

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

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

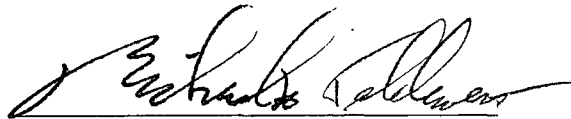
**APPLICATION OF COG OPERATING LLC FOR
A NON-STANDARD SPACING AND PRORATION
UNIT AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.**

CASE NO. 14971

AFFIDAVIT

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


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


Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 20th day of March 2013 by Michael H. Feldewert.



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


Notary Public

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 4
Submitted by:
COG OPERATING LLC
Hearing Date: March 21, 2013

HOLLAND & HART LLP



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

March 1, 2013

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSET OWNERS

Re: Application of COG Operating LLC for non-standard spacing and proration unit and compulsory pooling; Eddy County, New Mexico - Falabella 31 Fee 6H Well (API #30-015-40211)

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division seeking an order creating a non-standard spacing unit comprised of the E/2 W/2 of Section 31, Township 18 South, Range 26 East, NMPM, Eddy County, New Mexico. As a mineral lessee or operator in the offsetting properties, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on March 21, 2013. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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

Questions concerning this application should be directed to Katie Mohebkhosravi, at Concho Resources, Inc., (432) 221-0333.

Sincerely,

Michael H. Feldewert

Holland & Hart LLP

Phone [505] 988-4421 Fax [505] 983-6043 www.hollandhart.com

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

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

HOLLAND & HART LLP



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

March 1, 2013

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: AFFECTED INTEREST OWNERS

Re: Application of COG Operating LLC for non-standard spacing and proration unit and compulsory pooling; Eddy County, New Mexico - Falabella 31 Fee 6H Well (API #30-015-40211)

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. As an interest owner subject to this pooling application, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on March 21, 2013. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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

Questions concerning this application should be directed to Katie Mohebkhosravi, at Concho Resources, Inc. (432) 221-0333.

Sincerely,

Michael H. Feldewert

Holland & Hart LLP

Phone [505] 988-4421 Fax [505] 983-6043 www.hollandhart.com

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

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

**NOTICE LIST
COG OPERATING LLC
FALABELLA 31 FEE #6H**

OFFSETS

Oxy Y-1
5 Greenway Plaza, Suite 110
Houston, Texas 77046

Myco Industries, Inc.
105 South 4th Street
Artesia, New Mexico 88210

Abo Petroleum Corporation
105 South 4th Street
Artesia, New Mexico 88210

Marathon Oil Corporation
Attn.: Land Department
5555 San Felipe Street
Houston, Texas 77056

Cimarex Energy Company
600 North Marienfield St.
Midland, Texas 79701

E3 Energy Ltd.
400 W. Illinois Ave. #1620
Midland, Texas 79701

Watts Properties, LLC
Post Office Box 2367
Roswell, New Mexico 88202

POOLED PARTIES

Yates Petroleum Corporation
105 South 4th Street
Artesia, New Mexico 88210

Louis J. Mazzullo
2500 Cherry Creek S Drive
Unit 224
Denver, Colorado 80209

Thomas M. Beall
Post Office Box 3098
Midland, Texas 79702

Mark K. Nearburg
710 Dragon
Austin, Texas 78734

Gretchen B. Nearburg
710 Dragon
Austin, Texas 78734

Richard L. Brown
710 Dragon
Austin, Texas 78734

The Dunn Family Trust
710 Dragon
Austin, Texas 78734

MGC Limited Partnership
710 Dragon
Austin, Texas 78734

The Wright Family Living
Trust
710 Dragon
Austin, Texas 78734

Ameristate Exploration LLC
401 Congress Avenue
Austin, Texas 78701

7006 2760 0001 6376 0485

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 LABEL	
Postage	\$.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31
Postmark Here MAR 2013	
Sent To	
Oxy Y-1	
Street, Apt. or PO Box	
5 Greenway Plaza, Suite 110	
City, State	
Houston, Texas 77046	
PS Form 3800, August 2006 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Signature X <i>Mike Hall</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>Mike Hall</i> C. Date of Delivery <i>3/4/13</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
1. Article Addressed to:		3. Service Type	
Oxy Y-1		<input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
7006 2760 0001 6376 0485			
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

7006 2760 0001 6376 0478

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 LABEL	
Postage	\$.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31
Postmark Here MAR -1 2013	
Sent To	
Myc Industries, Inc.	
Street, Apt. or PO Box	
105 South 4th Street	
City, State	
Artesia, New Mexico 88210	
PS Form 3800, August 2006 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Signature X <i>J. Delgado</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>J. Delgado</i> C. Date of Delivery <i>3-4-13</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
1. Article Addressed to:		3. Service Type	
Myc Industries, Inc.		<input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
7006 2760 0001 6376 0478			
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

7006 2760 0001 6376 0461

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICE OF THE ATTORNEY GENERAL	
Postage	\$.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31
Postmark MAR -1 2013	
Sent To	Abo Petroleum Corporation
Street, Apt. 1 or PO Box N	105 South 4th Street
City, State, Z	Artesia, New Mexico 88210
PS Form 3800, August 2006 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Signature X <i>J. Delgado</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>J. Delgado</i> C. Date of Delivery <i>3-4-13</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
1. Article Addressed to:		3. Service Type	
Abo Petroleum Corporation 105 South 4th Street Artesia, New Mexico 88210		<input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number <i>7006 2760 0001 6376 0461</i> (Transfer from ser)		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004 Domestic Return Receipt		102595-02-M-1540	

7006 2760 0001 6376 0454

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICE OF THE ATTORNEY GENERAL	
Postage	\$.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31
Postmark MAR -1 2013	
Sent To	Marathon Oil Corporation
Street, Apt. 1 or PO Box N	Attn.: Land Department
City, State, Z	5555 San Felipe Street Houston, Texas 77056
PS Form 3800, August 2006 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Signature X <i>Noel Lopez</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>Noel Lopez</i> C. Date of Delivery <i>3-4-13</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:	
1. Article Addressed to:		3. Service Type	
Marathon Oil Corporation Attn.: Land Department 5555 San Felipe Street Houston, Texas 77056		<input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number <i>7006 2760 0001 6376 0454</i> (Transfer from s)		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004 Domestic Return Receipt		102595-02-M-1540	

7006 2760 0001 6376 0447

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICE OF THE ATTORNEY GENERAL	
Postage	\$ 4.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31
Sent to: Cimarex Energy Company 600 North Marienfield St. Midland, Texas 79701	

Postmark Here 1 2013

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION		COMPLETE HERE ON DELIVERY	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature [Signature] <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Cimarex Energy Company 600 North Marienfield St. Midland, Texas 79701		B. Received by (Printed Name) Bonnie Russell	
2. Article Number (Transfer from) 7006 2760 0001 6376 0447		C. Date of Delivery 3-4-13	
3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes			

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

7006 2760 0001 6376 0430

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICE OF THE ATTORNEY GENERAL	
Postage	\$ 6.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31
Sent to: E3 Energy Ltd. 400 W. Illinois Ave. #1620 Midland, Texas 79701	

Postmark Here 1 2013

PS Form 3800, August 2006 See Reverse for Instructions

Returned

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

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

OFFICE *Alameda*

Postage	\$ <i>66</i>
Certified Fee	<i>3.10</i>
Return Receipt Fee (Endorsement Required)	<i>2.55</i>
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ <i>631</i>

Postmark Here *MAR - 1 2013*

Sent To
 Street, or PO E
 City, St

Watts Properties, LLC
 Post Office Box 2367
 Roswell, New Mexico 88202

PS Form 3800, August 2006 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:

Watts Properties, LLC
 Post Office Box 2367
 Roswell, New Mexico 88202

2. Article Number (Transfer from ser): *7006 2760 0001 6376 0423*

ACTION ON DELIVERY

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

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

7006 2760 0001 6376 0348

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 FAILURE	
Postage	\$.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31

Postmark Here MAR - 1 2013

Sent To
 Street, or PO Box
 City, State
 Yates Petroleum Corporation
 105 South 4th Street
 Artesia, New Mexico 88210

PS Form 3800, August 2006 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE, FOLD AT DOTTED LINE

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.	COMPLETE THIS SECTION ON DELIVERY A. Signature X <u>J. Delgado</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <u>J. Delgado</u> C. Date of Delivery <u>3-4-13</u> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:
1. Article Addressed to: Yates Petroleum Corporation 105 South 4th Street Artesia, New Mexico 88210	3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.
2. Article Number (Transfer from service label) 7006 2760 0001 6376 0348	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

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

7006 2760 0001 6376 0355

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 FAILURE	
Postage	\$.66
Certified Fee	3.00
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31

Postmark Here MAR - 1 2013

Sent To
 Street, Apt. or PO Box
 City, State
 Louis J. Mazzullo
 2500 Cherry Creek S Drive
 Unit 224
 Denver, Colorado 80209

PS Form 3800, August 2006 See Reverse for Instructions

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

OFFICIAL LABELS

Postage	\$ 46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31

Postmark Here
 MAR - 1 2013

Se
 Str
 or
 City

Thomas M. Beall
 Post Office Box 3098
 Midland, Texas 79702

PS Form 3800, August 2006

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 LABELS

Postage	\$ 46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31

Postmark Here
 MAR - 1 2013

Se
 Str
 or
 City

Thomas M. Beall
 Post Office Box 3098
 Midland, Texas 79702

PS Form 3800, August 2006

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 LABELS

Postage	\$ 66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31

Postmark Here
 MAR - 1 2013

Se
 Str
 or
 City

Mark K. Nearburg
 710 Dragon
 Austin, Texas 78734

PS Form 3800, August 2006

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 LABELS

Postage	\$ 66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31

Postmark Here
 MAR - 1 2013

Se
 Str
 or
 City

Mark K. Nearburg
 710 Dragon
 Austin, Texas 78734

PS Form 3800, August 2006

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 LABELS

Postage	\$ 66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31

Postmark Here
 MAR - 1 2013

Se
 Str
 or
 City

Mark K. Nearburg
 710 Dragon
 Austin, Texas 78734

PS Form 3800, August 2006

7006 2760 0001 6376 0386

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 RECEIPT

Postage	\$ 6.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31

Postmark Here
MAR - 1 2013

Sent To
 Street, Apt or PO Box
 City, State
 Gretchen B. Nearburg
 710 Dragon
 Austin, Texas 78734

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Gretchen B. Nearburg
 710 Dragon
 Austin, Texas 78734

2. Article Number (Transfer from)
 7006 2760 0001 6376 0386

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X [Signature]
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 Kim Nearburg

C. Date of Delivery
 3/4/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

7006 2760 0001 6376 0393

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 RECEIPT

Postage	\$ 6.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31

Postmark Here
MAR - 1 2013

Sent To
 Street, Apt or PO Box
 City, State
 Richard L. Brown
 710 Dragon
 Austin, Texas 78734

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Richard L. Brown
 710 Dragon
 Austin, Texas 78734

2. Article Number (Transfer from)
 7006 2760 0001 6376 0393

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X [Signature]
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 Kim Nearburg

C. Date of Delivery
 3/4/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

7006 2760 0001 6376 0409

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 LABEL

Postage	\$.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31

Postmark Here
 MAR - 1 2013

Sent To
 Street, Apt or PO Box
 City, State

The Dunn Family Trust
 710 Dragon
 Austin, Texas 78734

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

The Dunn Family Trust
 710 Dragon
 Austin, Texas 78734

2. Article Number (Transfer from)

7006 2760 0001 6376 0409

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X [Signature]
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 Kim Nearburg

C. Date of Delivery
 3/4/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

7006 2760 0001 6376 0416

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 LABEL

Postage	\$.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31

Postmark Here
 MAR - 1 2013

Sent To
 Street, Apt or PO Box
 City, State

MGC Limited Partnership
 710 Dragon
 Austin, Texas 78734

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

MGC Limited Partnership
 710 Dragon
 Austin, Texas 78734

2. Article Number (Transfer from)

7006 2760 0001 6376 0416

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X [Signature]
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 Kim Nearburg

C. Date of Delivery
 3/4/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

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 DELIVERY

Postage \$ 6.31
 Certified Fee 2.55
 Return Receipt Fee (Endorsement Required) 2.55
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 11.41

Postmark
 Here
 MAR 1 2013

Sent To The Wright Family Living
 Street, or PO Box Trust
 City, State, ZIP+4® 710 Dragon
 Austin, Texas 78734

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:

The Wright Family Living
 Trust
 710 Dragon
 Austin, Texas 78734

2. Article Number (Transfer)

7006 2760 0001 6376 1710

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)

Kim Nearburg

C. Date of Delivery

3/4/13

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

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 DELIVERY

Postage \$ 1.66
 Certified Fee 3.10
 Return Receipt Fee (Endorsement Required) 2.55
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 7.31

Postmark
 Here
 MAR - 1 2013

Sent To Ameristate Exploration LLC
 Street, or PO Box 401 Congress Avenue
 City, State, ZIP+4® Austin, Texas 78701

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:

Ameristate Exploration LLC
 401 Congress Avenue
 Austin, Texas 78701

2. Article Number (Transfer)

7006 2760 0001 6376 1703

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)

N. Pena

C. Date of Delivery

3-4-13

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