

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

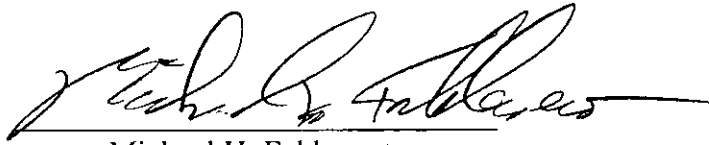
IN THE MATTER OF THE APPLICATION OF
COG OPERATING LLC FOR A NON-STANDARD
SPACING AND PRORATION UNIT AND COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.

CASE NO. 15090

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 has been provided under the notice letters and proof of receipt attached hereto.

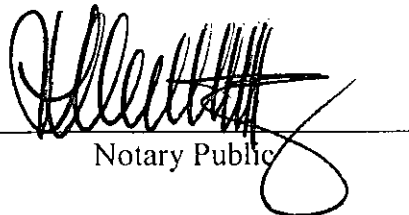


Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 19th day of February 2014 by Michael
H. Feldewert.



OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO
My commission expires 01/14/16



Notary Public

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 6
Submitted by: COG OPERATING LLC
Hearing Date: February 20, 2014

January 31, 2014

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

**Re: Application of COG Operating, LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico.
Arabian 6 Fee 10 H Well**

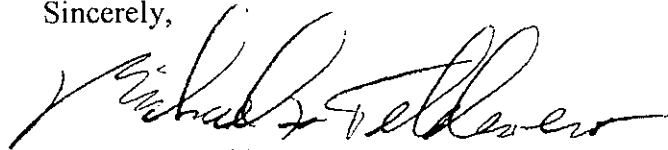
This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application*, but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on February 20, 2014. 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.

If you have any questions about this matter please contact Joseph Scott at (432) 688-6601.

Sincerely,



Michael H. Feldewert
ATTORNEY FOR COG OPERATING LLC

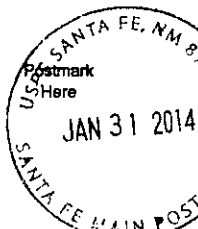
7006 0100 0005 5771 2885

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 *Artesia NM 88210*

Postage	\$ <i>6.66</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>6.31</i>



Yates Petroleum Corporation
 105 South 4th Street
 Artesia, NM 88210

PS Form 3800, June 2002 See Reverse for Instructions

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

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

Article Addressed to:

Yates Petroleum Corporation
 105 South 4th Street
 Artesia, NM 88210

A. Signature *X G. Argee* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *A. Argee* C. Date of Delivery *2/3/14*

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

Article Number (Transfer from service label) *7006 0100 0005 5771 2885*

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

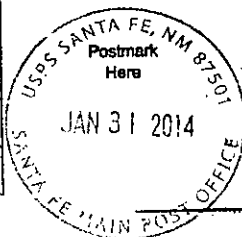
7006 0100 0005 5771 2878

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 *Artesia NM 88210*

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



Abo Petroleum Corporation
 105 South 4th Street
 Artesia, NM 88210

PS Form 3800, June 2002 See Reverse for Instructions

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

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

Article Addressed to:

Abo Petroleum Corporation
 105 South 4th Street
 Artesia, NM 88210

A. Signature *X G. Argee* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *A. Argee* C. Date of Delivery *2/3/14*

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) *7006 0100 0005 5771 2878*

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

7006 0100 0005 5771 2861

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 HABLA EN ESPAÑOL	
Postage \$	
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Postmark Here JAN 31 2014
SANTA FE, NM 87501
MAIN POST OFFICE

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

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE MAIL PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE		ON 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 X <i>A. Argeel</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>A. Argeel</i> C. Date of Delivery <i>2/3/14</i> D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:	
1. Article Addressed to: Myco Industries, Inc. 105 South 4th Street Artesia, NM 88210		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)		7006 0100 0005 5771 2861	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

7006 0100 0005 5771 2854

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 HABLA EN ESPAÑOL	
Postage \$	
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Postmark Here JAN 31 2014
SANTA FE, NM 87501
MAIN POST OFFICE

Oxy Y-1 Company
P.O. Box 4294
Houston, TX 77210-42954

for Instructions

SENDER: COMPLETE MAIL PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE		ACTION 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 X <i>S. B. B. B.</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>S. B. B. B.</i> C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:	
1. Article Addressed to: Oxy Y-1 Company P.O. Box 4294 Houston, TX 77210-42954		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)		7006 0100 0005 5771 2854	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

7006 0100 0005 5771 2847

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

OFFICIAL *ArabianSoft*

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

Postmark Here
 JAN 31 2014
 SANTA FE MAIN POST OFFICE

Nearburg Exploration Company LLC
 3300 North "A" Street, Building 2,
 Suite 120
 Midland, Texas 79705

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE **ION ON DELIVERY**

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

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:
 Nearburg Exploration Company LLC
 3300 North "A" Street, Building 2,
 Suite 120
 Midland, Texas 79705

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 2847

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature *X* *J. Fiesela* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *J. Fiesela* C. Date of Delivery *2-3-14*
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

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

7006 0100 0005 5771 2830

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

OFFICIAL *ArabianSoft*

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

Postmark Here
 JAN 31 2014
 SANTA FE MAIN POST OFFICE

Gretchen E. Nearburg
 1129 Challenger
 Lakeway, TX 78734-3825

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE **ION ON DELIVERY**

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

1. Article Addressed to:
 Gretchen E. Nearburg
 1129 Challenger
 Lakeway, TX 78734-3825

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 2830

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature *X* *Gretchen E. Nearburg* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *Gretchen E. Nearburg* C. Date of Delivery *2-3-14*
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

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

7006 0100 0005 5771 2823

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

OFFICIAL *Handwritten: 10/11*

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

Postmark Here
 JAN 31 2004
 USPS SANTA FE, NM 87501
 SANTA FE MAIN POST OFFICE

Cimarex Energy Company
 600 North Marienfeld, Suite
 600
 Midland, TX 79701

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION **ON DELIVERY**

PLACE STICKER AT TOP OF ENVELOPE, FOLD AT DOTTED LINE

■ 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 Company
 600 North Marienfeld, Suite
 600
 Midland, TX 79701

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 2823

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

B. Received by (Printed Name)
 JANET BARNETT

C. Date of Delivery
 2/3/11

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

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

7006 0100 0005 5771 2816

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 *Handwritten: 10/11*

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

Postmark Here
 JAN 31 2004
 USPS SANTA FE, NM 87501
 SANTA FE MAIN POST OFFICE

Wolfcamp Title, LLC
 P.O. Box 2423
 Roswell, NM 88202

PS Form 3800, June 2002 for Instructions

SENDER: COMPLETE THIS SECTION **ON DELIVERY**

PLACE STICKER AT TOP OF ENVELOPE, FOLD AT DOTTED LINE

■ 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:
 Wolfcamp Title, LLC
 P.O. Box 2423
 Roswell, NM 88202

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 2816

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

B. Received by (Printed Name)
 Michael S. Richardson

C. Date of Delivery
 2/3/11

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

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

7006 0100 0005 5771 2809

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

OFFICIAL *Arrian Uoste*

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

Postmark
 JAN 31 2014
 SANTA FE, NM 87501
 MAIN POST OFFICE

FLP Trafalgar II, L.P.
 4000 E Third Avenue, Suite
 600
 Foster City, CA 94404-4801

PS Form 3811, June 2004 See Reverse for Instructions

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

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:
 FLP Trafalgar II, L.P.
 4000 E Third Avenue, Suite
 600
 Foster City, CA 94404-4801

2. Article Number: 7006 0100 0005 5771 2809
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature: *[Signature]*
 B. Received by (Printed Name): *[Signature]*
 C. Date of Delivery: 3/3
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

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

7006 0100 0005 5771 2743

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 *Arrian Uoste*

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

Postmark
 JAN 31 2014
 SANTA FE, NM 87501
 MAIN POST OFFICE

ESV Enterprises, a Sole
 Proprietorship
 P.O. Box 1952
 Roswell, NM 88202-1952

PS Form 3811, February 2004 See Reverse for Instructions

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

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:
 ESV Enterprises, a Sole
 Proprietorship
 P.O. Box 1952
 Roswell, NM 88202-1952

2. Article Number: 7006 0100 0005 5771 2743
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

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

7006 0100 0005 5771 2786

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

USPS SANTA FE, NM 87501
Postmark
JAN 31 2014
SANTA FE MAIN POST OFFICE

Peak Enterprises Corp.
300 Martine Avenue-Suite 2-D
White Plains, NY 10601-3421

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5771 2779

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

USPS SANTA FE, NM 87501
Postmark
JAN 31 2014
SANTA FE MAIN POST OFFICE

Menpart Associates
c/o Nearburg Exploration Company
3300 North "A" Street
Building 2, Suite 120
Midland, Texas 79705

for Instructions

SENDER: COMPLETE THIS SECTION		IN 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 ☒ Agent ☐ Addressee	
1. Article Addressed to: Menpart Associates c/o Nearburg Exploration Company 3300 North "A" Street Building 2, Suite 120 Midland, Texas 79705		B. Received by (Printed Name) L. Fiesela C. Date of Delivery 2-3-14	
2. Article Number (Transfer from service label)		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

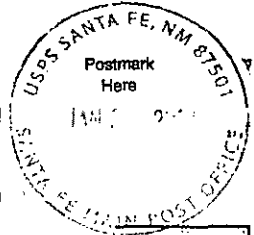
7006 0100 0005 5771 2762

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 *Arakhsan Sot*

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



Hideaway Partnership
 c/o TMF Investments,
 25 Hanover Rd. Building B
 Florham Park, NJ 07932

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:

Hideaway Partnership
 c/o TMF Investments,
 25 Hanover Rd. Building B
 Florham Park, NJ 07932

2. Article Number (Transfer from service label) 7006 0100 0005 5771 2762

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
x Donna Winchester

B. Received by (Printed Name) *DONNA WINCHESTER*

C. Date of Delivery *FEB 04 2014*

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

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

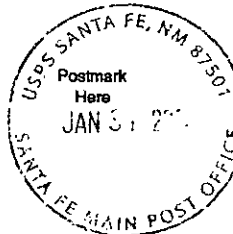
7006 2760 0001 6376 2052

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 *Arakhsan Sot*

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



Eugene E. Nearburg
 c/o Nearburg Exploration Company
 3300 North "A" Street, Building 2,
 Suite 120
 Midland, Texas 79705

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:

Eugene E. Nearburg
 c/o Nearburg Exploration Company
 3300 North "A" Street, Building 2,
 Suite 120
 Midland, Texas 79705

2. Article Number (Transfer from service label) 7006 2760 0001 6376 2052

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 ☒ Agent ☐ Addressee
x E. Nearburg

B. Received by (Printed Name) *E. Nearburg*

C. Date of Delivery *2-3-14*

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

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

7006 2760 0001 6376 2045

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

Joe R. Wright, trustee of the
Wright Family Trust (5-21-98)
320 Kearney Ave., Apt. 9
Santa Fe, New Mexico 87501

Postmark Here
USPS SANTA FE, NM 87501
JAN 31 2006

for instructions

Returned

7006 2760 0001 6376 2038

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

AAR Limited Partnership
1320 W. 4th
Roswell, NM 88201

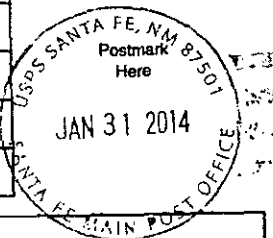
Postmark Here
USPS SANTA FE, NM 87501
JAN 31 2006

PS Form 3800, August 2006 See Reverse for Instructions

Returned

7006 2760 0001 6376 2021

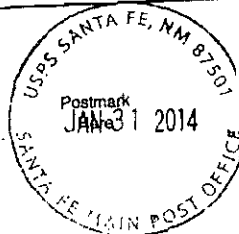
U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL <i>Arakani 154</i>	
Postage	\$
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
Fred N. Nelson Farms 3755 E. Grand Plains Rd. Roswell, NM 88201	
PS Form 3800, August 2006	



SENDER: COMPLETE THIS		IN 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 <i>X Brooke Martin</i> ☒ Agent ☐ Addressee	
1. Article Addressed to: Fred N. Nelson Farms 3755 E. Grand Plains Rd. Roswell, NM 88201		B. Received by (Printed Name) <i>Brooke Martin</i> C. Date of Delivery <i>2/6/14</i>	
2. Article Number (Transfer from service label)		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 2760 0001 6376 2014

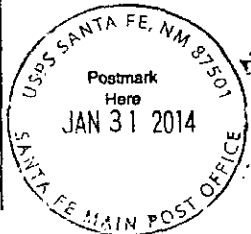
U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL <i>Arakani 154</i>	
Postage	\$
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
C. W. Paine Company 1314 Juniper Lewisville, TX 75067	
PS Form 3800, August 2006	



Returned

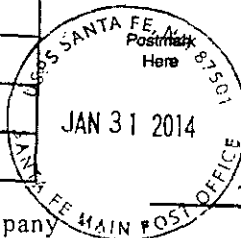
7006 2760 0001 6376 2007

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 <i>Arabella Pott</i>	
Postage	\$
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
B & L Oil Company 900 W. Cooper Hobbs, NM 88240	
PS Form 3800, August 2006 See Reverse for Instructions	



7006 2760 0001 6376 1994

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 <i>Arabella Pott</i>	
Postage	\$
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
Nearburg Exploration Company 3300 North "A" Street Building 2, Suite 120 Midland, Texas 79705	
PS Form 3800, August 2006 See Reverse for Instructions	



CERTIFIED MAIL	
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:	
Nearburg Exploration Company 3300 North "A" Street Building 2, Suite 120 Midland, Texas 79705	
2. Article Number (Transfer from service label) 7006 2760 0001 6376 1994	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

COMPLETE THIS SECTION ON DELIVERY	
A. Signature <i>[Signature]</i>	☐ Agent ☐ Addressee
B. Received by (Printed Name) <i>L. F. Escala</i>	C. Date of Delivery <i>2-3-14</i>
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
3. Service Type ☒ Certified Mail ☐ Registered ☐ Insured Mail ☐ Express Mail ☒ Return Receipt for Merchandise ☐ C.O.D.	
4. Restricted Delivery? (Extra Fee) ☐ Yes	

7006 2760 0001 6376 1987

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 *Arakian* **SOFT**

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

Postmark Here
 JAN 31 2014
 SANTA FE, NM 87501
 SANTA FE MAIN POST OFFICE

Devon Energy Production Company, LP
 P.O. Box 108838
 Oklahoma City, OK 73101

PS Form 3800, August 2005 See Reverse for Instructions

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 *Arakian* **SOFT**

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

Postmark Here
 JAN 31 2014
 SANTA FE, NM 87501
 SANTA FE MAIN POST OFFICE

Devon Energy Production Company, LP
 P.O. Box 108838
 Oklahoma City, OK 73101

PS Form 3800, August 2005 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Devon Energy Production Company, LP
 P.O. Box 108838
 Oklahoma City, OK 73101

2. Article Number: 7006 2760 0001 6376 1987
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

RECEIVER: ACTION ON DELIVERY

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

B. Received by (Printed Name):
 C. Date of Delivery: 2-4-14

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

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

7006 2760 0001 6376 2069

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 *Arakian* **SOFT**

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

Postmark Here
 JAN 31 2014
 SANTA FE, NM 87501
 SANTA FE MAIN POST OFFICE

Nadel & Gussman Permian
 601 N. Marienfeld Suite 508
 Midland, TX 79701

PS Form 3800, August 2005 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Nadel & Gussman Permian
 601 N. Marienfeld Suite 508
 Midland, TX 79701

2. Article Number: 7006 2760 0001 6376 2069
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

RECEIVER: ACTION ON DELIVERY

A. Signature: *Sarah Presley*
☒ Agent
☐ Addressee

B. Received by (Printed Name): Sarah Presley
 C. Date of Delivery: 2-3-14

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

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

7006 2760 0001 6376 2076

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 Arabian SOLE

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

Postmark Here
 JAN 31 2014

DHA, LLC
 500 W. Wall St. Suite 300
 Midland, TX 79701

PS Form 3800, August 2000 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:
 DHA, LLC
 500 W. Wall St. Suite 300
 Midland, TX 79701

2. Article Number (Transfer from service label)
 7006 2760 0001 6376 2076

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name)
 Amy Carson

C. Date of Delivery
 1/31/14

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