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

APPLICATION OF EOG RESOURCES, INC. FOR A NON-STANDARD SPACING AND PRORATION UNIT, AND COMPULSORY POOLING, LEA COUNTY, NEW MEXICO.

CASE NO. 15174

AFFIDAVIT

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

Michael H. Feldewert, attorney in fact and authorized representative of EOG Resources, Inc., the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application has been provided under the notice letter and proof of receipts attached hereto.

Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 3rd day of August 2014 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 CONVERSATION DIVISION
Santa Fe, New Mexico
Exhibit No. 5
Submitted by: EOG RESOURCES, INC.
Hearing Date: September 4, 2014

HOLLAND&HART

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

August 5, 2014

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

RE: Application of EOG Resources, Inc. for a Non-Standard Spacing and Proration Unit and Compulsory Pooling, Lea County, New Mexico.
Osprey 10 1H Well

On August 1, 2014, notice was provided to you of EOG Resources, Inc.'s application for a non-standard spacing and proration unit and compulsory pooling. It has come to our attention that the application attached to the notice was not for the Osprey 10 1H well. Included with this letter is the correct application. In order to give you an opportunity to review the application, EOG will be continuing the hearing until September 4, 2014. *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 will be heard by a Division Examiner at 8:15 AM on September 4, 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 19.15.4.13.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 Matthew Phillips at (432) 686-3649 or matthew_phillips@eogresources.com.

Sincerely,

for Michael H. Feldewert
ATTORNEY FOR EOG RESOURCES, INC.

HOLLAND&HART LLP

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

August 5, 2014

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

Re: Application of EOG Resources, Inc. for a Non-Standard Spacing and Proration Unit and Compulsory Pooling, Lea County, New Mexico.
Osprey 10 1H Well

Ladies & Gentlemen:

On August 1, 2014, notice was provided to you of EOG Resources, Inc.'s application for a non-standard spacing and proration unit and compulsory pooling. It has come to our attention that the application attached to the notice was not for the Osprey 10 1H well. Included with this letter is the correct application. In order to give you an opportunity to review the application, EOG will be continuing the hearing until September 4, 2014. Said 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 19.15.4.13.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.

If you have any questions about this matter please contact Matthew Phillips, at (432) 686-3649 or matthew_phillips@eogresources.com.

Sincerely,

for Michael H. Feldewert
ATTORNEY FOR EOG RESOURCES, INC.

EOG RESOURCES, INC.
OSPREY 10 #1H
August 5, 2014

POOLED PARTIES:

MRC Permian Company
One Lincoln Centre, 5400 LBJ
Freeway, Suite 1500
Dallas, TX 75240

Chevron
P. O. Box 2100
Houston, TX 77252

Robert E. Landreth, et ux
Donna P.
110 West Louisiana #404
Midland, TX 79701

Duer Wagner, Jr., Charles Harris Trustee
c/o Harris, Finley & Bogle P.C.
777 Main Street, Suite 3600
Fort Worth, TX 76102

Mickey Marie Waren Estate (widow
of George W. Waren, Jr.)
7804 Colton Drive
Ft Worth, TX 76108

Estate of Daniel Galbreath
c/o Lizanne Mergrue
23 Shagbark Road
Norwalk, CT 06854

Estate of D. Morgan Firestone
c/o Lizanne Mergrue
23 Shagbark Road
Norwalk, CT 06854

John G. Phillips
c/o Douglas McCormick
P. O. Box 30304
Edmund, OK 73003

Mamie Daggett, Life Tenant
Ruth Daggett Estate
1740 Broadway
Denver, CO 80274

John Patrick Allen
c/o Maxie Allen
138 E. 6th
Benton, AZ 85602

Jimmy A. Smith
c/o Maxie Allen
138 E. 6th
Benton, AZ 85602

Jarene T. Price
4007 Forest Hill Drive
Brownwood, Texas 76801

Estate of Ruby Rhodes
c/o Doris Emberlin
3941 Hilsboro Dr.
Fallon, NV 89406

Virginia Waren Estate
Route 1, Box 230
Rochelle, TX 76872

Danny Joe Waren
1852 FM 2315
Rochelle, TX 76872

John Wayne Waren
15106 Carola Way Dr.
Houston, TX 77070

Chance Barton
1919 N. Turner St.
Hobbs, NM 88240

Chelsea Barton
1919 N. Turner St.
Hobbs, NM 88240

Sherry Barton
1919 N. Turner St.
Hobbs, NM 88240

Hazel Waren Jones
604 E. 52nd Place North
Tulsa, OK 74126

RidgeRocktx LLC
P.O. Box 30304
Edmond, OK 73003

OFFSETS:

Robert E. Landreth, et ux Donna P.
110 West Louisiana #404
Midland, TX 79701

Leon Jeffcoat
500 W. Texas, Ste. 100
Midland, TX 79701

Leon Jeffcoat, Trustee
310 W. Wall, Ste. 500
Midland, TX 79701

EOG RESOURCES, INC.
OSPREY 10 #1H
August 5, 2014

Mickey Marie Waren Estate (
widow of George W. Waren, Jr.)
7804 Colton Drive
Ft Worth, TX 76108

Jerry Barnes
P.O. Box 93
Midland, TX 79702

Dennis Eimers
P.O. Box 152
Midland, TX 79702

Patin Oil & Gas Company, Inc.
300 Wilcrest Drive, Ste. 115
Houston, TX 77042

Richard R. Frazier
1718 Greentree Ln.
Duncanville, TX 75137

David M. Lee
9 Highland Drive
North Caldwell, NJ 07006

Bureau of Land Management
620 E. Greene St.
Carlsbad, NM 88220

BTA Oil Producers
104 S. Pecos
Midland, TX 79701

MYCO Industries, Inc.
105 S. 4th Street
Artesia, NM 88210

New Mexico State Land Office
310 Old Santa Fe Trail
Santa Fe, NM 87504

ABO Petroleum Corp.
105 S. 4th Street
Artesia, NM 88210

OXY Y-1 Company
P.O. Box 27570
Houston, TX 77227

Lindsey Brininstool Trust
P. O. Box 2468
Roswell, NM 88202

Mamie Daggett, Life Tenant
Ruth Daggett Estate
3811 Trail Lake Drive
Ft Worth, TX 76109

Mamie Daggett, Life Tenant
Ruth Daggett Estate
525 Carroll
Ft Worth, TX 76109

Mamie Daggett, Life Tenant
Ruth Daggett Estate
801 Cherry Street
Ft Worth, TX 76102

Mamie Daggett, Life Tenant
Ruth Daggett Estate
1740 Broadway
Denver, CO 80274

Maxie W. Allen
138 E. 6th
Benton, AZ 85602

Barbara A. Collins
138 E. 6th
Benton, AZ 85602

John Patrick Allen
138 E. 6th
Benton, AZ 85602

Jimmy A. Smith
138 E. 6th
Benton, AZ 85602

Roy C. Allen Estate
138 E. 6th
Benton, AZ 85602

Louis Charles Weaver Estate
138 E. 6th
Benton, AZ 85602

Iris Brininstool, Life Estate with
Remainder to Ferinez Phelps Estate
1523 Hilton Ave
Columbus, GA 31906

Donna C. Hopkins
P. O. Box 53134
Lubbock, TX 79453

Laylon Copelin
302 Vale
Austin, TX 78746

Leatrice B. Waren, widow of
Ferrell Waren
4009 Glenwood Drive
Brownwood, Texas 76801

EOG RESOURCES, INC.
OSPREY 10 #1H
August 5, 2014

Jarene T. Price
4007 Forest Hill Drive
Brownwood, Texas 76801

William O. Evans (Heir of Leona Waren Baker)
12202 Advance Drive
Houston, TX 77065

Danny Joe Waren
1852 FM 2315
Rochelle, TX 76872

Lois Ann Lingo
Box 212
Cromwell, OK 74837

Hazel Waren Jones
604 E. 52nd Place North
Tulsa, OK 74126

Estate of Ruby Rhodes
650 S. McLean St.
Fallon, NV 89406

Bettie Mae Davis
P. O. Box 830
Magnolia, TX 77355

John Wayne Waren
15106 Carola Way Dr.
Houston, TX 77070

Chance Barton, Chelsea Barton & Sherry Barton
1919 N. Turner St.
Hobbs, NM 88240

Virginia Waren Estate
Route 1, Box 230
Rochelle, TX 76872

Jessie Pearl Settles Estate
Route 4, Box 51
Midland, TX 79701

Eldridge W. Copelin Estate
Route 4
Tahoka, TX 79373

John W. Settles Estate (Bessie F. Waren widow)
Route 4, Box 51
Midland, TX 79701

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

For delivery information visit ou

EOG/OSPREY

OFFICI

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

AUG – 5 2014 Postmark Here

SALINA PE 67504

Sent To: MRC Permian Company
Street, Ap or PO Bo: One Lincoln Centre, 5400 LBJ Freeway, Suite 1500
City, Stat: Dallas, TX 75240

PS Form ... tions

7006 2760 0001 6377 2747

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

MRC Permian Company
One Lincoln Centre, 5400 LBJ
Freeway, Suite 1500
Dallas, TX 75240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X A Patel ☐ Agent ☐ Addressee

B. Received by (Printed Name) A. Patel
C. Date of Delivery 8.7.14

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) 7006 2760 0001 6377 2747

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

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For delivery information visi

EOG/OSPREY

OFFIC

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

AUG – 5 2014 Postmark Here

Sent T: Chevron
Street or PO: P. O. Box 2100
City, S: Houston, TX 77252

PS Fo ... tructions

7006 2760 0001 6377 2754

CERTIFIED MAIL

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

SENDER: ... TION 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.

1. Article Addressed to:

Chevron
P. O. Box 2100
Houston, TX 77252

A. Signature
X ☐ Agent ☒ Addressee

B. Received by (Printed Name) ... 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) 7006 2760 0001 6377 2754

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Postage	$ .69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark AUG 2014

Sent To: Robert E. Landreth, et ux
Donna P.
Street, Apt. or PO Box: 110 West Louisiana #404
City, State: Midland, TX 79701

PS Form

7006 2760 0001 6377 2761

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

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For delivery information visit

OFFIC EOG/OSPREY

Postage	$ .69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total F	6.69

Postmark AUG – 5 2014

Sent To: Duer Wagner, Jr., Charles Harris Trustee
c/o Harris, Finley & Bogle P.C.
Street, Apt. or PO Box: 777 Main Street, Suite 3600
City, State: Fort Worth, TX 76102

PS Form 3800, August 2006

7006 2760 0001 6377 3904

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Robert E. Landreth, et ux
Donna P.
110 West Louisiana #404
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Donna P. Landreth ☐ Agent ☐ Addressee

B. Received by (Printed Name) DONNA P. LANDRETH C. Date of Delivery 8-11-14

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) 7006 2760 0001 6377 2761

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

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Duer Wagner, Jr., Charles Harris Trustee
c/o Harris, Finley & Bogle P.C.
777 Main Street, Suite 3600
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Chris Copp ☐ Agent ☐ Addressee

B. Received by (Printed Name) Chris Copp C. Date of Delivery 8/7/14

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) 7006 2760 0001 6377 3904

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

7006 2760 0001 6377 3805

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EOG/OSPREY

OFFICI

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

AUG – 5 2014
Postmark Here

Sent
Stre or F
City

Mickey Marie Waren Estate (
widow of George W. Waren, Jr.)
7804 Colton Drive
Ft Worth, TX 76108

PS

nstructions

7006 2760 0001 6377 3928

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OFFICI

Postage	$ 1.69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total	$ 6.69

Postmark Here
AUG – 5 201

Sent
Street or PO
City, S

Estate of Daniel Galbreath
c/o Lizanne Mergrue
23 Shagbark Road
Norwalk, CT 06854

PS Fo

See reverse for instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mickey Marie Waren Estate (
widow of George W. Waren, Jr.)
7804 Colton Drive
Ft Worth, TX 76108

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Marcus Waren ☐ Agent ☐ Addressee

B. Received by (Printed Name) Marcus Waren
C. Date of Delivery 8-7-14

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) 7006 2760 0001 6377 3805

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total	6.69

AUG – 5 2014
Postmark Here

7006 2760 0001 6377 3935

Sent To: Estate of D. Morgan Firestone
Street, Apt. or PO: c/o Lizanne Mergrue
City, State: 23 Shagbark Road
Norwalk, CT 06854

PS Form 3800, August 2006 See Reverse for Instructions

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Po	6.69

Postmark Here
AUG – 5 2014

7006 2760 0001 6377 3942

Sent To: John G. Phillips
Street, Ap. or PO Box: c/o Douglas McCormick
City, State: P. O. Box 30304
Edmund, OK 73003

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
John G. Phillips
c/o Douglas McCormick
P. O. Box 30304
Edmund, OK 73003

COMPLETE THIS SECTION ON DELIVERY

X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) JORDAN BOEHS C. Date of Delivery 8-8-14

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) 7006 2760 0001 6377 3942

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

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG -5 2014

Sent To: Mamie Daggett, Life Tenant
Street, Apt. or PO Box: Ruth Daggett Estate
City, State: 1740 Broadway
Denver, CO 80274

PS Form

7006 2760 0001 6377 3522

U.S. Postal Service™
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(Domestic Mail Only; No I

For delivery information visit EOG/OSPREY
OFFIC

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG -5 2014

Sent To: John Patrick Allen
Street, Apt. or PO Box: c/o Maxie Allen
City, State, Z: 138 E. 6th
Benton, AZ 85602

PS Form 38

7006 2760 0001 6377 3966

CERTIFIED MAIL

SENDER: COMPLETE THIS SECTION — TION 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.

1. Article Addressed to:

Mamie Daggett, Life Tenant
Ruth Daggett Estate
1740 Broadway
Denver, CO 80274

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery: 8/7

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): 7006 2760 0001 6377 3522

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

Return

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

EOG/OSPREY

OFFICIAL USE

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	0.00
Total Postage & Fees	6.69

USPS CAMDEN PT. ALBANY
AUG 5 2014
Postmark Here

Sent To: Jimmy A. Smith
Street, Apt. No., or PO Box: c/o Maxie Allen
City, State, ZIP+4: 138 E. 6th
Benton, AZ 85602

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3669

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:

Jimmy A. Smith
c/o Maxie Allen
138 E. 6th
Benton, AZ 85602

85602-USPS POST OFFICE AUG - 7 2014

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X M. Allen ☐ Agent ☐ Addressee

B. Received by (Printed Name) MAXIE W. ALLEN C. Date of Delivery 8-7-14

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) 7006 2760 0001 6377 3669

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

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

EOG/OSPREY

OFFICIAL USE

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	0.00
Total Postage & Fees	6.69

USPS CAMDEN PT. ALBANY
AUG 5 2014
Postmark Here

Sent To: Jarene T. Price
Street, Apt. No., or PO Box: 4007 Forest Hill Drive
City, State, ZIP+4: Brownwood, Texas 76801

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3676

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:

Jarene T. Price
4007 Forest Hill Drive
Brownwood, Texas 76801

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Jarene T Price ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 8/8/14

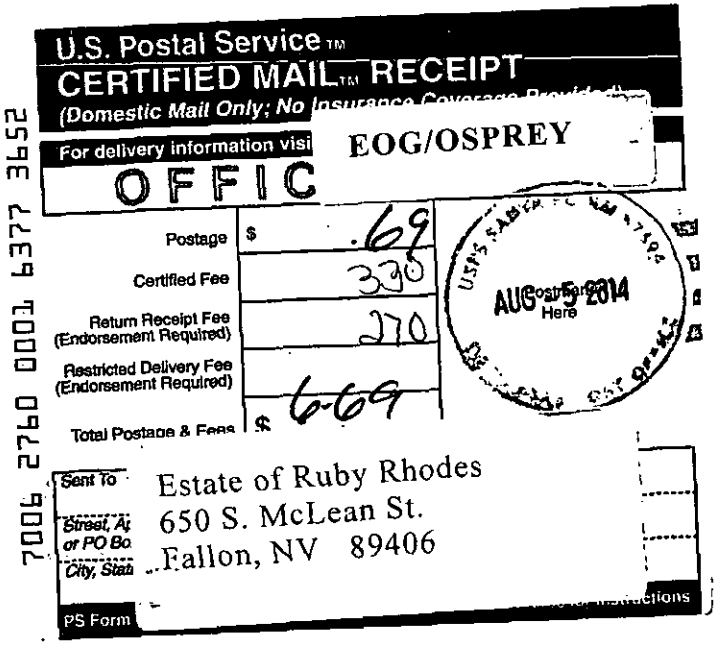
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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 2760 0001 6377 3676

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



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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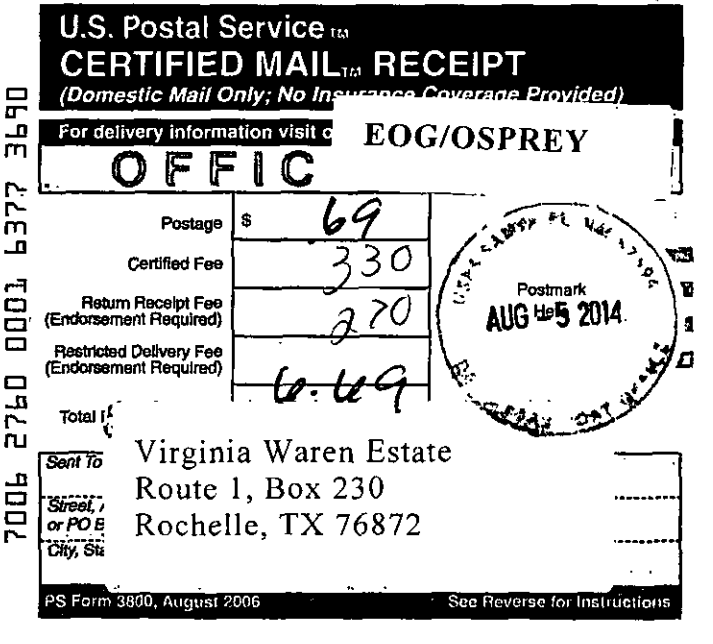
For delivery information visi
OFFIC
EOG/OSPREY
Postage $ .69
Certified Fee 3.30
Return Receipt Fee (Endorsement Required) 2.70
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 6.69
Postmark Here
AUG 5 2014
Sent To Estate of Ruby Rhodes
Street, Ap or PO Bo 650 S. McLean St.
City, Stat Fallon, NV 89406
PS Form
7006 2760 0001 6377 3652



U.S. Postal Service™
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EOG/OSPREY
Postage $ .69
Certified Fee 3.30
Return Receipt Fee (Endorsement Required) 2.70
Restricted Delivery Fee (Endorsement Required)
Total P
Postmark
AUG 5 2014
Sent To Virginia Waren Estate
Street, / or PO B Route 1, Box 230
City, St Rochelle, TX 76872
PS Form 3800, August 2006 See Reverse for Instructions
7006 2760 0001 6377 3690

Return

Return

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total	$ 6.69

Postmark Here
AUG – 5 2014

Sent To: Danny Joe Waren
Street, or PO: 1852 FM 2315
City, S: Rochelle, TX 76872

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3201

U.S. Postal Service™
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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG – 5 2014

Sent To: John Wayne Waren
Street, Apt or PO Box: 15106 Carola Way Dr.
City, State: Houston, TX 77070

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3218

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

John Wayne Waren
15106 Carola Way Dr.
Houston, TX 77070

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) 8-9-14 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) 7006 2760 0001 6377 3218

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

7006 2760 0001 6377 3720

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	6.69
Total Postage & Fees	

USPS SANDY PE MAIL 87594
AUG – 5 2014
Postmark Here

Sent To: Chance Barton
Street, Apt. No. or PO Box No.: 1919 N. Turner St.
City, State, ZIP+4: Hobbs, NM 88240

PS Form 3800, August 2006 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Chance Barton
1919 N. Turner St.
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Brenda Stewart ☐ Agent ☐ Addressee

B. Received by (Printed Name) Brenda Stewart C. Date of Delivery 8-7-14

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) 7006 2760 0001 6377 3720

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

7006 2760 0001 6377 3737

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	6.69
Total Postage & Fees	

USPS SANDY PE MAIL 87594
Postmark Here
AUG – 5 2014

Sent To: Chelsea Barton
Street, Apt. No. or PO Box No.: 1919 N. Turner St.
City, State, ZIP+4: Hobbs, NM 88240

PS Form 3800, August 2006 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Chelsea Barton
1919 N. Turner St.
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Brenda Stewart ☐ Agent ☐ Addressee

B. Received by (Printed Name) Brenda Stewart C. Date of Delivery 8-7-14

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) 7006 2760 0001 6377 3737

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total	6.69

Postmark Here AUG -5 2014

Sent To: Sherry Barton
Street, or PO: 1919 N. Turner St.
City, S: Hobbs, NM 88240

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3744

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total	6.69

AUG -5 2014 Postmark Here

Sent To: Hazel Waren Jones
Street, or PO: 604 E. 52nd Place North
City, St: Tulsa, OK 74126

PS Form 3800, August 2006 ...tructions

7006 2760 0001 6377 3751

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Sherry Barton
1919 N. Turner St.
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Brenda Stewart ☐ Agent ☐ Addressee

B. Received by (Printed Name) Brenda Stewart C. Date of Delivery 8-7-14

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

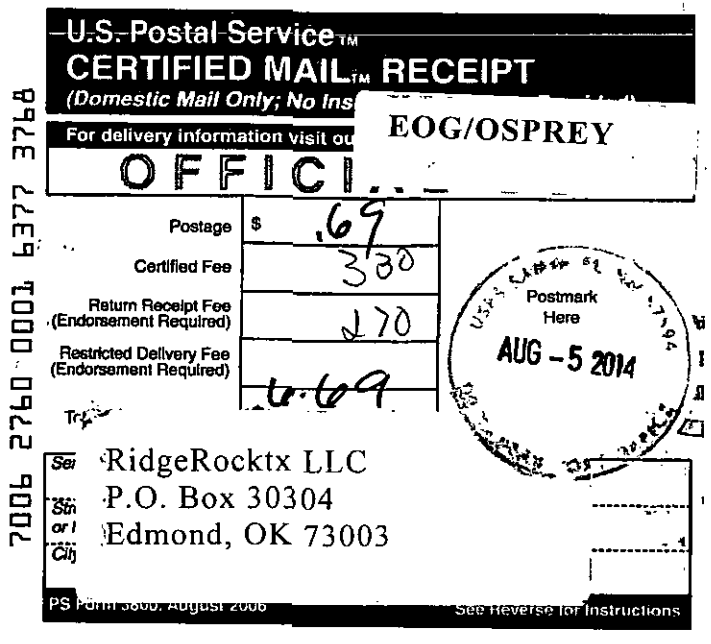
3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6377 3744

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

Returned



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EOG/OSPREY

7006 2760 0001 6377 3768

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	0.69

Postmark Here
AUG – 5 2014

Sen
Str
or I
City

RidgeRocktx LLC
P.O. Box 30304
Edmond, OK 73003

PS Form 3800, August 2006 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

RidgeRocktx LLC
P.O. Box 30304
Edmond, OK 73003

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) JORDAN BOEHS
C. Date of Delivery 8-8-14

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) 7006 2760 0001 6377 3768

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG 5 2014
USPS SAMM FL

Sent To
Street, A
or PO Bo
City, Sta

ABO Petroleum Corp.
105 S. 4th Street
Artesia, NM 88210

PS Form

7006 2760 0001 6377 3461

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:

ABO Petroleum Corp.
105 S. 4th Street
Artesia, NM 88210

ION ON DELIVERY

A. Signature
x [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 8/7/14

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) 7006 2760 0001 6377 3461

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
To	$ 6.69

Postmark Here
AUG 5 2014

Barbara A. Collins
138 E. 6th
Benton, AZ 85602

7006 2760 0001 6377 3546

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:

Barbara A. Collins
138 E. 6th
Benton, AZ 85602

CTION ON DELIVERY

A. Signature
x M. Allen ☐ Agent ☐ Addressee

B. Received by (Printed Name) MAXIE W. ALLEN C. Date of Delivery 8-7-14

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

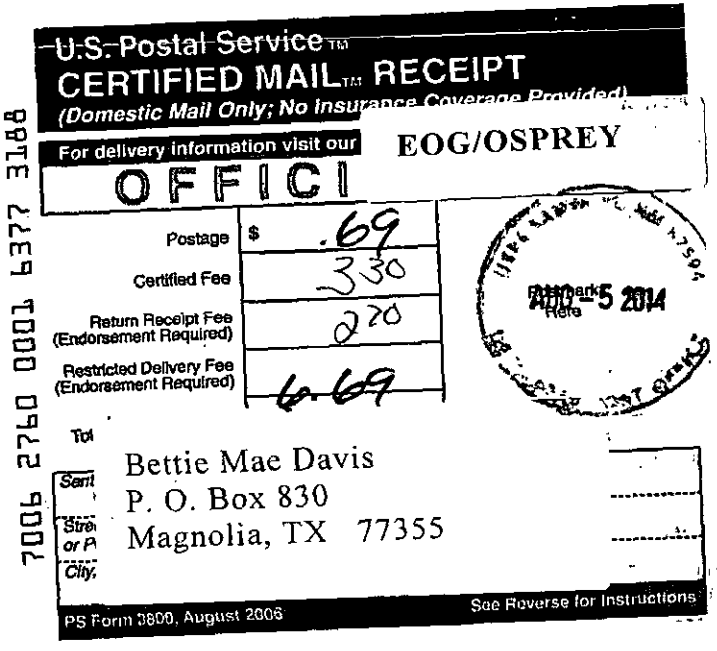
3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6377 3546

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

Return



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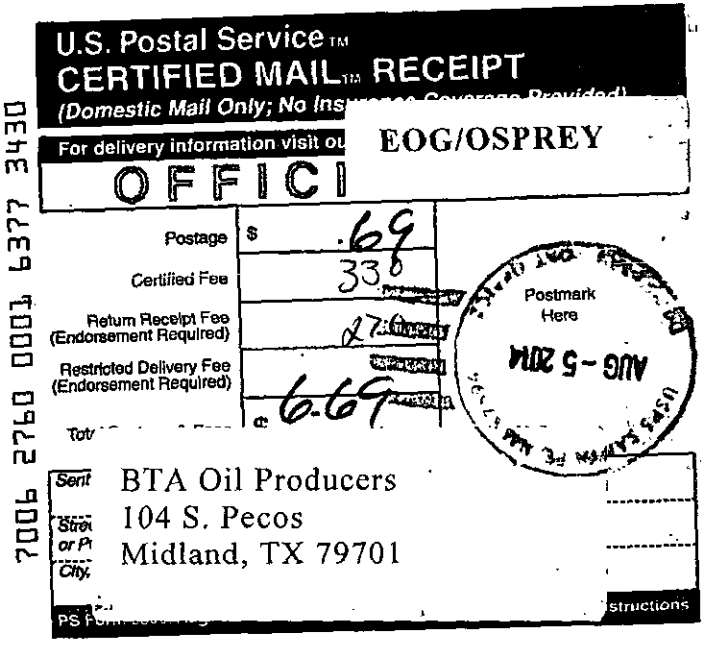
Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	6.69
Total Postage & Fees	

Postmark Here AUG 5 2014

Sent To: Bettie Mae Davis
Street, Apt. No., or PO Box No.: P. O. Box 830
City, State, ZIP+4: Magnolia, TX 77355

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3168



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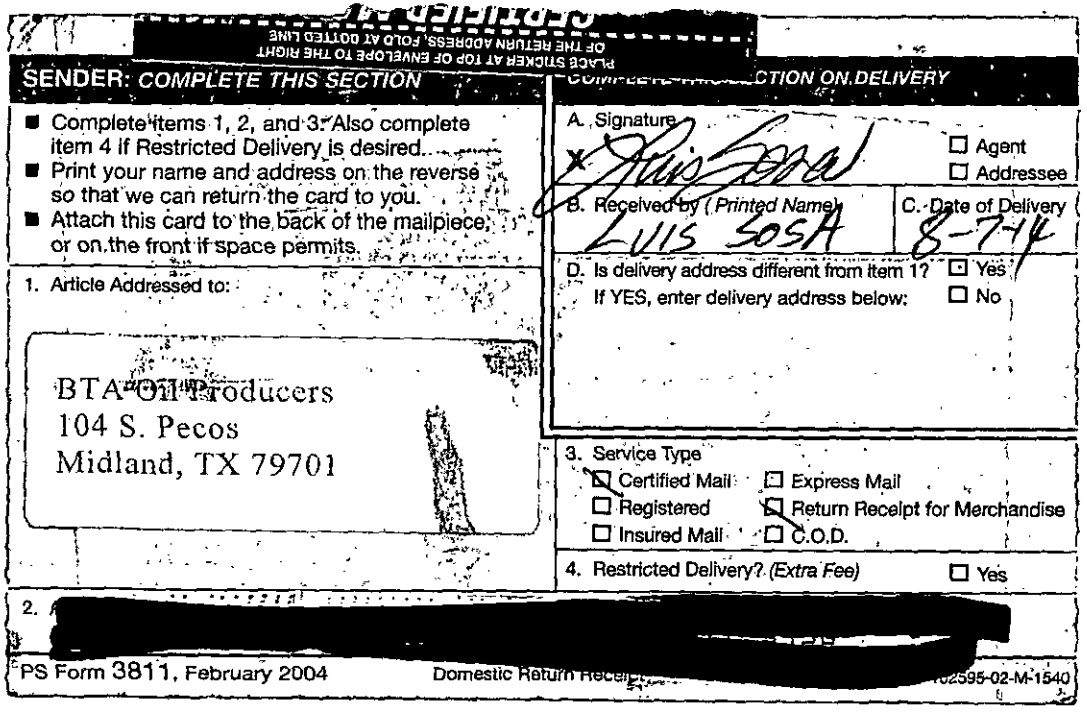
Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	6.69
Total Postage & Fees	

Postmark Here AUG - 5 2014

Sent To: BTA Oil Producers
Street, Apt. No., or PO Box No.: 104 S. Pecos
City, State, ZIP+4: Midland, TX 79701

PS Form [illegible] Instructions

7006 2760 0001 6377 3430



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:

BTA Oil Producers
104 S. Pecos
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) LUIS SOSA C. Date of Delivery 8-7-14

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. [redacted]

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

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG - 5 2014

Sent T...
Street or PO...
City, S...

Bureau of Land Management
620 E. Greene St.
Carlsbad, NM 88220

PS Fo... ...ructions

7006 2760 0001 6377 3423

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:

Bureau of Land Management
620 E. Greene St.
Carlsbad, NM 88220

A. Signature
X ... ☐ Agent ☐ Addressee

B. Received by (Printed Name) Lisa J Scott
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) 7006 2760 0001 6377 3423

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

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For delivery information visit ... EOG/OSPREY
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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total	6.69

Postmark Here
AUG - 5 2014

Sent To
Street, or PO...
City, S...

Chance Barton, Chelsea Barton
& Sherry Barton
1919 N. Turner St.
Hobbs, NM 88240

PS Form 3800, August 2006 ...ructions

7006 2760 0001 6377 2693

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:

Chance Barton, Chelsea Barton
& Sherry Barton
1919 N. Turner St.
Hobbs, NM 88240

A. Signature
X ... ☐ Agent ☐ Addressee

B. Received by (Printed Name) Brenda Stewart
C. Date of Delivery 8-7-14

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) 7006 2760 0001 6377 2693

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

7006 2760 0001 6377 3706

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	0.00
Total Postage & Fees	$ 6.69

Postmark Here
AUG – 5 2014

Sent To: EOG/OSPREY
Street, Apt. No., or PO Box No.:
City, State, ZIP+4:

Danny Joe Waren
1852 FM 2315
Rochelle, TX 76872

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3850

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	0.00
Total Postage & Fees	$ 6.69

Postmark Here
AUG – 5 2014

Sent To: EOG/OSPREY
Street, Apt. No., or PO Box No.:
City, State, ZIP+4:

David M. Lee
9 Highland Drive
North Caldwell, NJ 07006

PS Form 3800, August 2006 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

David M. Lee
9 Highland Drive
North Caldwell, NJ 07006

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

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

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

AUG 27 2014

WEST CALDWELL NJ

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 2760 0001 6377 3850

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EOG/OSPREY

OFFICIAL USE

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

AUG 5 2014
Postmark Here

Sent To: Dennis Eimers
Street, Apt. No., or PO Box No.: P.O. Box 152
City, State, ZIP+4: Midland, TX 79702

PS Form 3800, August 2006 — See Reverse for Instructions

7006 2760 0001 6377 3829

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EOG/OSPREY

OFFICIAL USE

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

AUG 5 2014
Postmark Here

Sent To: Donna C. Hopkins
Street, Apt. No., or PO Box No.: P. O. Box 53134
City, State, ZIP+4: Lubbock, TX 79453

PS Form 3800, August 2006 — See Reverse for Instructions

7006 2760 0001 6377 3607

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

SENDER: COMPLETE THIS SECTION 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.

1. Article Addressed to:

Dennis Eimers
P.O. Box 152
Midland, TX 79702

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 8-8-14

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) 7006 2760 0001 6377 3829

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

Return

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OFFICIAL USE

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

USPS CARLSBAD NM 88220 AUG 5 2014 Postmark Here

Sent To: Eldridge W. Copelin Estate
Street, Apt. No., or PO Box No.: Route 4
City, State, ZIP+4: Tahoka, TX 79373

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3232

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EOG/OSPREY

OFFICIAL USE

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	6.69

USPS CARLSBAD NM 88220 AUG 5 2014 Postmark Here

Sent To: Estate of Ruby Rhodes
Street, Apt. No., or PO Box No.: c/o Doris Emberlin
City, State, ZIP+4: 3941 Hilsboro Dr.
Fallon, NV 89406

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3683

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

CERTIFIED MAIL

SENDER: COMPLETE THIS SECTION 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.

1. Article Addressed to:

Estate of Ruby Rhodes
c/o Doris Emberlin
3941 Hilsboro Dr.
Fallon, NV 89406

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

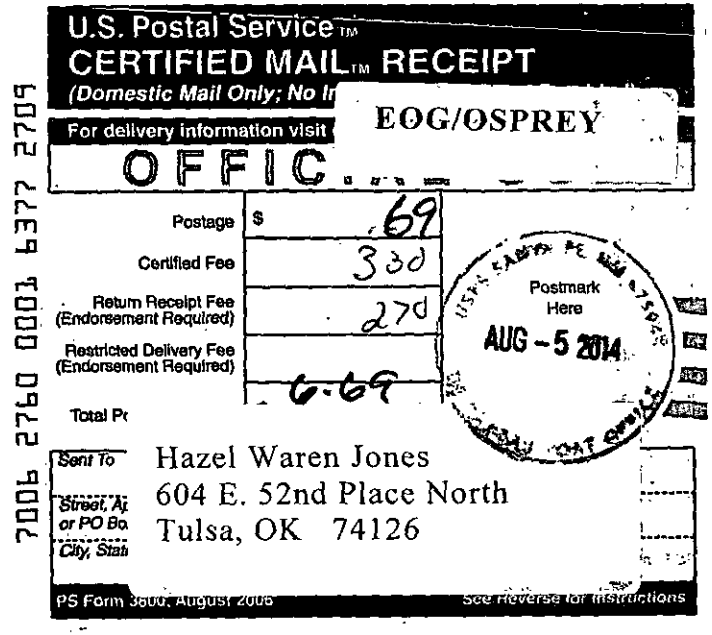
POSTMARK FALLON NV 89406 AUG 14 2014 USPS

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 2760 0001 6377 3683

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



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EOG/OSPREY

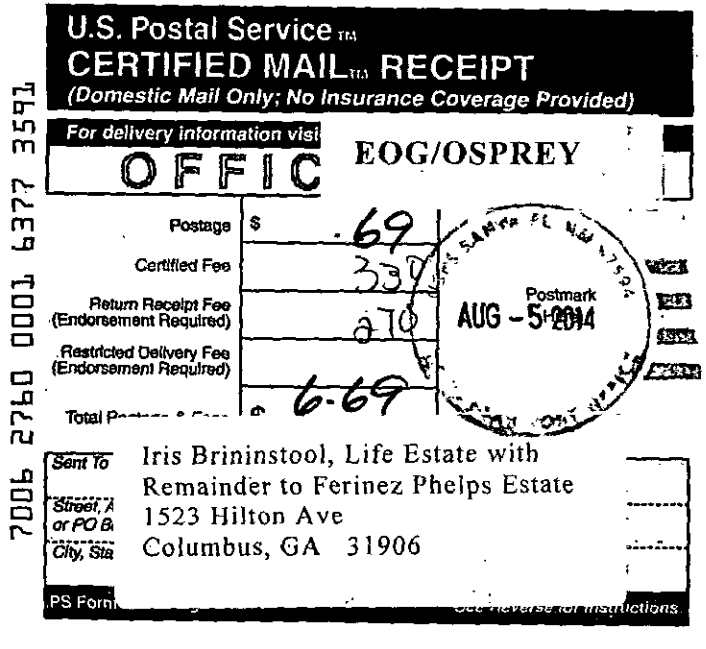
Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Pr	6.69

Postmark Here
AUG - 5 2014

Sent To: Hazel Waren Jones
Street, Ap or PO Bo: 604 E. 52nd Place North
City, Stat: Tulsa, OK 74126

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6372 2709



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EOG/OSPREY

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark
AUG - 5 2014

Sent To: Iris Brininstool, Life Estate with Remainder to Ferinez Phelps Estate
Street, A or PO B: 1523 Hilton Ave
City, Sta: Columbus, GA 31906

PS Form See Reverse for Instructions

7006 2760 0001 6372 3591

Returned

Return

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

For delivery information visit

OFFIC

EOG/OSPREY

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	1.70
Restricted Delivery Fee (Endorsement Required)	
Total Po	6.69

Postmark Here
AUG 5 2014

Sent To
Street, Apt or PO Box
City, State,

Jarene T. Price
4007 Forest Hill Drive
Brownwood, Texas 76801

PS Form 3

See Reverse for Instructions

7006 2760 0001 6377 3645

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

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EOG/OSPREY

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	1.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark
AUG 5 2014

Sent
Stree
or P
City,

Jerry Barnes
P.O. Box 93
Midland, TX 79702

PS F

structions

7006 2760 0001 6377 3812

CERTIFIED MAIL

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Jarene T. Price
4007 Forest Hill Drive
Brownwood, Texas 76801

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Jarene Price
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
8/8/14

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) 7006 2760 0001 6377 3645

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

Return

Return

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OFFIC...

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

USPS Santa Fe, NM 87594 — Postmark AUG 5 2014 — Here

7006 2760 0001 6377 3195

Sent To: Jessie Pearl Settles Estate
Street, Apt. or PO Box: Route 4, Box 51
City, State: Midland, TX 79701

PS ... Instructions

U.S. Postal Service™
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For delivery information visit ... EOG/OSPREY

OFFIC...

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

USPS Santa Fe, NM 87594 — AUG – 5 2014 Postmark Here

7006 2760 0001 6377 3560

Sent To: Jimmy A. Smith
Street, Apt. or PO Box: 138 E. 6th
City, State: Benton, AZ 85602

PS Form 3800, August 2006 ... Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Jimmy A. Smith
138 E. 6th
Benton, AZ 85602

BENSON POST OFFICE 85602-USPS AUG – 7 2014

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x M. Allen ☐ Agent ☐ Addressee

B. Received by (Printed Name) MAXIE W. ALLEN — C. Date of Delivery 8-7-14

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)* 7006 2760 0001 6377 3560

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

Return

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here AUG 5 2014

Sent To: John Patrick Allen
Street, Apt. No., or PO Box No.: 138 E. 6th
City, State, ZIP+4: Benton, AZ 85602

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3553

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here AUG 5 2014

Sent To: John Wayne Waren
Street, Apt. No., or PO Box No.: 15106 Carola Way Dr.
City, State, ZIP+4: Houston, TX 77070

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3713

CERTIFIED MAIL

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

SENDER: COMPLETE THIS SECTION 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 [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): 8-9-14 C. Date of Delivery

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

1. Article Addressed to:

John Wayne Waren
15106 Carola Way Dr.
Houston, TX 77070

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 2760 0001 6377 3713

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

Return

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OFFICIAL USE

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG 5 2014
USPS CAMDEN NJ 08104

Sent To: John W. Settles Estate (Bessie F. Waren widow)
Street, Apt. No., or PO Box No.: Route 4, Box 51
City, State, ZIP+4: Midland, TX 79701

PS Form 3800, August 2006 — See Reverse for Instructions

7006 2760 0001 6377 3157

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OFFICIAL USE

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG 5 2014
USPS CAMDEN NJ 08104

Sent To: Laylon Copelin
Street, Apt. No., or PO Box No.: 302 Vale
City, State, ZIP+4: Austin, TX 78746

PS Form 3800, August 2006 — See Reverse for Instructions

7006 2760 0001 6377 3614

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Laylon Copelin
302 Vale
Austin, TX 78746

SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 2760 0001 6377 3614

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

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG – 5 2014

7006 2760 0001 6377 3638

Sent To Leatrice B. Waren, widow of
Street, Apt. No., or PO Box No. Ferrell Waren
City, State, ZIP+4 4009 Glenwood Drive
Brownwood, Texas 76801

PS Form ... See Reverse for Instructions

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OFFIC

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG – 5 2014

7006 2760 0001 6377 3782

Sent To Leon Jeffcoat
Street, Apt. No., or PO Box No. 500 W. Texas, Ste. 100
City, State, ZIP+4 Midland, TX 79701

PS Form 3800, August 2006 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION — COMPLETE THIS SECTION 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.

1. Article Addressed to:

Leon Jeffcoat
500 W. Texas, Ste. 100
Midland, TX 79701

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 8-8

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) 7006 2760 0001 6377 3782

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

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG – 5 2014

Sent To: Leon Jeffcoat, Trustee
Street, Apt. No., or PO Box No.: 310 W. Wall, Ste. 500
City, State, ZIP+4®: Midland, TX 79701

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3799

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG 6 2014

Sent To: Lindsey Brininstool Trust
Street, Apt. No., or PO Box No.: P. O. Box 2468
City, State, ZIP+4®: Roswell, NM 88202

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3485

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Leon Jeffcoat, Trustee
310 W. Wall, Ste. 500
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
8-8

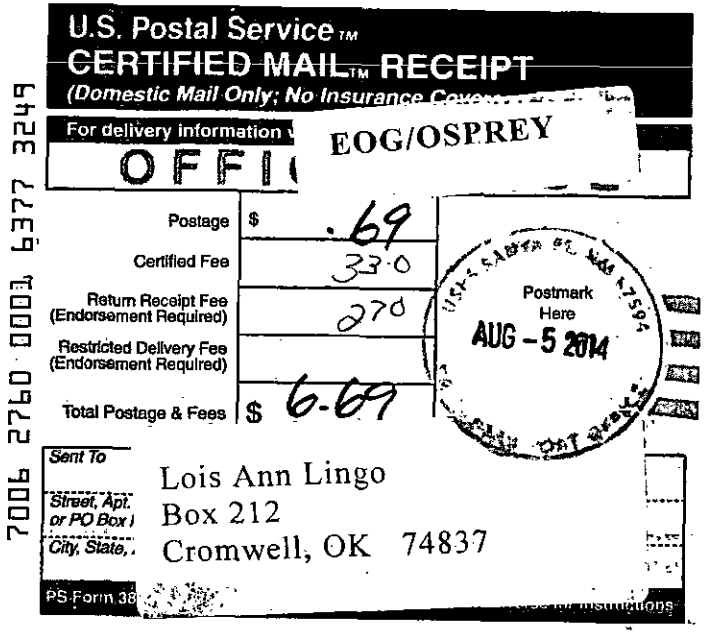
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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) 7006 2760 0001 6377 3799

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540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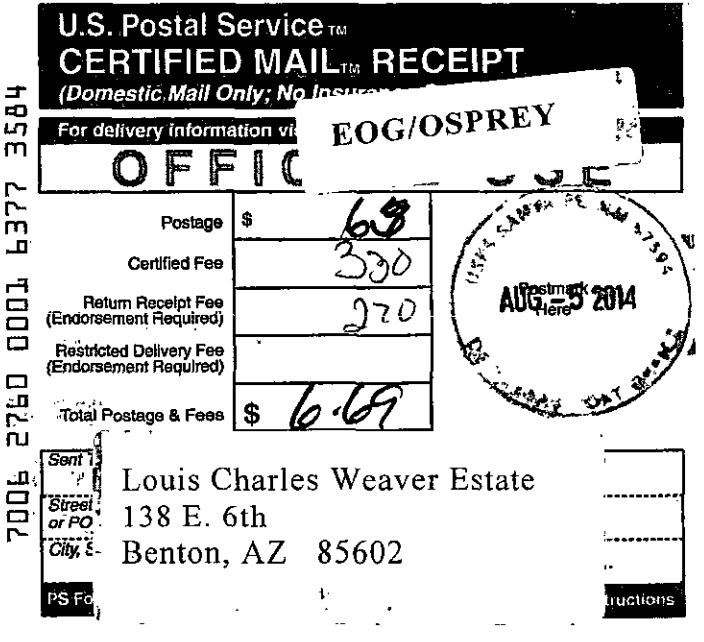
EOG/OSPREY
Postage $ .69
Certified Fee 3.30
Return Receipt Fee (Endorsement Required) 2.70
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 6.69
Postmark Here AUG - 5 2014
Sent To
Street, Apt. or PO Box
City, State,
Lois Ann Lingo
Box 212
Cromwell, OK 74837
PS Form 38
7006 2760 0001 6377 3249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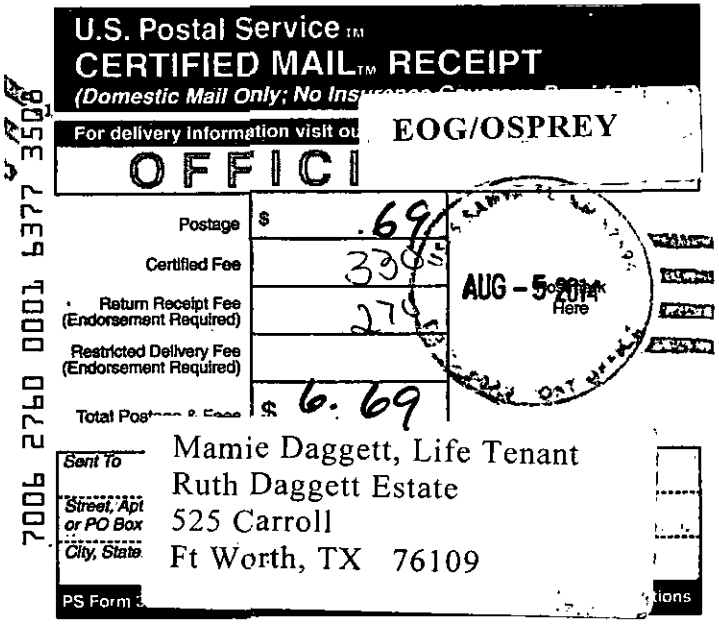
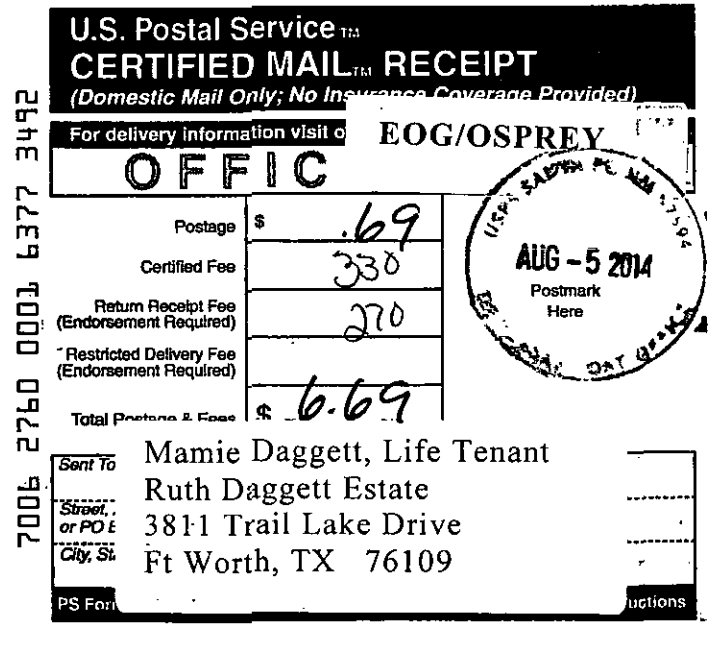
(Domestic Mail Only; No Insu
For delivery information vi
OFFIC
EOG/OSPREY
Postage $ 6.69
Certified Fee 3.30
Return Receipt Fee (Endorsement Required) 2.70
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 6.69
Postmark Here AUG 5 2014
Sent
Street or PO
City, S
Louis Charles Weaver Estate
138 E. 6th
Benton, AZ 85602
PS Fo
uctions
7006 2760 0001 6377 3584

Return

Return





Return

Return

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

EOG/OSPREY

OFFIC

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage	6.69

Postmark Here
AUG – 5 2014

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

Mamie Daggett, Life Tenant
Ruth Daggett Estate
1740 Broadway
Denver, CO 80274

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 3959

U.S. Postal Service™
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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	6.69

Postmark
AUG – 5 2014

Sent To
Street, Apt.
or PO Box
City, State,

Mamie Daggett, Life Tenant
Ruth Daggett Estate
801 Cherry Street
Ft Worth, TX 76102

PS Form 38 ons

7006 2760 0001 6377 3515

CERTIFIED MAIL

SENDER: CO

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
☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 8/7

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

1. Article Addressed to:

Mamie Daggett, Life Tenant
Ruth Daggett Estate
1740 Broadway
Denver, CO 80274

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 2760 0001 6377 3959

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

Return

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EOG/OSPREY

OFFICIAL

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG – 5 2014
USPS CABOT, AR 72023

Sent To: Maxie W. Allen
Street, Apt. No., or PO Box No.: 138 E. 6th
City, State, ZIP+4: Benton, AZ 85602

PS Form 3800, August 2006 — See Reverse for Instructions

7006 2760 0001 6377 3539

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Maxie W. Allen
138 E. 6th
Benton, AZ 85602

USPS POST OFFICE AUG 7 2014 JOSEPH, AR 72530

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x M. Allen — ☐ Agent ☐ Addressee

B. Received by (Printed Name): MAXIE W. ALLEN — C. Date of Delivery: 8-7-14

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): 7006 2760 0001 6377 3539

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

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG – 5 2014
USPS CABOT, AR 72023

Sent To: Mickey Marie Waren Estate (widow of George W. Waren, Jr.)
Street, Apt. No., or PO Box No.: 7804 Colton Drive
City, State, ZIP+4: Ft Worth, TX 76108

PS Form 3800, August 2006 — See Reverse for Instructions

7006 2760 0001 6377 3911

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mickey Marie Waren Estate (widow of George W. Waren, Jr.)
7804 Colton Drive
Ft Worth, TX 76108

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Marcus Waren — ☐ Agent ☐ Addressee

B. Received by (Printed Name): Marcus Waren — C. Date of Delivery: 8-7-14

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): 7006 2760 0001 6377 3911

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

7006 2760 0001 6377 3447

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EOG/OSPREY

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Po	6.69

Postmark Here
AUG - 5 2014

Sent To
Street, Ap or PO Bo
City, Stat

MYCO Industries, Inc.
105 S. 4th Street
Artesia, NM 88210

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

MYCO Industries, Inc.
105 S. 4th Street
Artesia, NM 88210

SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 8/5/14

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) 7006 2760 0001 6377 3447

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

7006 2760 0001 6377 3454

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EOG/OSPREY

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Pos	6.69

Postmark Here
AUG - 5 2014

Sent To
Street, Apt. or PO Box
City, State,

New Mexico State Land Office
310 Old Santa Fe Trail
Santa Fe, NM 87504

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

New Mexico State Land Office
310 Old Santa Fe Trail
Santa Fe, NM 87504

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

2. Article Number (Transfer from service label) 7006 2760 0001 6377 3454

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

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OFFICIAL USE

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark
USPS SANTA FE NM 87504
AUG 05 2014

Sent To: OXY Y-1 Company
Street, Apt. No. or PO Box No.: P.O. Box 27570
City, State, ZIP+4: Houston, TX 77227

PS Form 3800, August 2006 — See Reverse for Instructions

7006 2760 0001 6377 3478

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OFFICIAL USE

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark
USPS SANTA FE NM 87504
AUG 05 2014

Sent To: Patin Oil & Gas Company, Inc.
Street, Apt. No. or PO Box No.: 300 Wilcrest Drive, Ste. 115
City, State, ZIP+4: Houston, TX 77042

PS Form 3800, August 2006

7006 2760 0001 6377 3836

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

OXY Y-1 Company
P.O. Box 27570
Houston, TX 77227

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 8-8-14

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) 7006 2760 0001 6377 3478

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

Return

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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Tota	6.69

AUG – 5 2014 Postmark Here

Sent
Stree
or P
City,

Richard R. Frazier
1718 Greentree Ln.
Duncanville, TX 75137

PS Form 3800, August 2006

7006 2760 0003 6377 3843

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark AUG 5 2014

Sent To
Street,
or PO B
City, Sta

Robert E. Landreth, et ux Donna P.
110 West Louisiana #404
Midland, TX 79701

PS Form

7006 2760 0003 6377 3775

Return

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Robert E. Landreth, et ux Donna P.
110 West Louisiana #404
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Donna P. Landreth ☐ Agent ☐ Addressee

B. Received by (Printed Name) Donna P. Landreth
C. Date of Delivery 8-11-14

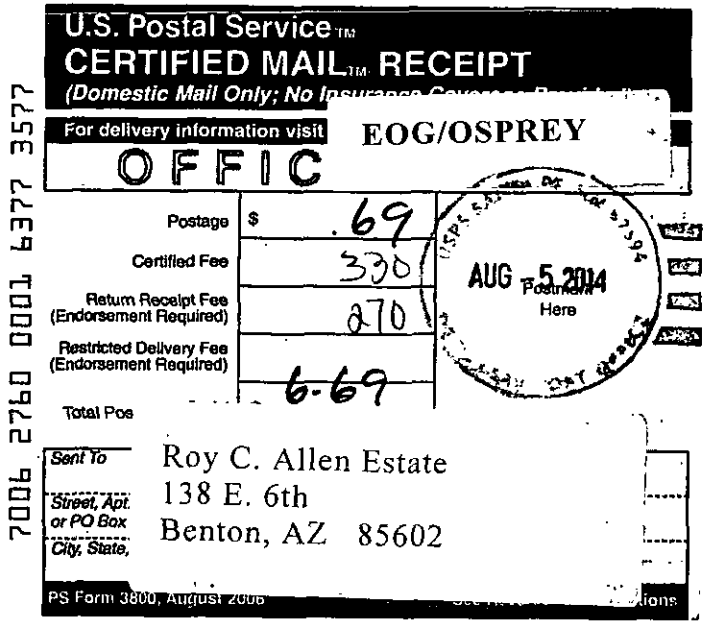
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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) 7006 2760 0003 6377 3775

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


U.S. Postal Service™
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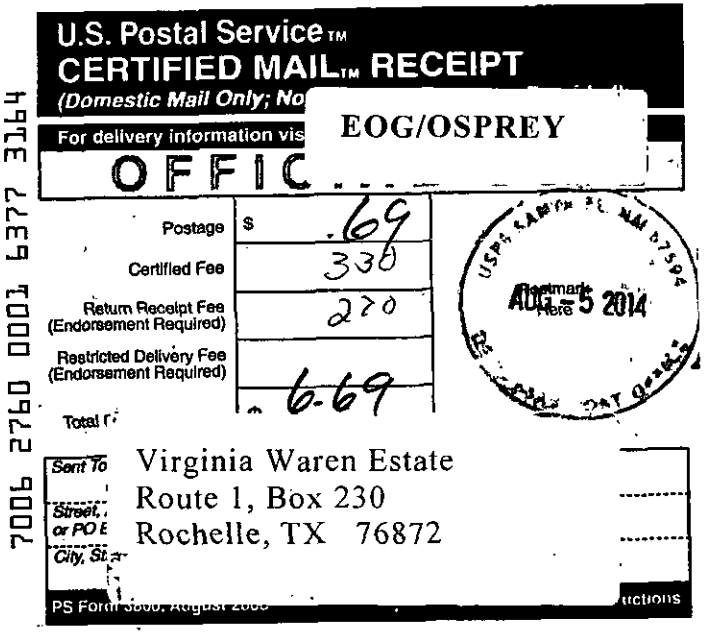
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit EOG/OSPREY
OFFIC
Postage $ .69
Certified Fee 3.30
Return Receipt Fee (Endorsement Required) 2.70
Restricted Delivery Fee (Endorsement Required)
Total Pos 6.69
USPS KAMAN PO AUG 5 2014 87594
Postmark Here
Sent To Roy C. Allen Estate
Street, Apt. or PO Box 138 E. 6th
City, State, Benton, AZ 85602
PS Form 3800, August 2006
7006 2760 0001 6377 3577

Return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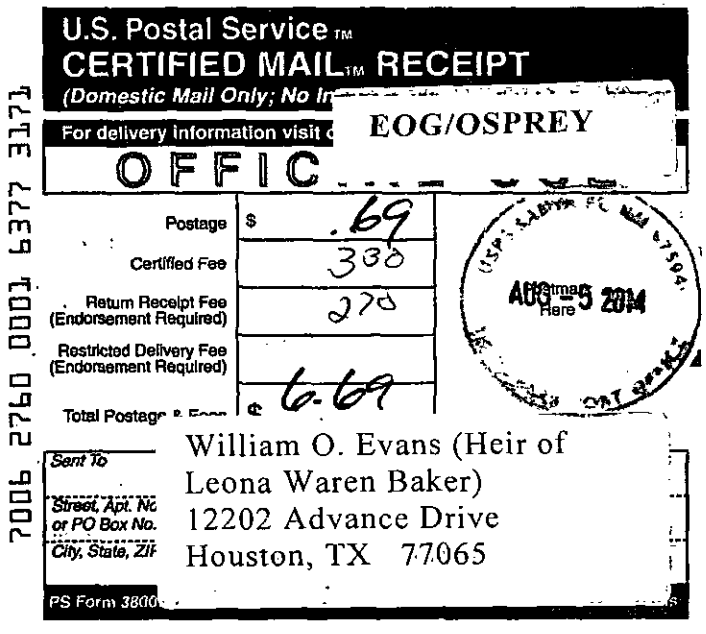
(Domestic Mail Only; No
For delivery information vis EOG/OSPREY
OFFIC
Postage $ .69
Certified Fee 3.30
Return Receipt Fee (Endorsement Required) 2.70
Restricted Delivery Fee (Endorsement Required)
Total 6.69
USPS KAMAN PO AUG 5 2014 87594
Postmark Here
Sent To Virginia Waren Estate
Street, or PO Route 1, Box 230
City, St Rochelle, TX 76872
PS Form 3800, August 2006
7006 2760 0001 6377 3164

Return



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(Domestic Mail Only; No In

For delivery information visit

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EOG/OSPREY

Postage	$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 6.69

Postmark Here
AUG -5 2014

7006 2760 0001 6377 3171

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

William O. Evans (Heir of
Leona Waren Baker)
12202 Advance Drive
Houston, TX 77065

PS Form 3800