

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

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

CASE NO. 15051

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.

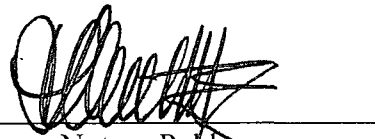


Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 1st day of October 2013 by Michael H. Feldewert.



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



Notary Public

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 6
Submitted by: **COG OPERATING LLC**
Hearing Date: October 3, 2013

Yates Petroleum Corporation
ABO Petroleum Corporation
Myco Industries, Inc.
105 South 4th Street
Artesia, NM 88210-2177
Attn: Janet Richardson

OXY Y-1 Company
5 Greenway Plaza, Suite 110
Houston, TX 77046-0521
Attn: Permian Land Manager

Texas Christian Univeristy
2800 S. University Drive
Fort Worth, TX 76129
Attn: Carla Sublett

Judson Properties, Ltd.
PO Box 3340
Midland, TX 79702

Harry B. Hinkle
PO Box 60010
Midland, TX 79702

Mary Jo Guy and Russell Edward Guy as
Co-Trustees U/T/A dated January 12,
1982, as amended July 13, 1992
705 West Grand Ave.
Artesia, NM 88210

Todd Westmoreland
PO Box 10107
Midland, TX 79702

Morris E. Schertz
PO Drawer 2588
Roswell, NM 88202

Madison M. Hinkle
PO Box 2292
Roswell, NM 88202

New State Gas, LLC
1213 West Third Street
Roswell NM 88201
Attn: Rolla R. Hinkle III

Richardson Mineral & Royalty, LLC
PO Box 2423
Roswell, NM 88202
Attn: Michael S. Richardson

William H. Martin and Karen V.
Martin, Trustees of the Martin
Living Trust
400 W. Illinois, Suite 1100
Midland, TX 79701

Edward H. and Marilyn M. Judson,
Trustees of the Judson Living Trust
400 W. Illinois, Suite 1100
Midland, TX 79701

Ralph A. Shugart, Jr.
501 South Cherry, #570
Denver, CO 80246

Helen W. Rhett and John T. Rhett, Trustees
under the Helen W. Rhett Trust, dated
October 15, 2002, as amended by instrument
dated 9 July 2003
3175 21st N.
Arlington, VA 22201-5107

Bassett Birney Oil Corp
PO Box 127
Artesia, NM 88210

Cimarex Energy Co.
600 N. Marienfeld, Suite 600
Midland, TX 79701
Attn: Hilary Coder

Exama Oil Company
5599 San Felipe
Houston, TX 77056

OXY Y-1 Company
5 Greenway Plaza, Suite 110
Houston, TX 77046-0521
Attn: Permian Land Manager

Stanolind Oil & Gas LP
310 West Wall Street
Midland, TX 79701

NOTICE OF PUBLICATION

Heirs or Devisees of John P. Mathis; Heirs or Devisees of S.C. Mathis; Heirs or Devisees of J.C. Burkhalter; Heirs or Devisees of Gene Burkhalter; Beneficiaries of the William H. Martin and Karen V. Martin Living Trust; Beneficiaries of the Edward H. and Marilyn M. Judson Living Trust; Ralph A. Shugart, Jr.; Heirs or Devisees of Rena Shugart; Heirs or Devisees of E. Bernard Johnston; Heirs or Devisees of Charles E. Currier; Beneficiaries of the Helen W. Rhett Trust; Heirs or Devisees of Randolph M. Richardson, III.



September 13, 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
Lee "3" Fee 8H Well**

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. 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 October 3, 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 Stuart Dirks, Senior Landman at COG Operating LLC (432) 685-4354.

Sincerely,

Michael H. Feldewert



September 13, 2013

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: POOLED PARTIES

**Re: Application of COG Operating LLC for non-standard spacing and proration unit and compulsory pooling; Eddy County, New Mexico
Lee "3" Fee 8H Well**

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 October 3, 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 Stuart Dirks, Senior Landman at COG Operating LLC (432) 685-4354.

Sincerely,

Michael H. Feldewert

7006 0100 0005 5770 8000

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

For delivery information visit **OFFICIAL**

MHF/COG
Lee Fee 8H Well

Postage \$ 4.66

Certified Fee 3.10

Return Receipt Fee (Endorsement Required) 2.55

Restricted Delivery Fee (Endorsement Required) 6.11

Postmark **SEP 13 2013**

Yates Petroleum Corporation
 ABO Petroleum Corporation
 Myco Industries, Inc.
 105 South 4th Street
 Artesia, NM 88210-2177
 Attn: Janet Richardson

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:

Yates Petroleum Corporation
 ABO Petroleum Corporation
 Myco Industries, Inc.
 105 South 4th Street
 Artesia, NM 88210-2177
 Attn: Janet Richardson

2. Article Number (Transfer from service)

7006 0100 0005 5770 8000

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X** J. Osigado ☐ Agent ☐ Addressee

B. Received by (Printed Name) J. Osigado C. Date of Delivery 9-16-13

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

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

7006 0100 0005 5770 8017

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

MHF/COG
Lee Fee 8H Well

Postage \$ 4.66

Certified Fee 3.10

Return Receipt Fee (Endorsement Required) 2.55

Restricted Delivery Fee (Endorsement Required) 6.11

Postmark **SEP 13 2013**

OXY Y-1 Company
 5 Greenway Plaza, Suite 110
 Houston, TX 77046-0521
 Attn: Permian Land Manager

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:

OXY Y-1 Company
 5 Greenway Plaza, Suite 110
 Houston, TX 77046-0521
 Attn: Permian Land Manager

2. Article Number (Transfer from service)

7006 0100 0005 5770 8017

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X** ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

7006 0100 0005 5770 8024

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
MHF/COG
 For delivery information visit **OFFICIAL** Lee Fee 8H Well

Postage \$ 46
 Certified Fee 3.10
 Return Receipt Fee (Endorsement Required) 2.55
 Restricted Delivery Fee (Endorsement Required) 6.11
 Total 15.22

Sent To: Texas Christian Univeristy
 2800 S. University Drive
 Fort Worth, TX 76129
 City, State, ZIP+4: Fort Worth, TX 76129
 Attn: Carla Sublett

PS Form 3800, June 2002

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:

Texas Christian Univeristy
 2800 S. University Drive
 Fort Worth, TX 76129
 Attn: Carla Sublett

2. Article Number:

(Transfer from serv)

7006 0100 0005 5770 8024

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Annetta Winkler
☐ Agent
☐ Addressee

B. Received by (Printed Name)

Annetta Winkler

C. Date of Delivery

9-19-13D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No☒ Certified Mail☐ Express Mail☐ Registered☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 0100 0005 5770 8031

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 5770 8031

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
MHF/COG
 For delivery information visit **OFFICIAL** Lee Fee 8H Well

Postage \$ 46
 Certified Fee 3.10
 Return Receipt Fee (Endorsement Required) 2.55
 Restricted Delivery Fee (Endorsement Required) 6.11
 Total 15.22

Sent To: Judson Properties, Ltd.
 PO Box 3340
 Midland, TX 79702
 City, State, ZIP+4: Midland, TX 79702

PS Form 3800, June 2002

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:

Judson Properties, Ltd.
 PO Box 3340
 Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Annetta Winkler
☐ Agent
☐ Addressee

B. Received by (Printed Name)

Annetta Winkler

C. Date of Delivery

9-19-13D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No☒ Certified Mail☐ Express Mail☐ Registered☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 0100 0005 5770 8031

PS Form 3811, February 2004


Domestic Return Receipt

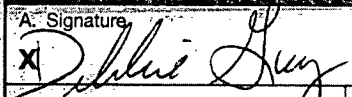
102595-02-M-1540

7006 0100 0005 5770 8048

U.S. Postal Service TM	
CERTIFIED MAILTM RECEIPT	
(Domestic Mail Only; No Insurance)	
MHF/COG	
For delivery information visit usps.com	
Lee Fee 8H Well	
OFFICE	
Postage	\$ 46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.11
	
Sent To	Harry B. Hinkle
Street, or PO Box	PO Box 60010
City, St	Midland, TX 79702
PS Form	Instructions

7006 0100 0005 5770 7751

U.S. Postal Service TM	
CERTIFIED MAILTM RECEIPT	
(Domestic Mail Only; No Insurance)	
MHF/COG	
For delivery information visit usps.com	
Lee Fee 8H Well	
OFFICE	
Postage	\$ 46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.11
	
Sent To	Mary Jo Guy and Russell Edward Guy as
Street, or PO Box	Co-Trustees U/T/A dated January 12,
City, St	1982, as amended July 13, 1992
	705 West Grand Ave.
	Artesia, NM 88210
PS Form	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  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: Mary Jo Guy and Russell Edward Guy as Co-Trustees U/T/A dated January 12, 1982, as amended July 13, 1992 705 West Grand Ave. Artesia, NM 88210		B. Received by (Printed Name) Debbie Guy C. Date of Delivery SEP 17 2013	
2. Article Number (Transfer from) 7006 0100 0005 5770 7751		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

7006 0100 0005 5770 7768

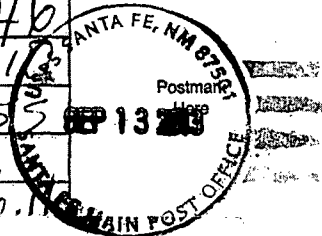
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
MHF/COG
 Lee Fee 8H Well

For delivery information visit our **OFFICIAL**

Postage	\$ 46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.11

Sent To: Todd Westmoreland
 Street or PO: PO Box 10107
 City, State: Midland, TX 79702

PS Form 3811, February 2004



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.

2. Article Addressed to:
 Todd Westmoreland
 PO Box 10107
 Midland, TX 79702

2. Article Number: 7006 0100 0005 5770 7768
 (Transfer from sender)

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* ☐ Agent ☒ Addressee
 B. Received by (Printed Name): TODD WESTMORELAND
 C. Date of Delivery: 9-18-13
 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

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

7006 0100 0005 5770 7762

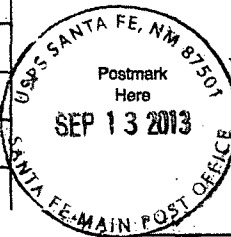
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
MHF/COG
 Lee Fee 8H Well

For delivery information visit our **OFFICIAL**

Postage	\$ 46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.11

Sent To: Morris E. Schertz
 Street or PO: PO Drawer 2588
 City, State: Roswell, NM 88202

PS Form 3811, February 2004



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:
 Morris E. Schertz
 PO Drawer 2588
 Roswell, NM 88202

2. Article Number: 7006 0100 0005 5770 7762
 (Transfer from sender)

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* ☐ Agent ☒ Addressee
 B. Received by (Printed Name): MORRIS E. SCHERTZ
 C. Date of Delivery: 9-16-13
 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

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

7006 0100 0005 5770 7775

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OFFICIAL USE

Postage \$ 46

Certified Fee 3.10

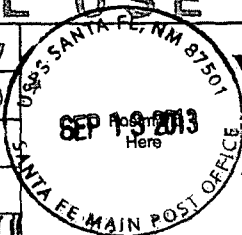
Return Receipt Fee (Endorsement Required) 2.55

Restricted Delivery Fee (Endorsement Required)

Total Price 6.11

Sent To: Madison M. Hinkle
 Street, A or PO Box: PO Box 2292
 City, State: Roswell, NM 88202

PS Form 3811, February 2004



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 (Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage \$ 46

Certified Fee 3.10

Return Receipt Fee (Endorsement Required) 2.55

Restricted Delivery Fee (Endorsement Required)

Total Price 6.11

Sent To: Madison M. Hinkle
 Street, A or PO Box: PO Box 2292
 City, State: Roswell, NM 88202

PS Form 3811, February 2004

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 \$ 46

Certified Fee 3.10

Return Receipt Fee (Endorsement Required) 2.55

Restricted Delivery Fee (Endorsement Required)

Total Price 6.11

Sent To: Madison M. Hinkle
 Street, A or PO Box: PO Box 2292
 City, State: Roswell, NM 88202

PS Form 3811, February 2004

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 \$ 46

Certified Fee 3.10

Return Receipt Fee (Endorsement Required) 2.55

Restricted Delivery Fee (Endorsement Required)

Total Price 6.11

Sent To: Madison M. Hinkle
 Street, A or PO Box: PO Box 2292
 City, State: Roswell, NM 88202

PS Form 3811, February 2004

7006 0100 0005 5770 7799

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 \$ 46

Certified Fee 3.10

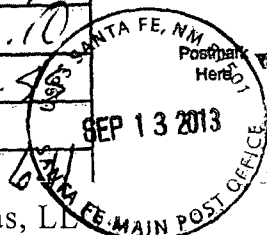
Return Receipt Fee (Endorsement Required) 2.55

Restricted Delivery Fee (Endorsement Required)

Total Price 6.11

Sent To: New State Gas, LLC
 Street, A or PO Box: 1213 West Third Street
 City, State: Roswell NM 88201
 Attn: Rolla R. Hinkle III

PS Form 3811, February 2004



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

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

OFFICIAL USE

Postage \$ 46

Certified Fee 3.10

Return Receipt Fee (Endorsement Required) 2.55

Restricted Delivery Fee (Endorsement Required)

Total Price 6.11

Sent To: New State Gas, LLC
 Street, A or PO Box: 1213 West Third Street
 City, State: Roswell NM 88201
 Attn: Rolla R. Hinkle III

PS Form 3811, February 2004

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 \$ 46

Certified Fee 3.10

Return Receipt Fee (Endorsement Required) 2.55

Restricted Delivery Fee (Endorsement Required)

Total Price 6.11

Sent To: New State Gas, LLC
 Street, A or PO Box: 1213 West Third Street
 City, State: Roswell NM 88201
 Attn: Rolla R. Hinkle III

PS Form 3811, February 2004

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 \$ 46

Certified Fee 3.10

Return Receipt Fee (Endorsement Required) 2.55

Restricted Delivery Fee (Endorsement Required)

Total Price 6.11

Sent To: New State Gas, LLC
 Street, A or PO Box: 1213 West Third Street
 City, State: Roswell NM 88201
 Attn: Rolla R. Hinkle III

PS Form 3811, February 2004

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 \$ 46

Certified Fee 3.10

Return Receipt Fee (Endorsement Required) 2.55

Restricted Delivery Fee (Endorsement Required)

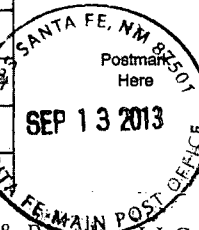
Total Price 6.11

Sent To: New State Gas, LLC
 Street, A or PO Box: 1213 West Third Street
 City, State: Roswell NM 88201
 Attn: Rolla R. Hinkle III

PS Form 3811, February 2004

7006 0100 0005 5770 7744

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only, No Ins)	
MHF/COG	
Lee Fee 8H Well	
For delivery information visit ps.com	
OFFICIAL	
Postage \$	46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	6.11
Sent To Richardson Mineral & Royalty, LLC PO Box 2423 Roswell, NM 88202 Attn: Michael S. Richardson	
Street, Apt. or PO Box City, State	
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:

Richardson Mineral & Royalty, LLC
 PO Box 2423
 Roswell, NM 88202
 Attn: Michael S. Richardson

2. Article (Transaction)

7006 0100 0005 5770 17744

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X *Michael S. Richardson*

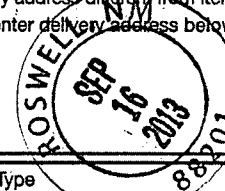
B. Received by (Printed Name) C. Date of Delivery

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



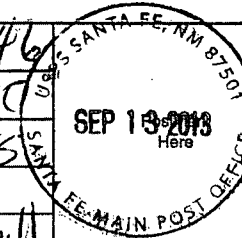
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 5770 7737

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only, No Ins)	
MHF/COG	
Lee Fee 8H Well	
For delivery information visit ps.com	
OFFICIAL	
Postage \$	46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	6.11
Sent To William H. Martin and Karen V. Martin, Trustees of the Martin Living Trust 400 W. Illinois, Suite 1100 Midland, TX 79701	
Street, Apt. or P.O. Box City, State	
PS Form 3811, February 2004	



7006 0100 0005 5770 7720

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

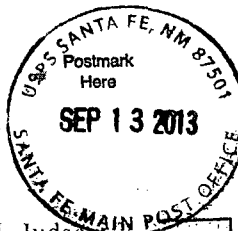
For delivery information visit
OFFIC

MHF/COG
 Lee Fee 8H Well

Postage	\$.46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total	6.11

Sent To: Edward H. and Marilyn M. Judson,
 Trustees of the Judson Living Trust
 Street, or PO: 400 W. Illinois, Suite 1100
 City, S: Midland, TX 79701

PS Form 3811, January 2004



Returned

7006 0100 0005 5770 7713

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

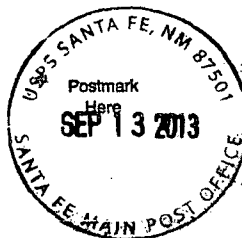
For delivery information visit
OFFIC

MHF/COG
 Lee Fee 8H Well

Postage	\$.46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	6.11

Sent To: Ralph A. Shugart, Jr.
 Street, or PO: 501 South Cherry, #570
 City: Denver, CO 80246

PS Form 3811, February 2004



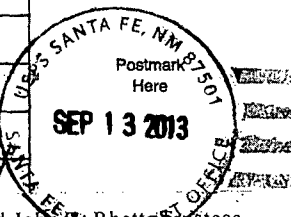
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Ralph A. Shugart, Jr. 501 South Cherry, #570 Denver, CO 80246</p> <p>2. Article Number: 7006 0100 0005 5770 7713</p>	<p>A. Signature: <i>Shawn Holvath</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name): <i>Shawn Holvath</i></p> <p>C. Date of Delivery: <i>SEP 16 2013</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</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>

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

7006 0100 0005 5770 7706

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
MHF/COG	
Lee Fee 8H Well	
OFFICE	
Postage	\$.46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.11
Sent To	Helen W. Rhett and John W. Rhett Trustees
Street, Apt. No., or PO Box No.	under the Helen W. Rhett Trust, dated October 15, 2002, as amended by instrument dated 9 July 2003
City, State, ZIP+4	3175 21st N. Arlington, VA 22201-5107

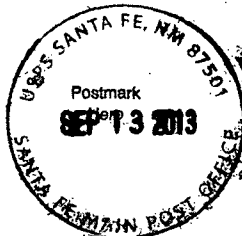
PS Form 3800, J



7006 0100 0005 5770 7690

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
MHF/COG	
Lee Fee 8H Well	
OFFICE	
Postage	\$.46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.11
Sent To	Bassett Birney Oil Corp
Street, Apt. No., or PO B	PO Box 127
City, State, ZIP+4	Artesia, NM 88210

PS Form 3800, J



Returned

7006 0100 0005 5770 8086

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 MHF/COG
 Lee Fee 8H Well
 For delivery information visit
OFFIC

Postage	\$.46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.11

SANTA FE, NM SEP 13 2013
 MAIN POST OFFICE

Cimarex Energy Co.
 600 N. Marienfeld, Suite 600
 Midland, TX 79701
 Attn: Hilary Coder

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:

Cimarex Energy Co.
 600 N. Marienfeld, Suite 600
 Midland, TX 79701
 Attn: Hilary Coder

2. Article Number
(Transfer from)

7006 0100 0005 5770 8086

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Sadi O Garcia

7-16-13

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

7006 0100 0005 5770 8086

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 MHF/COG
 Lee Fee 8H Well
 For delivery information visit
OFFIC

Postage	\$.46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.11

SANTA FE, NM SEP 13 2013
 MAIN POST OFFICE

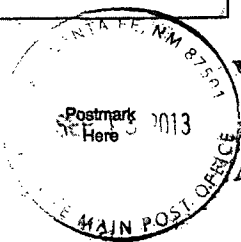
Sent To: Exama Oil Company
 Street: 5599 San Felipe
 City, S: Houston, TX 77056

PS Form 3811, February 2004

Returned

7006 0100 0005 5770 8062

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
MHF/COG	
For delivery information visit usps.com	
OFFICIAL Lee Fee 8H Well	
Postage	\$ 4.46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.11
Sent To	OXY Y-1 Company
Street or PO	5 Greenway Plaza, Suite 110
City, State	Houston, TX 77046-0521
PS Form	Attn: Permian Land Manager



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:

OXY Y-1 Company
5 Greenway Plaza, Suite 110
Houston, TX 77046-0521
Attn: Permian Land Manager

2. Article (Transit)

7006 0100 0005 5770 8062

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

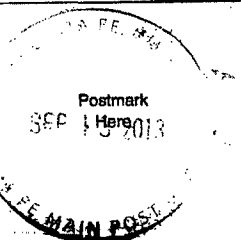
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 0100 0005 5770 8055

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
MHF/COG	
For delivery information visit usps.com	
OFFICIAL Lee Fee 8H Well	
Postage	\$ 4.46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.11
Sent To	Stanolind Oil & Gas LP
Street or PO	310 West Wall Street
City, State	Midland, TX 79701
PS Form	



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:

Stanolind Oil & Gas LP
310 West Wall Street
Midland, TX 79701

2. Article (Transit)

7006 0100 0005 5770 8055

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes