. Box 2186
Ruidoso, New Mexico 88345

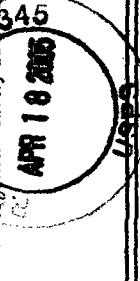
2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Jo Nam Price* ☐ Agent ☐ Addressee
- B. Received by (Printed Name) *Jo Nam Price* C. Date of Delivery *APR 18 2005*
- 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

7005 0390 0000 9969 5136

Domestic Return Receipt

102595-02-M-1540

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:

Occidental Perminia Ltd.
P. O. Box 50250
Midland, Texas 79705

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Jo Nam Price* ☐ Agent ☐ Addressee
- B. Received by (Printed Name) *Jo Nam Price* C. Date of Delivery *4/19/05*
- 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

7003 2260 0006 7451 2465

Domestic Return Receipt

102595-02-M-1540

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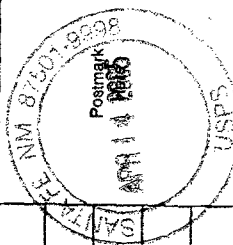
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Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
Jo Nam Price
P. O. Box 2186
Ruidoso, New Mexico 88345
Street, Apt. No., or PO Box No.
City, State, Zip+4

PS Form 3800, June 2002

See Reverse for Instructions



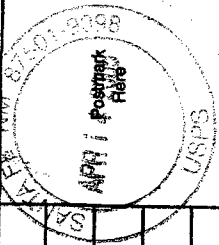
9969 5136 0000 0390 7005

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Postage \$
 Certified Fee \$
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Betty Hannafin Adkins
 7107 South Hudson Circle
 Littleton, Colorado 80121
 City, State, ZIP+4
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25490

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:

Patrick J. Hannafin
 765 Santa Camelia Drive
 Solana Beach, California 92075

2. Article Number
 (Transfer from service label)

7003 2260 0006 7451 2489
 PS Form 3811, February 2004

Domestic Return Receipt

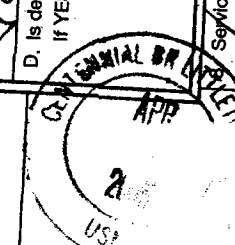
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 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Betty Hannafin Adkins
 7107 South Hudson Circle
 Littleton, Colorado 80121
 City, State, ZIP+4
 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:

Betty Hannafin Adkins
 7107 South Hudson Circle
 Littleton, Colorado 80121

2. Article Number
 (Transfer from service label)

7003 2260 0006 7451 2496
 PS Form 3811, February 2004

Domestic Return Receipt

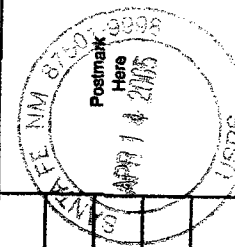
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Postage \$
 Certified Fee \$
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Patrick J. Hannafin
 765 Santa Camelia Drive
 Solana Beach, California 92075
 City, State, ZIP+4
 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:

Betty Hannafin Adkins
 7107 South Hudson Circle
 Littleton, Colorado 80121

2. Article Number
 (Transfer from service label)

7003 2260 0006 7451 2496
 PS Form 3811, February 2004

Domestic Return Receipt

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To: **Robert H. Huanilla**
Street Apt. No.: **P.O. Box 218**
or PO Box No. **Midland, Texas 79702**
City, State, ZIP+4[®]

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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:

Robert H. Huanilla
P.O. Box 218
Midland, Texas 79702

2. Article Number

(Transfer from service label) **7004 1160 0005 8659 8888**

Domestic Return Receipt

102595-02-M-1540

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:

Raymond and Virginia Barnes Revocable Trust
400 Newby
Bloomfield, New Mexico 87412

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature **Julie Thuff** ☐ Agent
B. Received by (Printed Name) **Julie Thuff** ☐ Addressee
C. Date of Delivery
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

COMPLETE THIS SECTION ON DELIVERY

A. Signature **Raymond Barnes** ☐ Agent
B. Received by (Printed Name) **Raymond Barnes** ☒ Addressee
C. Date of Delivery **4-18-05**
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

7005 0390 0000 9969 5105

Domestic Return Receipt

102595-02-M-1540

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To: **Raymond and Virginia Barnes Revocable Trust**
Street Apt. No.: **400 Newby**
or PO Box No. **Bloomfield, New Mexico 87412**
City, State, ZIP+4[®]

PS Form 3800, June 2002

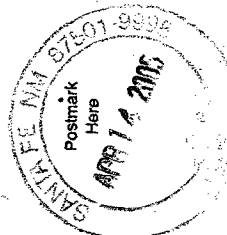
See Reverse for Instructions

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To
 Crook Family Revocable Trust
 c/o Jerry and Ann M. Crook
 1041 Fairway Terrace
 Clovis, New Mexico 88101
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

2115 6966 0000 0600 5002

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:

College of the Southwest Foundation
 6610 Lovington Highway
 Hobbs, New Mexico 88240

2. Article Number
 (Transfer from service label)
 PS Form 3811, February 2004

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Pam Zulchene Agent
 B. Received by (Printed Name)
 C. Date of Delivery
 4-18-05
 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

777 0390 0000 9969 5776

Return Receipt

102595-02-M-1540

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:

Crook Family Revocable Trust
 c/o Jerry and Ann M. Crook
 1041 Fairway Terrace
 Clovis, New Mexico 88101

2. Article Number
 (Transfer from service label)
 PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Ann Crook Agent
 B. Received by (Printed Name)
 C. Date of Delivery
 APR 14 2005
 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

7005 0390 0000 9969 5112

Domestic Return Receipt

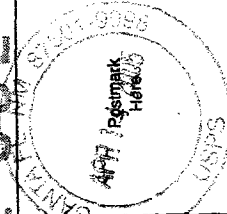
102595-02-M-1540

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To

College of the Southwest Foundation
 6610 Lovington Highway
 Hobbs, New Mexico 88240
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

8225 6966 0000 0600 5002

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Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
D. L. Hanaflin
P. O. Drawer 2588
Roswell, New Mexico 88202-2588

Street, Apt. No., or PO Box No.
City, State, ZIP+4

Postmark Here
APR 14 2005
SAN ANTONIO, TX

PS Form 3800, June 2002 See Reverse for Instructions

7004 4002 0911 5000 6598 8272

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:

D. L. Hanaflin
P. O. Drawer 2588
Roswell, New Mexico 88202-2588

2. Article Number (Transfer from service label) 7004 2260 0005 8659 8871

PS Form 3811, February 2004 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
B. Received by (Printed Name) Date of Delivery
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 ☐ No

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:

Billy Pat Barajas
8513 North Crane Road
Oakdale, California 95361

2. Article Number (Transfer from service label) 7005 0390 0000 9969 5129

PS Form 3811, February 2004 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
B. Received by (Printed Name) Date of Delivery
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 ☐ No

PS Form 3800, June 2002 See Reverse for Instructions

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OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
Billy Pat Barajas
8513 North Crane Road
Oakdale, California 95361

Street, Apt. No., or PO Box No.
City, State, ZIP+4

Postmark Here
APR 14 2005
SAN ANTONIO, TX

PS Form 3800, June 2002 See Reverse for Instructions

7005 0390 0000 9969 5129

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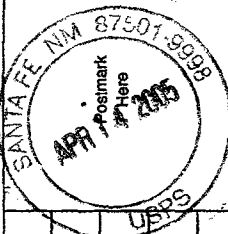
OFFICIAL USE

Postage \$
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$

Sent To

Roderick Allen Markham
1500 Broadway, Suite 1212
Lubbock, Texas 79401

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:

Man M. McMullen
1500 Broadway, Suite 1212
Lubbock, Texas 79401

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

7005 0390 0000 9969 5655

Domestic Return Receipt

102595-02-M-1540

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:

Roderick Allen Markham
1500 Broadway, Suite 1212
Lubbock, Texas 79401

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery 4/14/05
- 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 ☒ No

7005 0390 0000 9969 5662

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery 4/14/05
- 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 ☒ No

7005 0390 0000 9969 5655

Domestic Return Receipt

102595-02-M-1540

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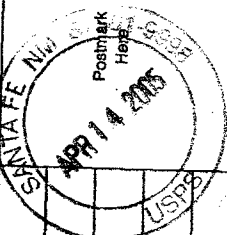
OFFICIAL USE

Postage \$
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$

Sent To

Manon M. McMullen
1500 Broadway, Suite 1212
Lubbock, Texas 79401

PS Form 3800, June 2002 See Reverse for Instructions



5595 6966 0000 0660 5002

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OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To

Joyce Hamlin
c/o Robert H. Hamlin
P. O. Box 218
Midland, Texas 79702

City, St

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:

Joyce Hamlin
c/o Robert H. Hamlin
P. O. Box 218
Midland, Texas 79702

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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:

Paul F. O'Brien III Trust
P. O. Box 6655
Shreveport, Louisiana 71136-6655

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Julie Trust*
- B. Received by (Printed Name) *Julie Trust*
- C. Date of Delivery
- 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 ☐ No

7005 0390 0000 9969 5648

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Paul F. O'Brien III*
- B. Received by (Printed Name) *Paul F. O'Brien III*
- C. Date of Delivery
- 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 ☐ No

7005 0390 0000 9969 5617

Domestic Return Receipt

102595-02-M-1540

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Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To

Paul F. O'Brien III Trust
P. O. Box 6655
Shreveport, Louisiana 71136-6655

City, State

PS Form 3800, June 2002

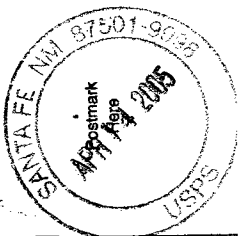
See Reverse for Instructions

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OFFICIAL USE

Postage \$
 Certified Fee
 Return Receipt Fee
 (Endorsement Required)
 Restricted Delivery Fee
 (Endorsement Required)
 Total Postage & Fees \$



Sent To

Marilyn E. Menasco Trust
 7714 Stuebnerway
 Stockton, California 95207

Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4

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:

Marilyn E. Menasco Trust
 7714 Stuebnerway
 Stockton, California 95207

2. Article Number

(Transfer from service label)

7004 1160 0005 8659 9007

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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:

Scythian, Ltd.
 300 North Martenfeld, Suite 850
 Midland, Texas 79701

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

7003 2260 0006 7449 1869

102595-02-M-1540

Scythian, Ltd.

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent
- B. Received by (Printed Name) ☐ Addressee
- C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail
- ☐ Registered
- ☐ Insured Mail
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

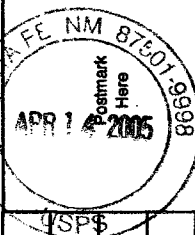
☐ Yes

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Postage \$
 Certified Fee
 Return Receipt Fee
 (Endorsement Required)
 Restricted Delivery Fee
 (Endorsement Required)
 Total Postage & Fees \$



Sent To

Scythian, Ltd.
 300 North Martenfeld, Suite 850
 Midland, Texas 79701

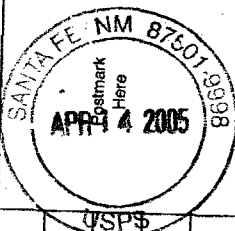
PS Form 3800, June 2002

See Reverse for Instructions

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To

Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4

Fitch Energy Corporation
 P. O. Box 304
 Artesia, New Mexico 88211-0304

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:

Fitch Energy Corporation
 P. O. Box 304
 Artesia, New Mexico 88211-0304

2. Article Number
 (Transfer from service label)

7004 1160 0005 8659 3371

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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:

Fenix Royalty, LLC
 P.O. Box 2818
 Midland, Texas 79702

2. Article Number
 (Transfer from service label)

7004 1160 0005 8659 9137

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Misti Murg* ☒ Agent ☐ Addressee
- B. Received by (Printed Name) *Misti Murg* C. Date of Delivery *4-16-05*
- D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

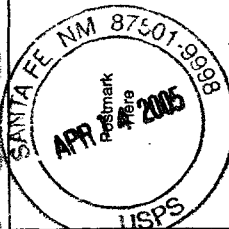
- 3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To

Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4

Fenix Royalty, LLC
 P. O. Box 2818
 Midland, Texas 79702

PS Form 3800, June 2002

See Reverse for Instructions

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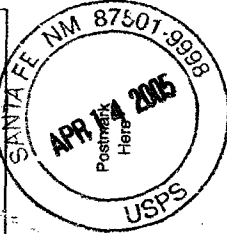
For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To
Chico, Ltd.
1221 Lamar, Suite 1600
Houston, Texas 77010
City, State, ZIP+4

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:

Chico, Ltd.
1221 Lamar, Suite 1600
Houston, Texas 77010

2. Article Number
(Transfer from service label)

7004 1160 0005 8659 9120

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 4/14/05

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 ☐ No

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:

Nancy J. Allen
3623 Overbrook Drive
Fort Worth, Texas

2. Article Number
(Transfer from service label)

7004 1160 0005 8659 9144

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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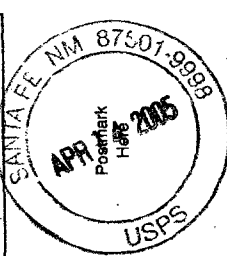
OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To
Nancy J. Allen
3623 Overbrook Drive
Fort Worth, Texas 75205
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions



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OFFICIAL USE

Postage \$
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 New Mexico Western Minerals, Inc.
 P. O. Box 1738
 Roswell, New Mexico 88202
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

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:

Margaret Wysocki
 721 Robins Lane Road
 Lansing, Michigan 48913

2. Article Number (Transfer from service label)
 7003 2260 0006 7451 2502

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Margaret Wysocki
 Agent
 Addressee

B. Received by (Printed Name)
 Margaret Wysocki
 C. Date of Delivery

D. Is delivery address different from item 1? ☒ Yes
 If YES, enter delivery address below: ☐ No
 721 Robins Rd
 Lansing, MI 48917

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

Domestic Return Receipt
 102595-02-M-1540

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:

New Mexico Western Minerals, Inc.
 P. O. Box 1738
 Roswell, New Mexico 88202

2. Article Number (Transfer from service label)
 7004 1160 0005 8659 9090

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Sandra Arice
 Agent
 Addressee

B. Received by (Printed Name)
 Sandra Arice
 C. Date of Delivery
 4-20-05

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

Domestic Return Receipt
 102595-02-M-1540

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OFFICIAL USE

Postage \$
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Postmark Here

Sent To
 Margaret Wysocki
 721 Robins Lane Road
 Lansing, Michigan 48913
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

0606 6598 5000 0977 4002

2052 7542 9000 0922 6002

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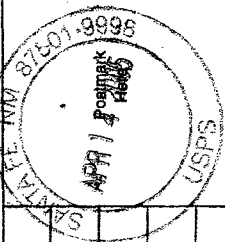
OFFICIAL USE

Postage \$
 Certified Fee
 Return Receipt Fee
 Restricted Delivery Fee
 Total Postage & Fees \$

Sent To
 Nuevo Seda L.P.
 P. O. Box 2588
 Roswell, New Mexico 88202
 Street Apt. No. or PO Box No.
 City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

7965 6966 0000 0660 5002



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:
 ExtonMobil
 P. O. Box 4610
 Houston, Texas 77210-4610

2. Article Number (Transfer from service label)
 7005 0390 0000 9969 5082

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X GEE
 B. Received by (Printed Name) APR 1 10 2005
 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

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:
 Nuevo Seda L.P.
 P. O. Box 2588
 Roswell, New Mexico 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X Marie E. Schwartz
 B. Received by (Printed Name) APR 1 4 2005
 C. Date of Delivery 4-18-05
 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

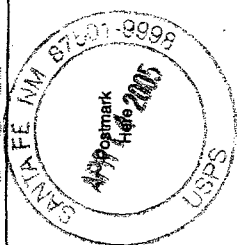
2. Article Number (Transfer from service label)
 7005 0390 0000 9969 5761

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

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OFFICIAL USE

Postage \$
 Certified Fee
 Return Receipt Fee
 Restricted Delivery Fee
 Total Postage & Fees \$



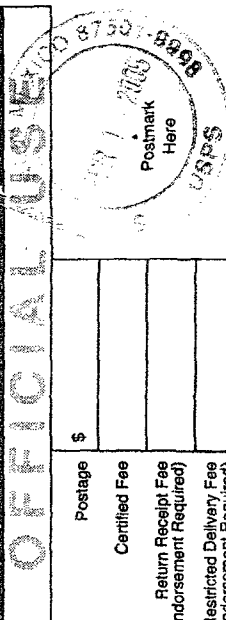
Sent To
 ExtonMobil
 P. O. Box 4610
 Houston, Texas 77210-4610
 Street Apt. No. or PO Box No.
 City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

2905 6966 0000 0660 5002

**U.S. Postal Service™
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Postage \$
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$

Sent To
Billy Joe and Rosemarie Markham, Trustees
2315 Little Road, #108
Arlington, Texas 76106
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

7005 0390 0000 0669 5679

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:

Dona Edwards, Trustee of the C. B. Markham Estate Trust
2512 Metzger Road S.W.
Albuquerque, New Mexico 87105-6336

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

7005 0390 0000 9969 5693

Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Dona Edwards ☐ Agent ☐ Addressee
B. Received by (Printed Name) *Dona Edwards* ☐ Date of Delivery
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

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:

Billy Joe and Rosemarie Markham, Trustees
2315 Little Road, #108
Arlington, Texas 76106
City, State, ZIP+4

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

7005 0390 0000 9969 5679

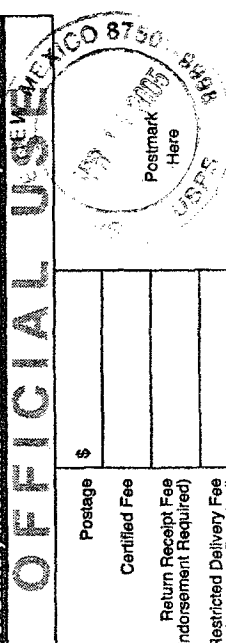
102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

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Postage \$
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$

Sent To
Dona Edwards, Trustee of the C. B. Markham Estate Trust
2512 Metzger Road S.W.
Albuquerque, New Mexico 87105-6336
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

7005 0390 0000 0669 5693

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To
Street, Apt. No.,
or PO Box No.
City, State, ZIP+4

Roy E. Kinsey, Jr.
500 North Big Spring, Suite 502
Midland, Texas 79701

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:

Hilliard Oil and Gas, Inc.
601 Poydras, Suite 1900
New Orleans, Louisiana 70130

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

7003 2260 0006 7451 2304

Domestic Return Receipt

102595-02-M-1540

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:

Roy E. Kinsey, Jr.
500 North Big Spring, Suite 502
Midland, Texas 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

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

7003 2260 0006 7451 2328

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

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

7003 2260 0006 7451 2304

Domestic Return Receipt

102595-02-M-1540

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To
Street, Apt. No.,
or PO Box No.
City, State, ZIP+4

Hilliard Oil and Gas, Inc.
601 Poydras, Suite 1900
New Orleans, Louisiana 70130

PS Form 3800, June 2002 See Reverse for Instructions

7003 2260 0006 7451 2304

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Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
 Mohammed Y. Merchant
 P. O. Box 2769
 Hobbs, New Mexico 88241
 City, State, Zip+4

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:

Mohammed Y. Merchant
 P. O. Box 2769
 Hobbs, New Mexico 88241

2. Article Number
(Transfer from service label) 7003 2260 0006 7451 2403

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature *X* Mohammed Y. Merchant Agent
 B. Received by (Printed Name) Mohammed Y. Merchant Date of Delivery 4-9-05
 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 ☐ No

PS Form 3800, June 2002 See Reverse for Instructions 102595-02-M-1540

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:

Floyd Hugh Davis
 22301 Hamilton Pool Road
 Dripping Springs, Texas 78620

2. Article Number
(Transfer from service label) 7003 2260 0006 7451 2434

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature *X* Floyd Hugh Davis Agent
 B. Received by (Printed Name) Floyd Hugh Davis Date of Delivery 4-7-05
 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 ☐ No

PS Form 3800, June 2002 See Reverse for Instructions 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *X* Floyd Hugh Davis Agent
 B. Received by (Printed Name) Floyd Hugh Davis Date of Delivery 4-7-05
 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 ☐ No

Domestic Return Receipt
 7003 2260 0006 7451 2434

PS Form 3800, June 2002 See Reverse for Instructions 102595-02-M-1540

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Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
 Floyd Hugh Davis
 22301 Hamilton Pool Road
 Dripping Springs, Texas 78620
 City, State, Zip+4

PS Form 3800, June 2002 See Reverse for Instructions 102595-02-M-1540

U.S. Postal ServiceTM
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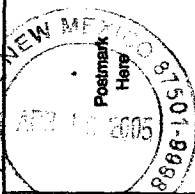
Postage \$
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

Sempura Energy Production Company
 8235 Douglas Avenue, Suite 525
 Dallas, Texas 75225

PS Form 3800, June 2002 See Reverse for Instructions

4262 7542 9000 0922 E002



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:

Hawkeye Resources, Inc.
 P. O. Box 200715
 Austin, Texas 78720-0715

2. Article Number
 (Transfer from service label)

7003 2260 0006 7451 2366

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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:

Sempura Energy Production Company
 8235 Douglas Avenue, Suite 525
 Dallas, Texas 75225

- 3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ C.O.D.
☐ Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
 (Transfer from service label)

7003 2260 0006 7451 2373

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

- 3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ C.O.D.
☐ Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
 (Transfer from service label)

7003 2260 0006 7451 2373

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

- 3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.
☐ Restricted Delivery? (Extra Fee) ☐ Yes

7003 2260 0006 7451 2366

Domestic Return Receipt

102595-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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OFFICIAL USE

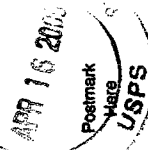
Postage \$
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

Hawkeye Resources, Inc.
 P. O. Box 200715
 Austin, Texas 78720-0715

PS Form 3800, June 2002

See Reverse for Instructions



4262 7542 9000 0922 E002

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To
Pricilla Davis Gravelly
3510 St. Johns
Dallas, Texas 75205
City, State, Zip+4

PS Form 3800, June 2002 See Reverse for Instructions

2242 7542 9000 0922 E002

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:

Ronald Toomy Betenborough, Trustee
c/o Mrs. Don Saye
P. O. Box 2374
Milan, New Mexico 87021

2. Article Number

(Transfer from service label)

7004 2260 0005 8659 8918

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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:

Pricilla Davis Gravelly
3510 St. Johns
Dallas, Texas 75205

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number

(Transfer from service label)

7003 2260 0006 7451 2427

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

204190

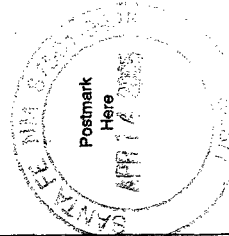
8768 6598 5000 0917 4002

U.S. Postal ServiceTM
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To
Street, Apt. No.,
or PO Box No.
City, State, Zip+4

Ronald Toomy Betenborough, Trustee
c/o Mrs. Don Saye
P. O. Box 2374
Milan, New Mexico 87021

PS Form 3800, June 2002 See Reverse for Instructions

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To
Street, Apt. No.,
or PO Box No.
City, State, ZIP+4

Fleet, Inc.
P. O. Box 2769
Hobbs, New Mexico 88241

Postmark Here
APR 14 2005
8668-10928
SARAFATE NEW MEXICO

PS Form 3800, June 2002 See Reverse for Instructions

0142 1542 9000 0922 E002

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:

Leta Betenbough Trust
c/o Mrs. Don Saye
P. O. Box 2374
Milan, New Mexico 87021

2. Article Number
(Transfer from service label)

7004 1160 0005 8659 8901

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Don Saye* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Don Saye* C. Date of Delivery *4/18/05*

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

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:

Fleet, Inc.
P. O. Box 2769
Hobbs, New Mexico 88241

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7003 2260 0006 7451 2410

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Don Saye* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Don Saye* C. Date of Delivery *4-18-05*

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

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Sent To

Leta Betenbough Trust
c/o Mrs. Don Saye
P. O. Box 2374
Milan, New Mexico 87021

PS Form 3800, June 2002 See Reverse for Instructions

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OFFICIAL USE

Postmark Here
APR 14 2005
8668-10928
SARAFATE NEW MEXICO

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Sent To

Leta Betenbough Trust
c/o Mrs. Don Saye
P. O. Box 2374
Milan, New Mexico 87021

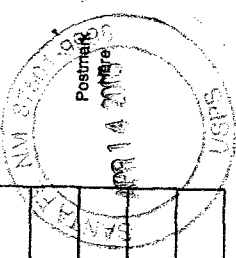
PS Form 3800, June 2002 See Reverse for Instructions

7004 1160 0005 8659 8901

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Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	



Sent To
Kathryn McCormick
2705 Westwind Road
Las Cruces, New Mexico 88007
City, State, ZIP+4

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:

Elliott Industries
P. O. Box 1355
Roswell, New Mexico 88202-1355

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

7005 0390 0000 9969 5747

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Suzanne Williams* C. Date of Delivery *5-2-05*

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 ☐ No

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:

Kathryn McCormick
2705 Westwind Road
Las Cruces, New Mexico 88007

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number
(Transfer from service label)

7004 1160 0005 8659 8895

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

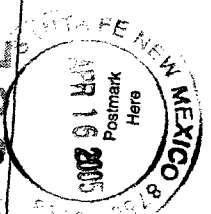
COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *[Blank]* C. Date of Delivery *4-19-05*

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

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	



Sent To

Elliott Industries
P. O. Box 1355
Roswell, New Mexico 88202-1355

PS Form 3800, June 2002

See Reverse for Instructions

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

Elliot-Hall Company
P. O. Box 1231
Ogden, Utah 84402

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:

Tip and Naoma Barrios Revocable Trust
P. O. Box 216
Tatum, New Mexico 88267

2. Article Number
(Transfer from service label)

7005 0390 0000 9969 5099

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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:

Elliot-Hall Company
P. O. Box 1231
Ogden, Utah 84402

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]*

B. Received by (Printed Name) *[Signature]*

C. Date of Delivery *4-22-05*

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 ☐ No

2. Article Number
(Transfer from service label)

7005 0390 0000 9969 5754

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]*

B. Received by (Printed Name) *[Signature]*

C. Date of Delivery *5/11/05*

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 ☐ No

2. Article Number
(Transfer from service label)

7005 0390 0000 9969 5099

Domestic Return Receipt

102595-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

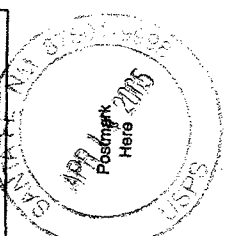
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

Tip and Naoma Barrios Revocable Trust
P. O. Box 216
Tatum, New Mexico 88267



PS Form 3800, June 2002 See Reverse for Instructions

6605 6966 0000 0600 5002

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Sent To

Donna M. and LeDonna Markham, Trustees
P.O. Box 241
Center Point, Texas 78010
City, State, ZIP+4

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:

Donna M. and LeDonna Markham, Trustees
P.O. Box 241
Center Point, Texas 78010

2. Article Number
(Transfer from service label)

7005 0390 0000 9969 5723

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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:

Clarence R. and Joyce Markham
3110 - 38th Street
Lubbock, Texas 79413

2. Article Number
(Transfer from service label)

7005 0390 0000 9969 5730
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* ☒ Agent ☐ Addressee
- B. Received by (Printed Name) *Donna M. and LeDonna Markham* C. Date of Delivery *4-22-05*
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail
- ☐ Registered
- ☐ Insured Mail
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7005 0390 0000 9969 5723

Domestic Return Receipt

102595-02-M-1540

U.S. Postal ServiceTM
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OFFICIAL USE

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Sent To

Clarence R. and Joyce Markham
3110 - 38th Street
Lubbock, Texas 79413
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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OFFICIAL USE

1. Article Addressed to:

Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Sent To

Jean S. Sullivan Revocable Trust
 c/o Carlsbad National Bank, Trustee
 P. O. Box 1359
 Carlsbad, New Mexico 88220

Street, Apt. No., or PO Box No.

City, State, ZIP+4

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:

2. Article Number (Transfer from service label) 7004 1160 0005 8659 8956

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

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☐ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

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

2. Article Number (Transfer from service label) 7003 2260 0006 7451 2342

PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540

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:

2. Article Number (Transfer from service label) 7003 2260 0006 7451 2342

PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Sent To

Elk Oil Company
 P. O. Box 310
 Roswell, New Mexico 88202-0310

City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

2. Article Number (Transfer from service label) 7004 1160 0005 8659 8956

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

**U.S. Postal Service™
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OFFICIAL USE



Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
Irene Browne Griffin
12 Monadnock Road
Worcester, Massachusetts 01609
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

9281 6442 9000 0922 E002

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:

Sarah Elizabeth Browne Trust
3207 South Utica Avenue
Tulsa, Oklahoma 74114

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
Sarah Elizabeth Browne

B. Received by (Printed Name) C. Date of Delivery
Sarah Elizabeth Browne *4/14/05*

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

7004 1160 0005 8659 9083

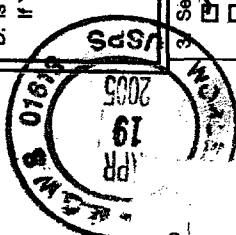
102595-02-M-1540

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:

Irene Browne Griffin
12 Monadnock Road
Worcester, Massachusetts 01609



COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
Sarah Elizabeth Browne

B. Received by (Printed Name) C. Date of Delivery
Sarah Elizabeth Browne *4/19/05*

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

7003 2260 0006 7449 1876

PS Form 3811, February 2004 Domestic Return Receipt

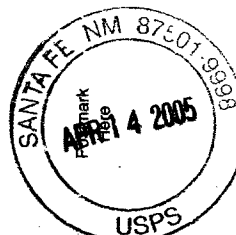
102595-02-M-1540

**U.S. Postal Service™
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	



Sent To
Sarah Elizabeth Browne Trust
3207 South Utica Avenue
Tulsa, Oklahoma 74114
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

7004 1160 0005 8659 9083

U.S. Postal Service™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$

Sent To
Sheryl Ann Betenbough Dennis
18163 East Riverview Drive
Austintown, Ohio 44010
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

APR 14 2005 8666-101 8666-101

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:
Georgi Davis
6802 Rockledge Cove
Austin, Texas 78731

2. Article Number (Transfer from service label)
7003 2260 0006 7451 2380

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X F. Koller
B. Received by (Printed Name)
F. Koller
C. Date of Delivery
4/19/05
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

102595-02-M-1540

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:
Sheryl Ann Betenbough Dennis
18163 East Riverview Drive
Austintown, Ohio 44010

2. Article Number (Transfer from service label)
7004 1160 0005 8659 8949

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

U.S. Postal Service™ RECEIPT
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OFFICIAL USE

Postage \$
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$

Sent To
Georgi Davis
6802 Rockledge Cove
Austin, Texas 78731
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

APR 14 2005 8666-101 8666-101

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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For delivery information visit our website at www.usps.com.

OFFICIAL USE

Postage \$
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$

Sent To
Rick F. Haller
233 East Terra Alta
San Antonio, Texas 78209

Street, Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

APR 14 2005
Postmark Here
SAN ANTONIO, TX 78209

2868 6598 5000 0977 4002

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:
Sheila Moman
3502 East 5th Place
Tulsa, Oklahoma 74112

2. Article Number (Transfer from service label)
7004 1160 0005 8659 9069

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery 5-10-05
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

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:
Rick F. Haller
233 East Terra Alta
San Antonio, Texas 78209

2. Article Number (Transfer from service label)
7004 1160 0005 8659 8987

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery 4-19-08
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

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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OFFICIAL USE

Postage \$
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$

Sent To
Sheila Moman
3502 East 5th Place
Tulsa, Oklahoma 74112

City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

6906 6598 5000 0977 4002

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE

UNIT ID: 0500

Postage	\$ 0.37
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	4.42
Total Postage & Fees	\$ 8.84

Sent To: Wayne L. Betenbough
 11100 Gibson S.E.
 No. B-23
 Albuquerque, NM 87123

City, State, ZIP+4

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:

2. Article Number (Transfer from service label) 7005 0390 0001 6037 8890

PS Form 3811, February 2004 Domestic Return Receipt Cat 1-5 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Wayne L. Betenbough*

B. Received by (Printed Name) *Wayne L. Betenbough*

C. Date of Delivery *2/26/05*

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 ☐ No

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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OFFICIAL USE

UNIT ID: 0500

Postage	\$ 0.37
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	4.42
Total Postage & Fees	\$ 8.84

Sent To: Wayne L. Betenbough
 11100 Gibson S.E.
 No. B-23
 Albuquerque, NM 87123

City, State, ZIP+4

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:

2. Article Number (Transfer from service label) 7004 1160 0005 8659 9038

PS Form 3811, February 2004 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature *M. H. McGrath*

B. Received by (Printed Name) *M. H. McGrath*

C. Date of Delivery *2/26/05*

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.

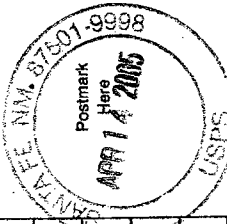
4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

U.S. Postal ServiceTM
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(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To
 Dora L. McKnight
 P. O. Box 1738
 Roswell, New Mexico 88202-1738
 Street, Apt. No. or PO Box No.
 City, State, Zip+4

PS Form 3800, June 2002 See Reverse for Instructions

1206 6598 5000 0911 4002

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:

Dora L. McKnight
 P. O. Box 1738
 Roswell, New Mexico 88202-1738

2. Article Number
(Transfer from service label)

7004 1160 0005 8659 9021

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *X* Sandra Carria ☐ Agent ☒ Addressee
 B. Received by (Printed Name) Sandra Carria C. Date of Delivery 4-20-05
 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 ☐ No

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:

Matthew Ernest Browne
 16930 Caibach
 Houston, Texas 77084

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

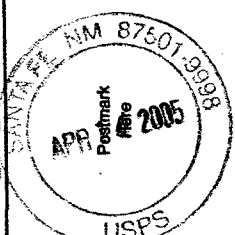
102595-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To
 Matthew Ernest Browne
 16930 Caibach
 Houston, Texas 77084
 Street, Apt. No. or PO Box No.
 City, State, Zip+4

PS Form 3800, June 2002 See Reverse for Instructions

6222 6112 9000 0922 8002

U.S. Postal ServiceTM
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OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
 Ernest Oberling O'Brien Trust
 P. O. Box 6655
 Shreveport, Louisiana 71136-6655
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4
 PS Form 3800, June 2002 See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com
OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
 Ernest Oberling O'Brien Trust
 P. O. Box 6655
 Shreveport, Louisiana 71136-6655
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4
 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:

Virginia F. Zobeck
 8003 Wayne
 Lubbock, Texas 79424

2. Article Number
 (Transfer from service label)

7004 1160 0005 8659 9014

PS Form 3811, February 2004
 Domestic Return Receipt

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com
OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
 Virginia F. Zobeck
 8003 Wayne
 Lubbock, Texas 79424
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4
 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:

Ernest Oberling O'Brien Trust
 P. O. Box 6655
 Shreveport, Louisiana 71136-6655

2. Article Number
 (Transfer from service label)

7005 0390 0000 9969 5624

PS Form 3811, February 2004
 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 Virginia F. Zobeck

C. Date of Delivery
 APR 19 2005

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3800, June 2002 See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com
OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
 Virginia F. Zobeck
 8003 Wayne
 Lubbock, Texas 79424
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4
 PS Form 3800, June 2002 See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To

Street, Apt. No.,
or PO Box No.
City, State, ZIP+4

Cherokee Resources, Inc.
P. O. Box 4214
Odessa, Texas 79760

PS Form 3800, June 2002

See Reverse for Instructions

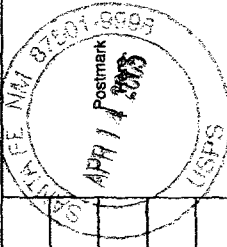
8622 1542 9000 0922 E002

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To

Street, Apt. No.
or PO Box No. 1414 West Hendricks
City, State, ZIP+4® Roswell, New Mexico 88201

PS Form 3800, June 2002 See Reverse for Instructions

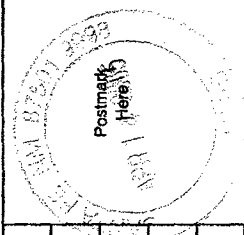
7004 0917 0005 6598 5406

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To

Bill Eden
Douglas, Eden, Phillips, Debugger & Stander
Suite 909
or PO Box No.
City, State, ZIP+4
422 West Riverside
Spokane, Washington 99201

PS Form 3800, June 2002

See Reverse for Instructions

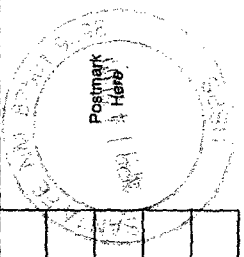
2584 9495 2000 0911 4002

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To: Ernest Smith and
Street, Apt. No.: Edwina Smith
or PO Box No. 40758 Jasper Drive
City, State, ZIP+4 Kingsbury, California 93631

PS Form 3800, June 2002 See Reverse for Instructions

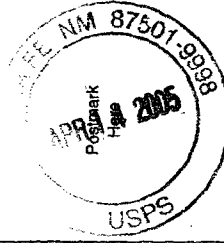
0484 9495 2000 0977 4002

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To

Blackstone Mineral Company LP
1001 Pannun, Suite 2020
Houston, Texas 77002
City, State, ZIP+4

PS Form 3800, June 2002

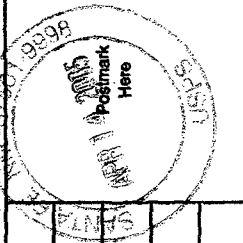
See Reverse for Instructions

2004 160 0005 8659 3395

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To

Sidney Roger Davis
 Street, Apt. No.
 or PO Box No.
 City, State, ZIP+4

Sidney Roger Davis
 4501 Spicewood Springs Road, Suite 1018
 Austin, Texas 78759

PS Form 3800, June 2002

See Reverse for Instructions

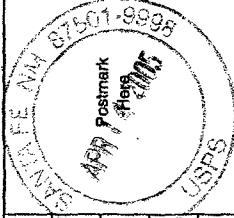
1442 1542 9000 0922 E002

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage \$	
Certified Fee	
Return Recipient Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	



Sent To

Katherine O. Browne Trust

Street, Apt. No.
or PO Box No. 4330 West Plac
St. Louis, Missouri 63108

City, State, Zip+4

PS Form 3800, June 2002 See Reverse for Instructions

9206 6598 5000 0977 4002

PS Form 3811, February 2004

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:

Wells Fargo Bank, N.A., Trustee of the
P. O. Box 1959
Midland, Texas 79702

2. Article Number
(Transfer from service label)

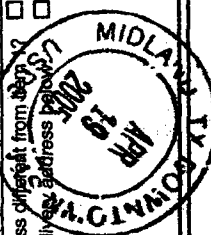
PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature X J. Smith ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Frazier C. Date of Delivery

D. Is delivery address different from above? ☐ 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 ☐ No

7004 1160 0005 8659 8925

Domestic Return Receipt

102595-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Postmark (Here) APR 19 2002

Sent To

Street, Apt. No.,
or PO Box No.
City, State, ZIP+4

Wells Fargo Bank, N.A., Trustee of the
P. O. Box 1959
Midland, Texas 79702

PS Form 3800, June 2002

See Reverse for Instructions

5268 6598 5000 0911 4002

POSTAGE WILL BE PAID BY ADDRESSEE
P.O. BOX 3103
SANTA FE, NM 87504

[Handwritten signature]

5.2.05

RTN TO SENDER UNDER 100g

1st NOTICE
2nd NOTICE
RETURNED

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

Albert D. White, Jr.
202 Sweetwater Boulevard North
Longwood, Florida 32779

ANK

7005 0390 0000 9969 5716

342313 10

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

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

9467
Postmark
Here

W.M.

Sent To

Albert D. White, Jr.
202 Sweetwater Boulevard North
Longwood, Florida 32779

Street, Apt. No.,
or PO Box No.
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

9725 6966 0000 0660 5002

7005 0390 0000 9969 5709

- 1st NOTICE** ☐ Not Deliverable As Addressed
☐ Unable To Forward
☐ Insufficient Address
☐ Moved, Left No Address
☐ Relocated
☐ Refused
☐ Attempted Return Known
☐ Insufficient Address
☐ No Such Street
☐ No Such Number
☐ No Such Office In State
☐ Do not remain in service
- 2nd NOTICE** ☐ No Mail Receipt
☐ Box Closed - No Order
☐ Returned For Better Address
☐ Postage Due

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

Loneta S. Curtis, Trustee
605 South 15th Street
Artesia, New Mexico 88210

4750479553

7005 0390 0000 9969 5709

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

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Sent To

Loneta S. Curtis, Trustee
605 South 15th Street
Artesia, New Mexico 88210

PS Form 3800, June 2002 See Reverse for Instructions

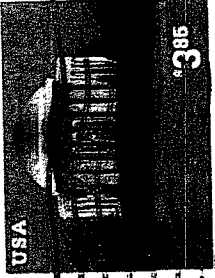
CERTIFIED MAIL™

JAMES BRUCE
P.O. Box 1056
SANTA FE, NM 87504

7003 2260 0006 7450 5498

**Not Deliverable as
Addressed - Unable
to Return to Forwarder**

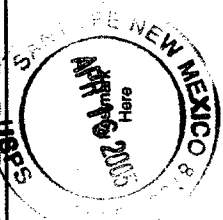
Penroc Oil Corporation
P.O. Box 5970
Hobbs, New Mexico 88241



**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)**
For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To
Penroc Oil Corporation
P.O. Box 5970
Hobbs, New Mexico 88241
City, State, ZIP+4

8645 0542 9000 0922 E002

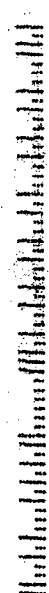


EARLY VOTING BEGINS APR 15 2005

NO SUCH NUMBER

Earl E. and Jacqueline F. Gaertner, Trustees
Jacqueline F. Gaertner Trust
300 West Texas, Suite 802
Midland, Texas 79701

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.
CERTIFIED MAIL™



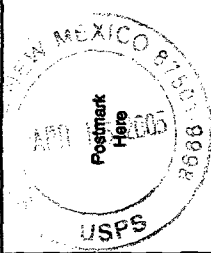
751643650433

7003 2260 0006 7451 2335

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com.

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

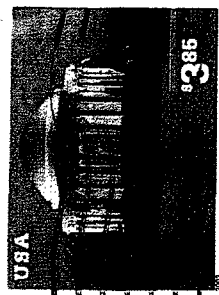


Sent To

Earl E. and Jacqueline F. Gaertner, Trustees
Jacqueline F. Gaertner Trust
300 West Texas, Suite 802
Midland, Texas 79701

596g
1ST NOTICE
2ND NOTICE
RETURN

NOT
FOR THIS
BOX

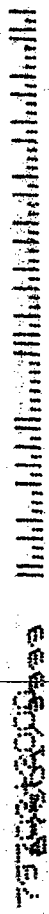


ATTACHED 19
NOT KNOWN

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL™

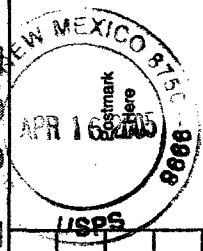
H. C. Hood
P. O. Box 2000
Midland, Texas 79702



7003 2260 0006 7451 2359

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®

OFFICIAL USE



Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To

H. C. Hood
P. O. Box 2000
Midland, Texas 79702

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL™

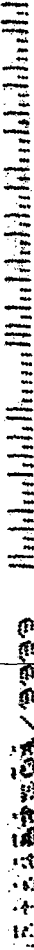
1ST NOTICE
2ND NOTICE
RETURN



NOT DELIVERABLE
AS ADDRESSED,
UNABLE TO FORWARD

07134

Pomeroy Smith 69 Ltd.
3000 North Garfield, Suite 280
Midland, Texas 79705



7003 2260 0006 7451 2311

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com.

OFFICIAL USE



Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To

Pomeroy Smith 69 Ltd.
3000 North Garfield, Suite 280
Midland, Texas 79705

Street, Apt. No., or PO Box No.

City, State, ZIP+4

See Reverse for Instructions

1122 1542 9000 0922 E002

JAMES BRUCE
PO BOX 1056
SANTA FE NM 87504

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL™

Estate of Rod M. Nugent

c/o Marjorie M. Nugent, Executrix
111 Dixie Lake West
Carthage, Texas 75633

UTP

75633 875633 10

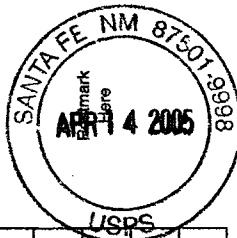
7004 1160 0005 8559 9106

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

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To

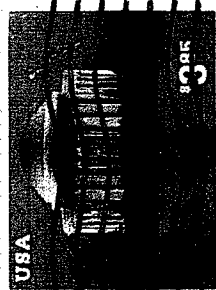
Estate of Rod M. Nugent
c/o Marjorie M. Nugent, Executrix
111 Dixie Lake West
Carthage, Texas 75633
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

9076 6598 5000 0911 4002

JAMES F. FINE
P.O. BOX 3003
SANTA FE, NM 87504



- ☒ Insufficient Address **12/24**
- ☒ No Such Number
- ☐ Undelivered ☐ Refused
- ☐ Attempted - Not Known
- ☐ No Such Street
- ☐ Vacant
- ☐ No Mail Recipients
- ☐ Not Del. Unable

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL

Harcor Energy, Inc.
9401 Wilshire Boulevard, Suite 570
Beverly Hills, California 90212

90212+2324

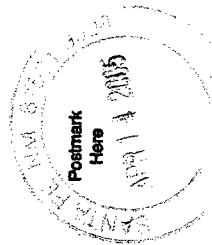
7003 2260 0006 7451 2450

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Recipient Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To

Harcor Energy, Inc.
9401 Wilshire Boulevard, Suite 570
Beverly Hills, California 90212

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

JAMES BRUCE
PO BOX 1056
SANTA FE NM 87504



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLDED AT DOTTED LINE

CERTIFIED MAIL™

Helm Energy, LLC

1775 Sherman Street, Suite 1955
Denver, Colorado 80203

2004 1160 0005 8659 9052

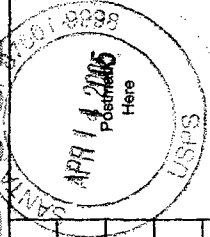
7004 1160 0005 8659 9052

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

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



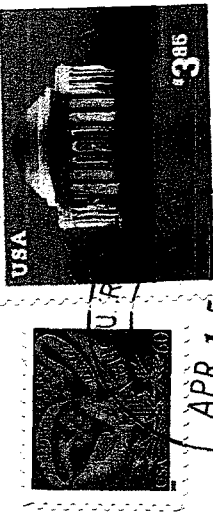
Sent To

Helm Energy, LLC
1775 Sherman Street, Suite 1955
Denver, Colorado 80203

Street, Apt. No.,
or PO Box No.
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions



- ☐ MOVED, LEFT NO ADDRESS
- ☒ NOT DELIVERABLE AS ADDRESSED
- ☐ UNABLE TO FORWARD
- ☐ UNCLAIMED - NOT KNOWN
- ☐ NO SUCH STREET - REFUSED
- ☐ DO NOT RECALL - NUMBER
- ☐ INSUFFICIENT ADDRESS
- ☐ NO MAIL RECEIPTABLE
- ☐ PAY CLOSED NO ORDER

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

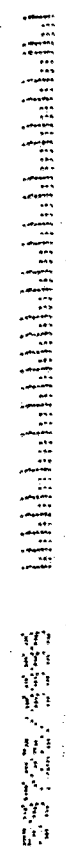
CERTIFIED MAIL™

Jesse F. Barnes
 3200 Highway 91
 Dillon, Montana 59725

1st NOTICE **APR 18 2005**

2nd NOTICE
 RETURN **MAY 03 2005**

7005 0390 0000 9969 5143



U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To Jesse F. Barnes 3200 Highway 91 Dillon, Montana 59725 City, State, ZIP+4	

7005 0390 0000 0660 5002

7504/3933

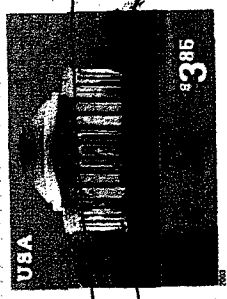
7003 2260 0006 7451 2472

21ST NOTICE
2ND NOTICE
RETURN

JAMES BRIDE
P.O. BOX 1113
SANTA FE, NM 87504

5505
4/18/05
C-2

RETURN
TO SENDER
ATTEMPTED
NOT KNOWN



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
CERTIFIED MAIL™

Etz Oil Properties
1307 West Third
Roswell, New Mexico 88201

7504/3933

7003 2260 0006 7451 2472

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com
OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here
APR 14 2005
SANTA FE NM 87504

Sent To

Etz Oil Properties
1307 West Third
Roswell, New Mexico 88201

Street, Apt. No.,
or PO Box No.
City, State, Zip+4

PS Form 3800, June 2002 See Reverse for Instructions

2262 7504 9000 0922 E002

JAMES BRUCE
PO BOX 1856
SANTA FE NM 87504



- ☐ Undeliverable as Addressed
- ☐ Moved, Left No Address
- ☐ Undelivered
- ☒ Refused
- ☐ Attempted - Not Known
- ☐ No Such Street
- ☐ No Such Number
- ☐ No Receipt
- ☐ Deceased
- ☐ Vacant

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL™

7004 1160 0005 8659 8932

1377494956

1160 0005 8659 8932

Wayne Lamar Betenbough
6901 Zuni S.E.
Albuquerque, New Mexico 87108

U.K.

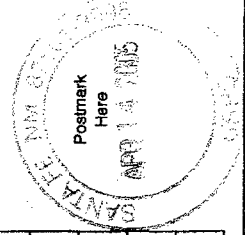


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	



Sent To

Wayne Lamar Betenbough
6901 Zuni S.E.
Albuquerque, New Mexico 87108

PS Form 3800, June 2002

See Reverse for Instructions

JAMES BRUCE
PO BOX 1056
SANTA FE NM 87504

POST NOTICE
RETURNED TO
SENDER
UNDELIVERABLE AS ADDRESSED
INABLE TO FORWARD

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL™

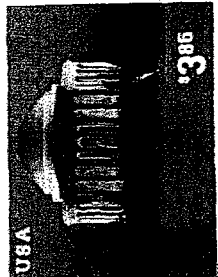
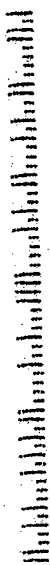
7004 1160 0005 8659 3388

3388 1160 0005 8659 7004

RTS FOR REASON SHOWN

RETURNED TO
SENDER
UNDELIVERABLE AS ADDRESSED
INABLE TO FORWARD

Pure Energy Group
700 North St. Mary's Street, Suite 1925
San Antonio, Texas 78205

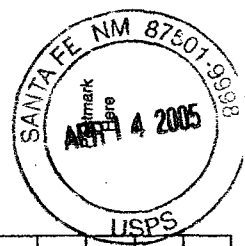


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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To

Pure Energy Group
700 North St. Mary's Street, Suite 1925
San Antonio, Texas 78205
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

JAMES BRUCE
PO BOX 1050
SANTA FE NM 87504

1ST NOTICE
2ND NOTICE
RETURN

- ☒ Forwarding Order Expired
☐ Insufficient Address
☐ Incorrect, Left No Address
☐ Unclaimed / Refused
☐ No Such Street
☐ No Such Number
☐ No Receipts
☐ Deceased
☐ Vacant

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

7004 1160 0005 8659 8970

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OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	



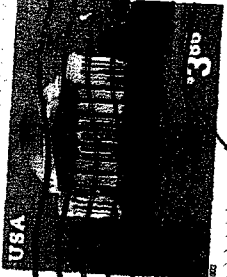
Sent To

Jack Chandler Halter
2107 New Mexico Street
Baytown, Texas 77521

Street, Apt. No.,
or PO Box No.
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions



ARTSX - UNDER 400g

NOVA *UNK*

Jeff S. Votaw
13729 Research Boulevard, Suite 610, Box 105
Austin, Texas 78750

11236 92

7003 2260 0006 7451 2204

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.
CERTIFIED MAIL[™]

1ST NOTICE
2ND NOTICE
RETURN

Service[™]
D MAIL[™] RECEIPT
Only: No Insurance Coverage Provided

Information visit our website at www.usps.com
OFFICIAL USE



Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To: **Jeff S. Votaw**
13729 Research Boulevard, Suite 610, Box 105
Austin, Texas 78750

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

7003 2260 0006 7451 2204

950 822874307521

1ST NOTICE _____
2ND NOTICE _____
RETURN _____



**NOT DELIVERABLE
AS ADDRESSED,
UNABLE TO FORWARD**

UAG

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL

William R. Proctor, Executor of the Estate of Pete Proctor
82 San Clemente Circle
Odessa, Texas 79765

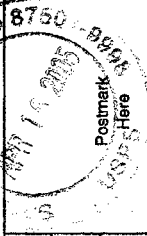
7005 0390 0000 9969 5686

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To

William R. Proctor, Executor of the Estate of Pete Proctor
82 San Clemente Circle
or PO
Odessa, Texas 79765
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

9995 6966 0000 0660 5002

JAMES BRUCE
PO BOX 1056
SANTA FE NM 87504

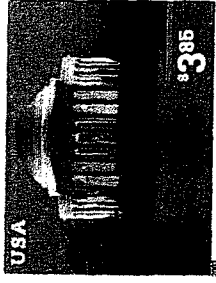
42365

1ST NOTICE
2ND NOTICE
RETURN

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
CERTIFIED MAIL

60
NTR

Marjorie M. Nugent
111 Dixie Lake West
Carthage, Texas 75633



7004 1160 0005 8659 9113 1502343387504210

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To
Marjorie M. Nugent
111 Dixie Lake West
Carthage, Texas 75633
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

APR 14 2005
NM 87501-9998
Postmark

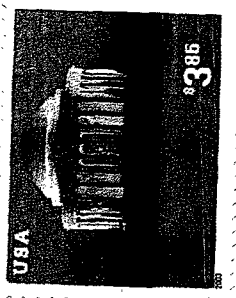
7004 1160 0005 8659 9113

JAMES BRUCE
PO BOX 1056
SANTA FE NM 87504

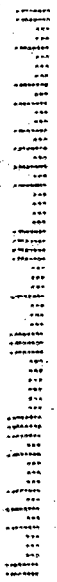
5965
NOTICE
RETURN

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
CERTIFIED MAIL

7003 2260 0006 7449 2361
01471835028101



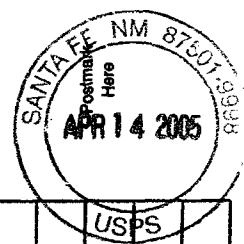
Stadium 5 LLC
750 North St. Paul, Suite 1530
Dallas, Texas 75201



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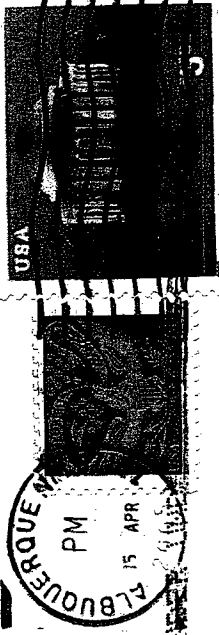
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To
Stadium 5 LLC
750 North St. Paul, Suite 1530
Dallas, Texas 75201

PS Form 3800, June 2002
See Reverse for Instructions

19E2 6hh2 9000 0922 E002



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL™

Elmer L. Barnes
114 Variety Tree Circle
Altamonte, Florida 32701

MB

327147583

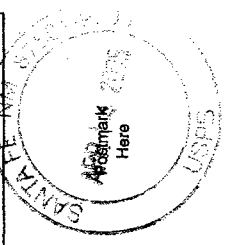
7005 0390 0000 778 1 J35

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To

Elmer L. Barnes
114 Variety Tree Circle
Altamonte, Florida 32701

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

0515 6966 0000 06E0 5002



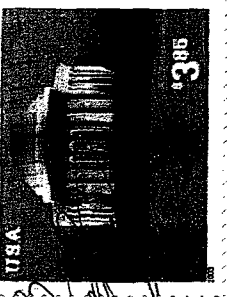
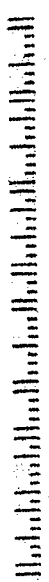
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD - MESA AZ 85215

87504
42805
1ST NOTICE
2ND NOTICE
RETURN

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
CERTIFIED MAIL™

7005 0370 0000 4764 563J

145 72



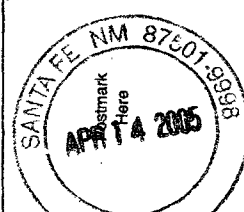
1st NOTICE
4.18
2nd NOTICE
RETURN

Gae Ratcliff and Billy J. Markham, Co-Trustees
P. O. Box 21346
Mesa, Arizona 85277-1346

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To	Gae Ratcliff and Billy J. Markham, Co-Trustees
Street, Apt. No.	P. O. Box 21346
or PO Box No.	Mesa, Arizona 85277-1346
City, State, ZIP+4	

PS Form 3800, June 2002 See Reverse for Instructions

7E95 6966 0000 06ED 5002

JAMES DUCHE
PO BOX 1056
SANTA FE NM 87504

1ST NOTICE
2ND NOTICE
RETURN

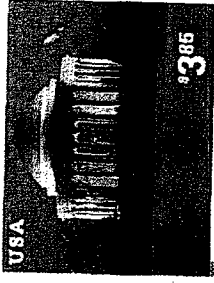
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL

7004 1160 0005 8659 8965

- ☒ Not Deliverable As Addressed
☐ Unable To Perform
☐ Insufficient Address
☐ Moved - Last No Address
☐ Invalid
☐ Attempted - Not Return
☐ No Such Street
☐ Hazard
☐ No Mail Receipts
☐ Box Closed - No Order
☐ Returned For Better Address
☐ Postage Due

Mary Jane Hand
P. O. Box 455
La Luz, New Mexico

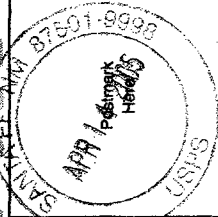


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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To

Mary Jane Hand
P. O. Box 455
La Luz, New Mexico 88337

PS Form 3800, June 2002

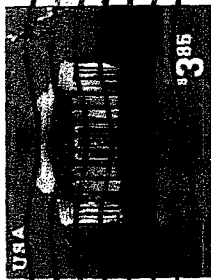
See Reverse for Instructions

2005 0911 5000 9658 6969

JAMES BRUCE
PO BOX 1056
SANTA FE NM 87504

NOTICE
TO RETURN

FORWARDING
ORDER EXPIRED



FOR 11/5 SCANNED

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL

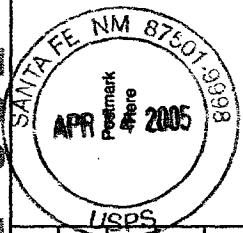
Kelley Leigh O'Brien
11 River Ridge Road
Broken Arrow, Oklahoma

7003 2260 0006 7449 2354

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OFFICIAL USE



Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To

Kelley Leigh O'Brien
11 River Ridge Road
Broken Arrow, Oklahoma 74014

Street, Apt. No.
or PO Box No.
City, State, Zip

See Reverse for Instructions

PS Form 3800, June 2002

h5E2 6442 9000 0922 E002