

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

IN THE MATTER OF THE APPLICATION OF  
COG OPERATING LLC FOR DESIGNATION OF  
A NON-STANDARD OIL SPACING AND  
PRORATION UNIT AND FOR COMPULSORY  
POOLING, LEA COUNTY, NEW MEXICO

Case No. 15027

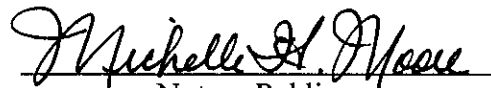
AFFIDAVIT

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

SETH C McMILLAN, attorney and authorized representative of COG Operating LLC,  
the Applicant in NMOCD Case No. 15027, being first duly sworn, upon oath states that he sent  
copies of this Application to the parties as specified on the attached Exhibit A.

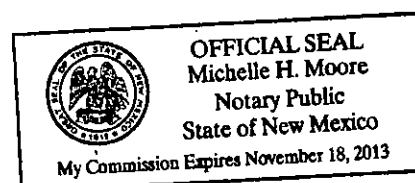
  
\_\_\_\_\_  
SETH C. McMILLAN

SUBSCRIBED AND SWORN to before me this 24<sup>th</sup> day of July, 2013.

  
\_\_\_\_\_  
Notary Public

My Commission Expires: Nov. 18, 2013

487300



## EXHIBIT A

Alice Crouch  
4508 Banister Lane  
Austin, TX 78745

ConocoPhillips Company  
15080 Two Westlake Park  
600 North Dairy Ashford  
Houston, TX 77079-1175

Kyla Taylor Thompson  
1122 Green Valley Rd NW  
Los Ranchos, NM 87107

Betty M. Dressen, a/k/a/ Betty  
Kyte Dressen, Trustee of the  
Betty M. Dressen Revocable  
Living Trust dated 10/17/1977  
P.O. Box 817  
Los Altos, CA 94023-0817

David Bond Kyte  
802 Alameda Padre Serra  
Santa Barbara, CA 93103

Marathon Oil Company  
P.O. Box 3487  
Houston, TX 77253-3487

Cecil Bond Kyte  
P.O. Box 30864  
Santa Barbara, CA 93130

Devon Energy Corporation  
333 W. Sheridan Avenue  
Oklahoma City, OK 73102-  
5010  
Attn: Cari Allen

Mark Hawkins  
P.O. Box 3192  
Midland, TX 79702

Cecile Marie Dressen  
P.O. Box 1696  
Poulsbo, WA 98370

Druella Wilbanks  
P.O. Box 84  
Maljamar, NM 88264

Occidental Oil and Gas Corp.  
5 Greenway Plaza, Suite 110  
Houston, TX 77046  
Attn: Tiffany Pollack

Cecilia Aymond  
9466 Arborhill Drive  
Dallas, TX 75243

Edward Dressen, Jr.  
P.O. Box 830  
Palo Cedro, CA 96073-0830

Philip L. White  
c/o The Blanco Company  
P.O. Box 25968  
Albuquerque, NM 87125

Charles R. Qualia  
P.O. Box 10181  
Midland, TX 79702

F. Andrew Grooms  
P.O. Box 2990  
Ruidoso, NM 88355-2990

Philip L. White, MSU  
P.O. Box 1885  
Santa Fe, NM 87504-1885

Ray Devoe Taylor  
P.O. Box 723  
Tatum, NM 88267

First Roswell Company  
P.O. Box 1797  
Roswell, NM 88202

Chevron North American  
Exploration and Production  
Company  
1400 Smith Street, Room 43198  
Houston, TX 77002  
Attn: Kelly Bass

Halcon Resources  
Corporation  
Meridian Tower, Suite 650  
5100 East Skelly Drive  
Tulsa, OK 74135



**MONTGOMERY  
& ANDREWS**  
LAW FIRM

**SETH C. MCMILLAN**

Direct: 505-986-2519

Email: smcmillan@montand.com

Reply To: Santa Fe Office

www.montand.com

July 3, 2013

Marathon Oil Company  
P.O. Box 3487  
Houston, TX 77253-3487

**Via Certified Mail  
Return Receipt Requested**

**Re: NMOCD Case No. 15027: Application of COG Operating LLC for Designation of a Non-Standard Oil Spacing and Proration Unit and for Compulsory Pooling, Lea County, New Mexico**

Dear Sir or Madam:

This is to advise that COG Operating LLC has filed an application with the New Mexico Oil Conservation Division for an order consolidating the 40-acre spacing units within the N/2 N/2 of Section 9, Township 17 South, Range 32 East, NMPM, Lea County, New Mexico and designating the consolidated units as a 160-acre± non-standard oil spacing and proration unit for a well location in the Yeso formation, West Maljamar Yeso Pool (44500) for Applicant's horizontal drilling project area.

Applicant further seeks the compulsory pooling of all interests in the Yeso formation underlying the N/2 N/2 of Section 9 to be dedicated to its Sneed 9 Federal Com No. 1-H Well to be drilled horizontally from a standard surface location in the NW/4 NW/4 (Unit D) of Section 9 to a standard bottom hole location in the NE/4 NE/4 (Unit A) of Section 9 to a depth sufficient to test the Yeso formation, West Maljamar Yeso Pool (44500). Also to be considered will be the cost of drilling and completing said well and the allocation of the cost thereof as well as actual operating costs and charges for supervision, designation of COG Operating LLC as operator and a charge for risk involved in drilling the well.

A copy of the Application is enclosed.

This Application will be set for hearing before a Division Examiner on July 25, 2013, at 8:15 a.m. at the New Mexico Oil Conservation Division, 1220 South St. Francis Drive, Santa Fe, New Mexico. You are not required to attend this hearing, but as an

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**REPLY TO:**

325 Paseo de Peralta  
Santa Fe, New Mexico 87501  
Telephone (505) 982-3873 • Fax (505) 982-4289

Post Office Box 2307  
Santa Fe, New Mexico 87504-2307

---

6301 Indian School Road NE, Suite 400  
Albuquerque, New Mexico 87110  
Telephone (505) 884-4200 • Fax (505) 888-8929

Post Office Box 36210  
Albuquerque, New Mexico 87176-6210

Marathon Oil Company  
July 3, 2013  
Page 2

owner of an interest that may be affected, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging this application at a later time. If you intend to attend the hearing and present testimony or evidence, you must enter your appearance and serve the Division, counsel for the Applicant and other parties with a pre-hearing statement at least four business days before the scheduled hearing date in accordance with Division Rule 19.15.4.13.

Very truly yours,

MONTGOMERY & ANDREWS, P.A.

A handwritten signature in black ink, appearing to read 'Seth C. McMillan', is written over the printed name.

Seth C. McMillan  
J. Scott Hall  
Attorneys for COG Operating LLC

Enclosures

## 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:

Edward Dressen, Jr.  
P.O. Box 830  
Palo Cedro, California 96073-0830

2. Article Number

(Transfer from service label)

7012 3050 0002 1324 2310

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Ed Dreesen*☐ Agent☒ Addressee

B. Received by (Printed Name)

ED DRESSEN

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☐ 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:

Ornella Wilbanks  
P.O. Box 84  
Albuquerque, NM 88264

2. Article Number

(Transfer from service label)

7012 3050 0002 1324 2136

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Ornella Wilbanks*☐ Agent☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☐ 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

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- 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:

Devon Energy Production Company, Inc.  
333 W. Sheridan Avenue  
Oklahoma City, OK 73102  
Attn: Cari Allen

2. Article Number

(Transfer from service label)

7012 2920 0000 4584 7311

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Cari Allen*☐ Agent☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-8-13

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☐ 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:

Marathon Oil Company ORRI  
P.O. Box 3487  
Houston, TX 77253-3487

2. Article Number

(Transfer from service label)

7012 3050 0002 1324 2266

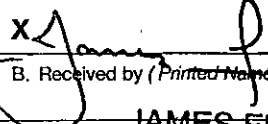
PS Form 3811, February 2004

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? ☐ YesIf 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:

Philip L. White  
c/o The Blanco Company  
P.O. Box 25968  
Albuquerque, NM 87135

2. Article Number

(Transfer from service label)

7012 0470 0000 2697 2953

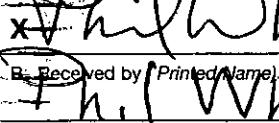
PS Form 3811, February 2004

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? ☐ YesIf 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.
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Occidental Oil and Gas Corporation  
5 Greenway Plaza, Suite 110  
Houston, TX 77046  
Attn: Tiffany Pollock

2. Article Number

(Transfer from service label)

7012 3050 0002 1324 2273

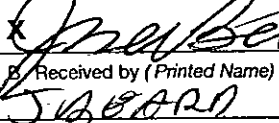
PS Form 3811, February 2004

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? ☐ YesIf 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 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:

Kyla Taylor Thompson  
1122 Green Valley Rd NW  
Los Ranchos, NM 87107

2. Article Number

7013 0600 0002 2194 5996

A. Signature  
X *Kyla Thompson* ☐ Agent ☐ Addressee  
B. Received by (Printed Name)  
*Kyla Thompson* 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

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:

Halcon Resources Corporation  
Meridian Tower, Suite 650  
5100 East Skelly Drive  
Tulsa, Oklahoma 74135

2. Article Number  
(Transfer from service label)

7012 2920 0000 4584 7465

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
X *[Signature]* ☐ Agent ☐ Addressee  
B. Received by (Printed Name)  
*[Signature]* C. Date of Delivery  
*7/8/13*  
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

**SENDER: COMPLETE THIS SECTION**

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

First Roswell Company  
P.O. Box 1797  
Roswell, NM 88202

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
X *Kay Sreden* ☐ Agent ☐ Addressee  
B. Received by (Printed Name)  
*Kay Sreden* 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

2. Article Number  
(Transfer from service label)

7012 3050 0002 1324 2044

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:

ConocoPhillips Company  
15080 Two Westlake Park  
600 North Dairy Ashford  
Houston, TX 77079-1175

2. Article Number

(Transfer from service label)

7012 2920 0000 4584 7489

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*☐ Agent☐ Addressee

B. Received by (Printed Name)

*[Signature]*

C. Date of Delivery

07/08

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.
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

F. Andrew Grooms  
P.O. Box 2990  
Ruidoso, New Mexico 88355-2990

2. Article Number

(Transfer from service label)

7012 3050 0002 1324 2143

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*☐ Agent☐ Addressee

B. Received by (Printed Name)

*[Signature]*

C. Date of Delivery

JUL - 8 2013

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

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chesapeake North American Exploration  
and Production Company  
1400 Smith Street, Room 43198  
Houston, TX 77002  
Attn: Kelly Bass

2. Article Number

(Transfer from service label)

7012 2920 0000 4584 7472

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*☐ Agent☐ Addressee

B. Received by (Printed Name)

*[Signature]*

C. Date of Delivery

7-9-13

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



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  X <u>Cecilia Aymond</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Cecilia Aymond</u> C. Date of Delivery <u>7/8/13</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center; margin-top: 20px;">Cecilia Aymond  9466 Arborhill Drive  Dallas, TX 75243</p>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number <u>7012 3050 0002 1324 2303</u>  (Transfer from service label)</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  X <u>[Signature]</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Cecile Marie Dressen</u> C. Date of Delivery <u>7.11.13</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center; margin-top: 20px;">Cecile Marie Dressen  P.O. Box 1696  Poulsbo, Washington 98370</p>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number <u>7012 3050 0002 1324 2051</u>  (Transfer from service label)</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  X <u>[Signature]</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center; margin-top: 20px;">Cecil Bond Kyte  P.O. Box 90864  Santa Barbara, California 93130</p>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number <u>7013 0600 0002 2194 5989</u>  (Transfer from service label)</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

## 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:

Ray Devoe Taylor  
P.O. Box 723  
Tatum, New Mexico 88267

2. Article Number

(Transfer from service label)

7012 3050 0002 1324 2259

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Hardy Bess

☐ Agent☒ Addressee

B. Received by (Printed Name)

Dorothy Bess

C. Date of Delivery

7/12

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

## 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:

Alice Crouch  
4508 Banister Lane  
Austin, TX 78745

2. Article Number

(Transfer from service label)

7012 3050 0002 1324 2242

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Alice Crouch

☐ Agent☒ Addressee

B. Received by (Printed Name)

Alice Crouch

C. Date of Delivery

7/16/13

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

## 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 M. Dressen  
Trustee of the Betty M. Dressen Revocable Living Trust  
dated 10/17/1977  
P.O. Box 817  
Los Altos, California 94023-0817

2. Article Number

(Transfer from service label)

7012 3050 0002 1324 2129

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Betty M. Dressen

☐ Agent☒ Addressee

B. Received by (Printed Name)

BETTY M. DRESSSEN

C. Date of Delivery

JUL 18 2013

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