

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

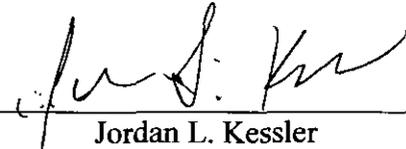
AMENDED APPLICATION OF CIMAREX
ENERGY COMPANY OF COLORADO FOR A
NON-STANDARD GAS SPACING AND PRORATION
UNIT, COMPULSORY POOLING AND TWO
NON-STANDARD LOCATIONS, EDDY COUNTY,
NEW MEXICO.

CASE NO. 15188

AFFIDAVIT

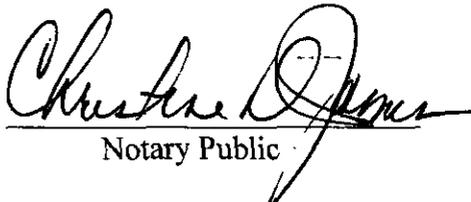
STATE OF NEW MEXICO)
) ss.
COUNTY OF BERNALILLO)

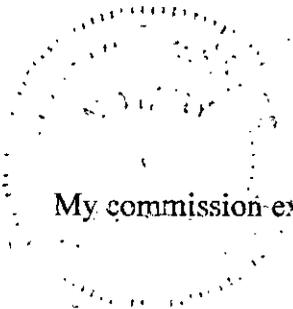
Jordan L. Kessler, attorney in fact and authorized representative of Cimarex Energy Company of Colorado, the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application was provided under the notice letter and proof of receipt attached hereto.


Jordan L. Kessler

SUBSCRIBED AND SWORN to before me this 15th day of September 2014 by Jordan

L. Kessler.


Notary Public



My commission expires: 7-17-17

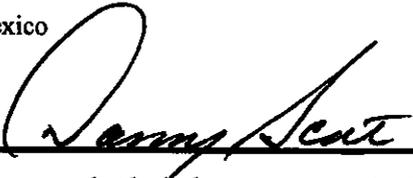
Affidavit of Publication

No. 23159

f New Mexico

County of Eddy:

Danny Scott



being duly sworn, says that he is the **Publisher**

of the Artesia Daily Press, a daily newspaper of General circulation, published in English at Artesia, said county and state, and that the hereto attached

Legal Notice

was published in a regular and entire issue of the said Artesia Daily Press, a daily newspaper duly qualified for that purpose within the meaning of Chapter 167 of the 1937 Session Laws of the state of New Mexico for

1 Consecutive weeks/day on the same

day as follows:

First Publication

August 31, 2014

Second Publication

Third Publication

Fourth Publication

Fifth Publication

Sixth Publication

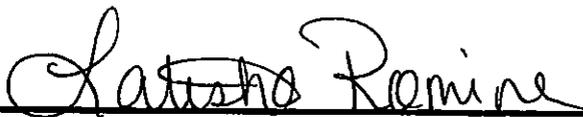
Subscribed and sworn before me this

2nd day of September 2014



OFFICIAL SEAL
Latisha Romine
NOTARY PUBLIC-STATE OF NEW MEXICO

My commission expires: 5/12/2015



Latisha Romine

Notary Public, Eddy County, New Mexico

Copy of Publication:

LEGAL NOTICE

CASE NO. 15188: Notice to all affected parties, heirs and devisees, including Velta Jean Daignault Holsum, Inc., Lucio Investments, CLM Production Company, Fasken Land & Minerals, and Bane Biggle, Inc. Application of Cimarex Energy Company of Colorado for a non-standard gas spacing and proration unit, compulsory pooling and two non-standard locations, Eddy County, New Mexico. Applicant seeks an order from the Division: (1) authorizing a non-standard location a 75 feet from the North line, 1980 feet from the West line, Section 14, Township 25 South, Range 28 East, and 330 feet from the South line, 1980 feet from the West line, Section 14, Township 25 South, Range 28 East; (2) creating a non-standard 320-acre, more or less, gas spacing and proration unit in the Wolfcamp formation, comprised of the W/2 of Section 14, Township 25 South, Range 28 East, NMPM, Eddy County, New Mexico; and (3) pooling all mineral interests in the Wolfcamp formation underlying this proposed non-standard spacing and proration unit. This proposed non-standard spacing and proration unit will be the project area for the Riverbend 14 Fed. Com. No. 2H to be horizontally drilled. Cimarex plans to drill the Riverbend 14 Fed. Com. No. 2H from a surface location 75 feet from the North line and 1980 feet from the West line to a bottom hole location 330 feet from the South line and 1980 feet from the West line to a depth sufficient to test the Wolfcamp formation, with a producing interval 330 feet from the North and South project boundary lines. Also to be considered will be the cost of drilling and completing said well, the allocation of these costs as well as the actual operating costs and charges for supervision, designation of Cimarex as operator of the well, and a 200% charge for risk involved in drilling said well. Said area is located approximately 22 miles southwest of Carlsbad, New Mexico.

Published in the Artesia Daily Press, Artesia, N.M., August 31, 2014 Legal No. 23158



MODRALL SPERLING

L A W Y E R S

August 21, 2014

VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

Jordan L. Kessler
505.848.1849
Fax: 505.449.9710
jlk@modrall.com

Re: In The Matter of the Amended Application of Cimarex Energy Company of Colorado, for Non-standard Gas Spacing and Proration Unit, Compulsory Pooling and Two Non-standard Locations in Eddy County, New Mexico.

TO: POOLED PARTIES LISTED ON EXHIBIT A:

This letter is to advise you that Cimarex Energy Company of Colorado has filed the enclosed amended application with the New Mexico Oil Conservation Division seeking a non-standard spacing and proration unit, two non-standard locations, and compulsory pooling, Eddy County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on September 18, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Office located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. As a party who may be affected by this application, we are notifying you of your right to appear at the hearing and participate in this case, including the right to present evidence either in support of or in opposition to the application. Failure to appear at the hearing may preclude you from any involvement in this case at a later date.

Pursuant to Division Rule 1208.B, you are further notified that if you desire to appear in this case, then you are requested to file a Pre-Hearing Statement with the Division not later than 5:00 PM on Thursday, September 11, 2014, with a copy delivered to the undersigned.

Sincerely,

Jordan L. Kessler
Attorney for Cimarex Energy
Company of Colorado

Y:\dox\client\82762\0126\CORRES\W2254632.DOCX

Modrall Sperring
Roehl Harris & Sisk P.A.

Bank of America Centre
500 Fourth Street NW
Suite 1000
Albuquerque,
New Mexico 87102

PO Box 2168
Albuquerque,
New Mexico 87103-2168

Tel: 505.848.1800
www.modrall.com



MODRALL SPERLING

L A W Y E R S

August 21, 2014

VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

Jordan L. Kessler
505.848.1849
Fax: 505.449.9710
jlk@modrall.com

Re: In The Matter of the Amended Application of Cimarex Energy Company of Colorado, for Non-standard Gas Spacing and Proration Unit, Compulsory Pooling and Two Non-standard Locations in Eddy County, New Mexico.

TO: OFFSET PARTIES LISTED ON EXHIBIT A:

This letter is to advise you that Cimarex Energy Company of Colorado has filed the enclosed amended application with the New Mexico Oil Conservation Division seeking a non-standard spacing and proration unit, two non-standard locations, and compulsory pooling, Eddy County, New Mexico. You are an offset operator to the proposed non-standard spacing and proration unit in the W/2 of Section 14, Township 25 South, Range 28 East, NMPM, Eddy County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on September 18, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Office located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. As a party who may be affected by this application, we are notifying you of your right to appear at the hearing and participate in this case, including the right to present evidence either in support of or in opposition to the application. Failure to appear at the hearing may preclude you from any involvement in this case at a later date.

Pursuant to Division Rule 1208.B, you are further notified that if you desire to appear in this case, then you are requested to file a Pre-Hearing Statement with the Division not later than 5:00 PM on Thursday, September 11, 2014, with a copy delivered to the undersigned.

Sincerely,

Jordan L. Kessler
Attorney for Cimarex Energy
Company of Colorado

Modrall Spierling
Roehl Harris & Sisk P.A.

Bank of America Centre
500 Fourth Street NW
Suite 1000
Albuquerque,
New Mexico 87102

PO Box 2168
Albuquerque,
New Mexico 87103-2168

Tel: 505.848.1800
www.modrall.com

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

AMENDED APPLICATION OF CIMAREX ENERGY COMPANY FOR A NON-STANDARD GAS SPACING AND PRORATION UNIT, COMPULSORY POOLING AND TWO NON-STANDARD LOCATIONS, EDDY COUNTY, NEW MEXICO.

CASE NO. 15188

AMENDED APPLICATION

Cimarex Energy Company of Colorado ("Cimarex"), through its undersigned attorneys, hereby makes application to the Oil Conservation Division pursuant to the provisions of NMSA 1978, Section 70-2-17, for an order: (1) authorizing two non-standard locations; (2) creating a non-standard 320-acre, more or less, gas spacing and proration unit in the Wolfcamp formation, comprised of the W/2 of Section 14, Township 25 South, Range 28 East, NMPM, Eddy County, New Mexico; and (3) pooling all mineral interests in the Wolfcamp formation underlying this proposed non-standard spacing and proration unit. In support of this application, Cimarex states as follows:

1. Cimarex is an interest owner in the subject lands and has the right to drill a well thereon.
2. Cimarex seeks to dedicate the W/2 of Section 14 to the proposed well to form a non-standard 320-acre, more or less, gas spacing and proration unit (the "project area").
3. Cimarex proposes to drill the Riverbend 14 Fed. Com No. 2H well to a depth sufficient to test the Wolfcamp formation.
4. This project area is governed by the wildcat gas well acreage and well location requirements, NMAC 19.15.15.10(B) (pool code 97949). These special rules require (1) 320

acre spacing units; and (2) wells to be located 660 feet from the outer boundary of the quarter section. Cimarex seeks two non-standard locations in order to allow a producing area that is 330 feet from the project area boundary. Cimarex plans to drill the Riverbend 14 Fed. Com. No. 2H from a surface location 75 feet from the North line and 1980 feet from the West line to a bottom hole location 330 feet from the South line and 1980 feet from the West line to a depth sufficient to test the Wolfcamp formation, with a producing interval 330 feet from the North and South project boundary lines.

5. Cimarex has sought but been unable to obtain a voluntary agreement from all mineral interest owners in the Wolfcamp formation underlying the proposed project area to participate in the drilling of the well or to otherwise commit their interests to the well.

6. Approval of the non-standard unit and the pooling of all mineral interests in the Wolfcamp formation underlying the proposed project area will prevent the drilling of unnecessary wells, prevent waste and protect correlative rights.

7. Notice of this application has been given in accordance with Division rules as shown on Exhibit A.

WHEREFORE, Cimarex Energy Company of Colorado requests this application be set for hearing before an Examiner of the Oil Conservation Division on September 18, 2014, and after notice and hearing as required by law, the Division enter its order:

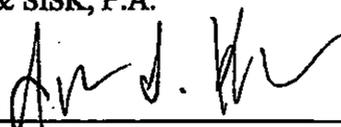
A. Creating a non-standard gas spacing and proration unit ("project area") in the Wolfcamp formation comprised of W/2 of Section 14, Township 25 South, Range 28 East, NMPM, Eddy County, New Mexico;

B. Authorizing two non-standard locations;

- C. Pooling all mineral interests in the Wolfcamp formation underlying this non-standard spacing and proration unit/project area;
- D. Designating Cimarex as operator of this unit and the well to be drilled thereon;
- E. Authorizing Cimarex to recover its costs of drilling, equipping and completing this well;
- F. Approving actual operating charges and costs charged for supervision, together with a provision adjusting the rates pursuant to the COPAS accounting procedure; and
- G. Setting a 200% charge for the risk involved in drilling and completing the well in the event a working interest owner elects not to participate in the well.

Respectfully submitted,

MODRALL, SPERLING, ROEHL, HARRIS
& SISK, P.A.

By: 

Earl E. DeBrine, Jr.
Jordan L. Kessler
Post Office Box 2168
Bank of America Centre
500 Fourth Street NW, Suite 1000
Albuquerque, New Mexico 87103-2168
Telephone: 505.848.1800
Attorneys for Applicant

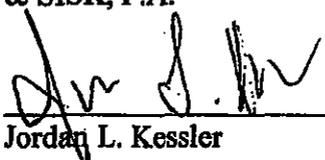
Certificate of Service

I hereby certify that on August 19, 2014, I served a copy of the foregoing document to the following counsel of record by e-mail:

Michael H. Feldewert
Gabrielle A. Gerholt
Adam G. Rankin
HOLLAND & HART LLP
P.O. Box 2208
Santa Fe, NM 87504
mfeldewert@hollandhart.com
gagerholt@hollandhart.com
agrarkin@hollandhart.com
Attorneys for CL&F Resources LP

Joel M. Carson, III
Elizabeth A. Ryan
CARSON RYAN LLC
P.O. Box 1612
Roswell, NM 88202-1612
beth@carsonryan.com
Attorneys for Read & Stevens, Inc.

MODRALL, SPERLING, ROEHL, HARRIS
& SISK, P.A.

By: 

Jordan L. Kessler

Y:\dox\client\82762\0126\GENERAL\W2253484.DOCX

AMENDED EXHIBIT A
CIMAREX OPERATING LLC NOTICE LIST

Parties to be pooled:

CL&F Resources, LP
Attn: Gary Dobbs
4 Greenspoint Place, Ste. 1500
Houston, TX 77060

CL&F Resources, LP
Attn: Dale Weimer
16945 N. Chase Drive
Suite 1500
Houston, TX 77060

CL&F Resources, LP
Attn: Gary Dobbs
16945 N. Chase Drive
4 Greenspoint Place, Ste. 1500
Houston, TX 77060

E.O.G. Resources, Inc.
Attn: Matthew Phillips
5509 Champions Dr.
Midland, TX 79706

Fasken Land & Minerals, LTD
Attn: Linda Hicks
6101 Holiday Hill Rd.
Midland, TX 79707

OXY, USA WTP LP
Attn: Steve Flynn
P.O. Box 27570
Houston, TX 77227

Read & Stevens, Inc.
Attn: Rory McMinn
P.O. Box 1518
Roswell, NM 88202

Carolyn Beall
P.O. Box 3098
Midland, TX 79702

Betty Read Young
1311 W. Third
Roswell, NM 88201

Diamond Star Prod., Co., LLC
P.O. Box 638
Ardmore, OK 73042-0638

William V. Palmer, LLC
3226 Anderson Dr.
Lovington, NM 88260

Offsets

MRC Permian Company
Attn: Jonathan Filbert
5400 LBJ Freeway, Suite 1500
Dallas, TX 75240

Devon Energy Production Co., LP
333 W. Sheridan Ave.
Oklahoma City, OK 73102

COG Acreage, LP
600 West Illinois Avenue
Midland, TX 79701

COG Acreage, LP
550 West Texas Avenue, Ste 100
Midland, TX 79701

CWPLCO, INC.
6 Desta Dr
Midland, TX 79705

Chevron USA Inc.
1400 Smith Street
Houston, TX 77022

Chevron USA, Inc.
P.O. Box 1150
Midland, TX 79702

Clayton Williams, Jr.
Six Desta Drive, Suite 6500
Midland, Texas 797905

Morris E. Schertz and Holly K. Schertz
P.O. Box Drawer 2588
Roswell, New Mexico 88202

Empire Energy, LLC
1213 West 3rd Street
Roswell, New Mexico 88201

New State Gas, LLC
1213 West 3rd Street
Roswell, New Mexico 88201

Mary Ann Jenkins
287 Moon Ranch Rd.
Elida, New Mexico 88116

Joy Elizabeth Cooksey
P.O. Box 45
Carlsbad, NM 88221

Velta Jean Daigneault, SSP
9008 Pony Express Trail NE
Albuquerque, NM 87109

Larry G. Phillips and Anne C. Phillips
P.O. Box 2197
Midland, Texas 79702

COG Operating LLC
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

The Leonard Trust
P.O. Box 400
Roswell, NM 88202

Holsum Inc.
723 North Main
Roswell, NM 88201

Tumbleweed Exploration LLC
5002 Greentree Ave.
Midland, TX 79707

Critterville LLC
P.O. Box 620
Wimberly, TX 78676

El Capitan Ventures LLC
4322 Fondren
San Antonio, TX 78217

Shannon C. Leonard, Trustee of the
Shannon C. Leonard Child's Trust
1018 Sunset Canyon N.
Dripping Springs, TX 78620

Michael Kyle Leonard, Trustee of the Michael Kyle Leonard Child's Trust
P.O. Box 2625
Eagle Pass, TX 78853

JB III Partners, LP
21 Lord William Penn Dr.
Morristown, NJ 07960

Lucie Investments, LP
159 S.E. Ballantrea Ct.
Port St. Lucie, FL 34952

CLM Production Co.
3008 Bandolina Avenue
Roswell, NM 88201

Lincoln Oil & Gas, LLC
701 Three Cross Roswell
Roswell, NM 88201

William V. Palmer, LLC
3226 E. Anderson Dr.
Lovington, NM 88260

Diamond Star Production Co. LLC
P.O. Box 638
Ardmore, OK 73402

Betty R. Young
1311 W. 3rd St.
Roswell, NM 88201

Carolyn Beall
P.O. Box 3098
Midland, TX 79702

Stacie L. Sexe
400 N. Pennsylvania Ave, Ste. 1000
Roswell, NM 88201-4780

Watson Properties, LLC
3905 Futura Dr.
Roswell, NM 88201

Yates Petroleum Corporation
105 S. Fourth Street
Artesia, NM 88210

ABO Petroleum Corporation
105 S. Fourth Street
Artesia, NM 88210

Myco Industries, Inc.
105 S. Fourth Street
Artesia, NM 88210

OXY Y-1 Company
P.O. Box 2750
Houston, TX 77227

OXY USA Inc.
P.O. Box 27570
Houston, TX 77227

Nearburg Exploration LLC
P.O. Box 823085
Dallas, TX 75382

CL&F Resources LP
450 Gears Rd.
Houston, TX 77067

CL&F Resources, LP
Attn: Gary Dobbs
16945 N. Chase Drive
4 Greenspoint Place, Ste. 1500
Houston, TX 77060

Fasken Land and Minerals, LP
303 W. Wall St., Ste. 1900
Midland, TX 79701

Read & Stevens, Inc.
P.O. Box 1518
Roswell, NM 88202

Bane Bigbie, Inc.
RR 1 Box 26
Ringling, OK 73456-9703

Centennial LLC
P.O. Box 1837
Roswell, NM 88202

Hat Mesa Oil Co.
P.O. Box 1216
Albuquerque, NM 87103-1216

Mewbourne Oil Company
P.O. Box 7698
Tyler, TX 75711

Panhandle Oil and Gas, Inc.
5400 N Grand Blvd. Suite 300
Oklahoma City, Oklahoma 73112

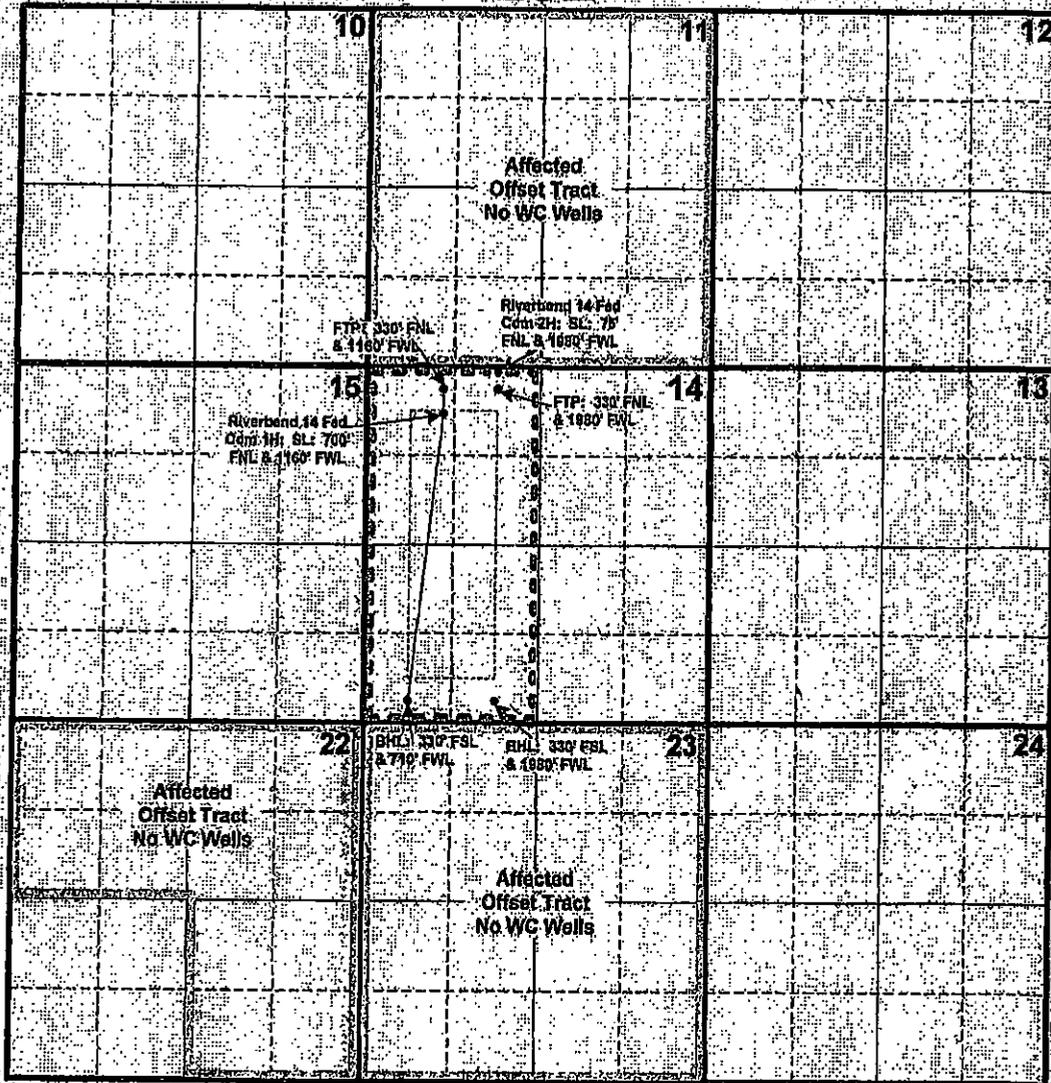
Velta Jean Daigneault, SSP
9008 Pony Express Trail N.E.
Albuquerque, New Mexico 87109

Worrall Investment Corporation
Attn: John Worrall
P.O. Box 1834
Roswell, NM 88202

JTD Resources, LLC
Attn: Dan Leonard
P.O. Box 3422
Midland, TX 79702

28E

25S



Cimarex Energy Company
Unorthodox Location Application
Riverbend 14 Federal Com Wells No. 1H & 2H

List of Affected Parties for Non-standard Location: Section 11 and Section 23, Township 25
South, Range 28 East, NMPM, Eddy County, New Mexico.

MRC Permian Company
Attn: Jonathan Filbert
5400 LBJ Freeway, Suite 1500
Dallas, TX 75240

Devon Energy Production Co., LP
333 W. Sheridan Ave.
Oklahoma City, OK 73102

COG Acreage, LP
600 West Illinois Avenue
Midland, TX 79701

Chevron USA Inc.
1400 Smith Street
Houston, TX 77022

COG Operating LLC
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

CWPLCO, INC.
6 Desta Dr
Midland, TX 79705

Mary Ann Jenkins
287 Moon Ranch Rd.
Elida, New Mexico 88116

Morris E. Schertz and Holly K. Schertz
P.O. Box Drawer 2588
Roswell, New Mexico 88202

Empire Energy, LLC
1213 West 3rd Street
Roswell, New Mexico 88201

New State Gas, LLC
1213 West 3rd Street
Roswell, New Mexico 88201

OXY USA Inc.

P.O. Box 27570
Houston, TX 7722

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CERTIFIED MAILING/NOTICE LIST – Cimarex Energy/Northbend
Case No. 15188 – Amended Application [Mailed 8/21/14]

	Pooled Party	USPS Article No.	Date Returned
1.	CL&F Resources, LP Attn: Gary Dobbs 4 Greenspoint Place, Ste. 1500 Houston, TX 77060	7014 0150 0000 5970 8427	8/29/14
2.	CL&F Resources, LP Attn: Dale Weimer 16945 N. Chase Drive, Ste. 1500 Houston, TX 77060	7014 0150 0000 5970 8434	8/29/14
3.	CL&F Resources, LP Attn: Gary Dobbs 16945 N. Chase Drive 4 Greenspoint Place, Suite 1500 Houston, TX 77060	7014 0150 0000 5970 8441	8/29/14
4.	E.O.G. Resources, Inc. Attn: Matthew Phillips 5509 Champions Dr. Midland, TX 79706	7014 0150 0000 5970 8458	8/28/14
5.	Fasken Land & Minerals, LTD Attn: Linda Hicks 6101 Holiday Hill Rd. Midland, TX 79707	7014 0150 0000 5970 8465	
6.	OXY, USA WTP LP Attn: Steve Flynn P.O. Box 27570 Houston, TX 77227	7014 0150 0000 5970 8472	9/15/14
7.	Read & Stevens, Inc. Attn: Rory McMinn P.O. Box 1518 Roswell, NM 88202	7014 0150 0000 5970 8489	8/29/14
8.	Carolyn Beall P.O. Box 3098 Midland, TX 79702	7014 0150 0000 5970 8496	8/28/14
9.	Betty Read Young 1311 W. Third Roswell, NM 88201	7014 0150 0000 5970 8502	8/29/14
10.	Diamond Star Prod., Co., LLC P.O. Box 638 Ardmore, OK 73042-0638	7014 0150 0000 5970 8519	8/28/14
11.	William V. Palmer, LLC 3226 Anderson Drive Lovington, NM 88260	7014 0150 0000 5970 8526	8/29/14
	Offset Party	USPS Article No.	Date Returned
1.	MRC Permian Company Attn: Jonathan Filbert 5400 LBJ Freeway, Suite 1500 Dallas, TX 75240	7014 0150 0000 5970 8533	8/28/14
2.	Devon Energy Production Co., LP 333 W. Sheridan Ave. Oklahoma City, OK 73102	7014 0150 0000 5970 8540	9/3/14

CERTIFIED MAILING/NOTICE LIST - Cimarex Energy/Northbend
Case No. 15188 – Amended Application [Mailed 8/21/14]

3.	COG Acreage, LP 600 West Illinois Avenue Midland, TX 79701	7014 0150 0000 5970 8557	8/29/14
4.	COG Acreage, LP 550 West Texas Avenue, Ste 100 Midland, TX 79701	7014 0150 0000 5970 8564	8/28/14
5.	CWPLCO, INC. 6 Desta Drive Midland, TX 79705	7014 0150 0000 5970 8571	8/28/14
6.	Chevron USA Inc. 1400 Smith Street Houston, TX 77022	7014 0150 0000 5970 8588	8/29/14
7.	Chevron USA, Inc. P.O. Box 1150 Midland, TX 79702	7014 0150 0000 5970 8595	Returned 9/15/14 – No such number
8.	Clayton Williams, Jr. Six Desta Drive, Suite 6500 Midland, TX 79705	7014 0150 0000 5970 8601	8/28/14
9.	Morris E. Schertz and Holly K. Schertz P.O. Box Drawer 2588 Roswell, NM 88202	7014 0150 0000 5970 8618	8/29/14
10.	Empire Energy, LLC 1213 West 3rd Street Roswell, NM 88201	7014 0150 0000 5970 8625	9/2/14
11.	New State Gas, LLC 1213 West 3rd Street Roswell, NM 88201	7014 0150 0000 5970 8632	8/28/14
12.	Mary Ann Jenkins 287 Moon Ranch Rd. P.O. Box 2754 Elida, NM 88116 Roswell, NM 88202	7014 0150 0000 5970 8649	8/29/14
13.	Joy Elizabeth Cooksey P.O. Box 45 Carlsbad, NM 88221	7014 0150 0000 5970 8656	8/29/14
14.	Velta Jean Daigneault, SSP 9008 Pony Express Trail NE Albuquerque, NM 87109	7014 0150 0000 5970 8663	Returned 9/2/14 – Attempted – not known
15.	Larry G. Phillips and Anne C. Phillips P.O. Box 2197 Midland, TX 79702	7014 0150 0000 5970 8670	8/29/14
16.	COG Operating LLC One Concho Center 600 W. Illinois Avenue Midland, TX 79701	7014 0150 0000 5970 8687	8/29/14
17.	The Leonard Trust P.O. Box 400 Roswell, NM 88202	7014 0150 0000 5970 8694	8/25/14
18.	Holsum Inc. 723 North Main Roswell, NM 88201	7014 0150 0000 5970 8700	Returned 9/2/14 – Return to Sender – Unable to Forward

CERTIFIED MAILING/NOTICE LIST - Cimarex Energy/Northbend
Case No. 15188 - Amended Application [Mailed 8/21/14]

19.	Tumbleweed Exploration LLC 5002 Greentree Ave. Midland, TX 79707	7014 0150 0000 5970 8717	8/28/14
20.	Critterville, LLC P.O. Box 620 Wimberly, TX 78676	7014 0150 0000 5970 8724	9/3/14
21.	El Capitan Ventures, LLC 4322 Fondren San Antonio, TX 78217	7014 0150 0000 5970 8731	8/28/14
22.	Shannon C. Leonard, Trustee of the Shannon C. Leonard Child's Trust 1018 Sunset Canyon N. Dripping Springs, TX 78620	7014 0150 0000 5970 8748	8/28/14
23.	Michael Kyle Leonard, Trustee of the Michael Kyle Leonard Child's Trust P.O. Box 2625 Eagle Pass, TX 78853	7014 0150 0000 5970 8755	9/3/14
24.	JB III Partners, LP 21 Lord William Penn Dr. Morristown, NJ 07960	7014 0150 0000 5970 8762	9/5/14
25.	Lucie Investments, LP 159 1590 S.E. Ballantrea Ct. Port Saint Lucie, FL 34952	7014 0150 0000 5970 8779	9/2/14
26.	CLM Production Company 3008 Bandolina Avenue Roswell, NM 88201	7014 0150 0000 5970 8786	Returned 9/2/14 - Returned to Sender/Unable to Forward
27.	Lincoln Oil and Gas, LLC 701 Three Cross Roswell, NM 88201	7014 0150 0000 5970 8793	8/25/14
28.	William V. Palmer, LLC 3226 E. Anderson Dr. Lovington, NM 88260	7014 0150 0000 5970 8809	8/29/14
29.	Diamond Star Production Co., LLC P.O. Box 638 Ardmore, OK 73042	7014 0150 0000 5970 8816	8/28/14
30.	Betty R. Young 1311 W. Third Street Roswell, NM 88201	7014 0150 0000 5970 8823	8/29/14
31.	Carolyn Beall P.O. Box 3098 Midland, TX 79702	7014 0150 0000 5970 8830	8/28/14
32.	Stacie L. Sexe 400 N. Pennsylvania Avenue, Suite 1000 Roswell, NM 88201-4780	7014 0150 0000 5970 8847	8/29/14
33.	Watson Properties, LLC 3905 Futura Drive Roswell, NM 88201	7014 0150 0000 5970 8854	8/25/14
34.	Yates Petroleum Corporation 105 S. Fourth Street Artesia, NM 88210	7014 0150 0000 5970 8878	8/29/14

CERTIFIED MAILING/NOTICE LIST – Cimarex Energy/Northbend
Case No. 15188 – Amended Application [Mailed 8/21/14]

35.	ABO Petroleum Corporation 105 S. Fourth Street Artesia, NM 88210	7014 0150 0000 5970 8885	8/29/14
36.	Myco Industries, Inc. 105 S. Fourth Street Artesia, NM 88210	7014 0150 0000 5970 8892	8/29/14
37.	OXY Y-1 Company P.O. Box 2750 Houston, TX 77227	7014 0150 0000 5970 8908	9/8/14
38.	OXY USA Inc. P.O. Box 27570 Houston, TX 77227	7014 0150 0000 5970 8915	9/15/14
39.	Nearburg Exploration, LLC P.O. Box 823085 Dallas, TX 75382	7014 0150 0000 5970 8922	8/29/14
40.	CL&F Resources, LP 450 Gears Road Houston, TX 77067	7014 0150 0000 5970 8939	
41.	CL&F Resources, LP Attn: Gary Dobbs 16945 N. Chase Drive 4 Greenspoint Place, Ste 1500 Houston, TX 77060	7014 0150 0000 5970 8946	8/29/14
42.	Fasken Land & Minerals 303 W. Wall Street, Suite 1900 Midland, TX 79701	7014 0150 0000 5970 8953	Returned 9/15/14 – Undeliverable as Addressed – No forwarding Order on File
43.	Read & Stevens, Inc. P.O. Box 1518 Roswell, NM 88202	7014 0150 0000 5970 8960	8/29/14
44.	Bane Bigbie, Inc. RR1 Box 26 Ringling, OK 73456-9703	7014 0150 0000 5970 8977	Returned 9/2/14 – Return to Sender/Unable to Forward
45.	Bane Bigbie, Inc. Attn: Bane Bigbie, President P.O. Box 998 Ardmore, OK 73402	7014 9150 0000 5970 8984	8/28/14
46.	Centennial, LLC P.O. Box 1837 Roswell, NM 88202	7014 0150 0000 5970 8991	8/29/14
47.	Hat Mesa Oil Co. P.O. Box 1216 Albuquerque, NM 87103-1216	7014 0150 0000 5970 9004	8/25/14
48.	Mewbourne Oil Company P.O. Box 7698 Tyler, TX 75711	7014 0150 0000 5970 9011	9/3/14
49.	Panhandle Oil and Gas, Inc. 5400 N Grand Blvd. Suite 300 Oklahoma City, OK 73112	7014 0150 0000 5970 9028	8/28/14

CERTIFIED MAILING/NOTICE LIST - Cimarex Energy/Northbend
Case No. 15188 - Amended Application [Mailed 8/21/14]

50.	Worrall Investment Corporation Attn: John Worrall P.O. Box 1834 Roswell, NM 88202	7014 0150 0000 5970 9035	8/29/14
51.	JTD Resources, LLC Attn: Dan Leonard P.O. Box 3422 Midland, TX 79702	7014 0150 0000 5970 9042	8/28/14

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7014 0150 0000 5970 8427

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

Postmark Here
AUG 21 2014

Sent To **CL&F Resources, LP**
Attn: Gary Dobbs
 Street, Apt. No. or PO Box No. **4 Greenspoint Place, Ste. 1500**
 City, State, Zip **Houston, TX 77060**

PS Form 3800

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:

CL&F Resources, LP
Attn: Gary Dobbs
4 Greenspoint Place, Ste. 1500
Houston, TX 77060

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) **Macynus**

C. Date of Delivery **8/25/14**

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) **7014 0150 0000 5970 8427**

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

UNITED STATES POSTAL SERVICE

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First-Class Mail
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 USPS
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Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
AUG 29 2014
 BY: _____

03216868

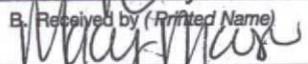
U.S. Postal Service™
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7014 0150 0000 5970 8434

Postage	\$	Postmark Here AUG 21 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	
Sent To	CL&F Resources, LP	
Street, Apt or PO Box	Attn: Dale Weimer 16945 N. Chase Drive, Ste 1500	
City, State	Houston, TX 77060	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: CL&F Resources, LP Attn: Dale Weimer 16945 N. Chase Drive, Ste 1500 Houston, TX 77060		B. Received by (Printed Name)  C. Date of Delivery 8/28/14	
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
7014 0150 0000 5970 8434			

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

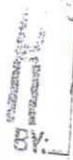
UNITED STATES POSTAL SERVICE
 TX 770
 25 AUG 14
 PM 5 L

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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 Albuquerque, NM 87103-2168

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7014 0150 0000 5970 8441

Postage	\$	Postmark Here AUG 21 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To
 CL&F Resources, LP
 Attn: Gary Dobbs
 Street, Apt or PO Box 16945 N. Chase Drive
 City, State, 4 Greenspoint Place, Suite 1500
 Houston, TX 77060

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:

CL&F Resources, LP
 Attn: Gary Dobbs
 16945 N. Chase Drive
 4 Greenspoint Place, Suite 1500
 Houston, TX 77060

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 Nancy Maxe 8/25/14

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) **7014 0150 0000 5970 8441**

UNITED STATES POSTAL SERVICE

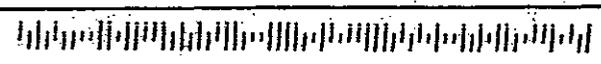


First-Class Mail
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 USPS
 Permit No. G-10

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7014 0150 0000 5970 8458

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

Postmark
 Here
AUG 21 2014

Sent To **E.O.G. Resources, Inc.**
 Attn: Matthew Phillips
 Street, Apt. or PO Box **5509 Champions Dr.**
 City, State **Midland, TX 79706**

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:

**E.O.G. Resources, Inc.
 Attn: Matthew Phillips
 5509 Champions Dr.
 Midland, TX 79706**

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Robert Force* Agent
 Addressee

B. Received by (Printed Name) **R. Force** C. Date of Delivery **8-26-14**

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) **7014 0150 0000 5970 8458**

UNITED STATES POSTAL SERVICE GROSS TX 79721 26 AUG 2014 PM

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

Postmark
Here
AUG 21 2014

Sent To **Fasken Land & Minerals, LTD**
Attn: Linda Hicks
Street, Apt. or PO Box **6101 Holiday Hill Rd.**
City, State **Midland, TX 79707**

PS Form 3800, April 2012

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7014 0150 0000 5970 8472

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

Postmark
Here

AUG 21 2014

Sent To
 Street, Ap or PO Box
 City, State
 PS Form

OXY, USA WTP LP
 Attn: Steve Flynn
 P.O. Box 27570
 Houston, TX 77227

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, USA WTP LP
 Attn: Steve Flynn
 P.O. Box 27570
 Houston, TX 77227

2. Article Number
 (Transfer from service label)

7014 0150 0000 5970 8472

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *Genova* 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

UNITED STATES POSTAL SERVICE



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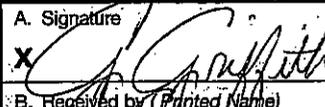
OFFICIAL USE

7014 0150 0000 5970 8489

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

Postmark
AUG 21 2014

Sent To: **Read & Stevens, Inc.**
 Attn: **Rory McMinn**
 Street, or P.O. #: **P.O. Box 1518**
 City, State, ZIP+4: **Roswell, NM 88202**

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) J. GRIFFITH</p> <p>C. Date of Delivery AUG 25 2014</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Read & Stevens, Inc. Attn: Rory McMinn P.O. Box 1518 Roswell, NM 88202</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p> <p>7014 0150 0000 5970 8489</p>	

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

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Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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AUG 29 2014
 BY: _____

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7014 0150 0000 5970 8496

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

Postmark
Here
AUG 21 2014

Sent To	Carolyn Beall
Street, or P.O. Box	P.O. Box 3098
City, St	Midland, TX 79702
PS Form	uctions

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:

Carolyn Beall
 P.O. Box 3098
 Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *Andrea Alvarez* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
 Andrea Alvarez 8-21-14

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

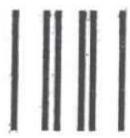
3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7014 0150 0000 5970 8496**

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

UNITED STATES POSTAL SERVICE

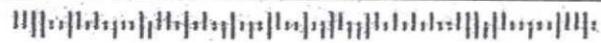


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 USPS
 Permit No. G-10

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 P.O. Box 2168
 Albuquerque, NM 87103-2168

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 AUG 28 2014



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7014 0150 0000 5970 8502

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

Postmark
Here
AUG 21 2014

Sent To **Betty Read Young**
1311 W. Third
 Street, or PO Box **Roswell, NM 88201**
 City, State

PS Form Actions

SENDER COMPLETE THIS SECTION

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

1. Article Addressed to:

Betty Read Young
1311 W. Third
Roswell, NM 88201

2. Article Number
(Transfer from service label)

7014 0150 0000 5970 8502

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *STACY DELTA* G. Date of Delivery

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

AUG 25 2014

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

UNITED STATES POSTAL SERVICE TX 754

25 AUG 2014 PM 1

First Class Mail
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 USPS
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P.O. Box 2168
Albuquerque, NM 87103-2168

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7014 0150 0000 5970 8519

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

Postmark
Here

AUG 21 2014

Sent To **Diamond Star Prod., Co., LLC**
P.O. Box 638
 Street, Apt. or PO Box **Ardmore, OK 73042-0638**
 City, State, _____
 PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Diamond Star Prod., Co., LLC
P.O. Box 638
Ardmore, OK 73042-0638

2. Article Number
(Transfer from service label)

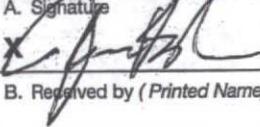
7014 0150 0000 5970 8519

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery **8-25-14**

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

UNITED STATES POSTAL SERVICE

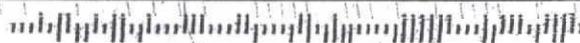


First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
AUG 28 2014
 BY: _____



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7014 0150 0000 5970 8526

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

Postmark
Here

AUG 21 2014

Sent To: **William V. Palmer, LLC**
 3226 E. Anderson Dr.
 Lovington, NM 88260

Street or PO Box
 City, St

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

William V. Palmer, LLC
 3226 E. Anderson Dr.
 Lovington, NM 88260

2. Article Number
 (Transfer from service label)

7014 0150 0000 5970 8526

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Shelley Palmer Agent
 Addressee

B. Received by (Printed Name)
Shelley Palmer

C. Date of Delivery
8/23/14

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

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

25 AUG 2014 PM 5

First Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

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7014 0150 0000 5970 8533

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Postmark
 Here
AUG 21 2014

Sent To **MRC Permian Company**
 Attn: Jonathan Filbert
 Street, Apt. # or PO Box N **5400 LBJ Freeway, Suite 1500**
 City, State, Z **Dallas, TX 75240**

PS Form 3800

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
 Attn: Jonathan Filbert
 5400 LBJ Freeway, Suite 1500
 Dallas, TX 75240

2. Article Number

7014 0150 0000 5970 8533

(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *A Patel*

- Agent
 Addressee

B. Received by (Printed Name)

A Patel

C. Date of Delivery

8.15.14

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

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 AUG 28 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 USE

7014 0150 0000 5970 8540

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

Postmark
 Here
AUG 21 2014

Sent To **Devon Energy Production Company LP**
 Street, A or PO Box **333 W. Sheridan Avenue**
 City, State **Oklahoma City, OK 73102**

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <i>Jordan Kessler</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery AUG 21 2014</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____</p>
<p>1. Article Addressed to:</p> <p>Devon Energy Production Company LP 333 W. Sheridan Avenue Oklahoma City, OK 73102</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number: (Transfer from service label)</p> <p>7014 0150 0000 5970 8540</p>	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
SEP - 3 2014
 BY: _____



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OFFICIAL USE

7014 0150 0000 5970 8557

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

Postmark
Here

AUG 21 2014

Sent To **COG Acreage, LP**
 600 West Illinois Avenue
 Midland, TX 79701

Street, or PO Box
 City, State

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

COG Acreage, LP
 600 West Illinois Avenue
 Midland, TX 79701

2. Article Number

(Transfer from service label)

7014 0150 0000 5970 8557

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

- Agent
 Addressee

B. Received by (Printed Name)

Benjamin Smith

C. Date of Delivery

8/25/14

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

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

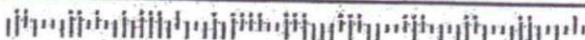


First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 AUG 29 2014
 BY: _____



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OFFICIAL USE

7014 0150 0000 5970 8564

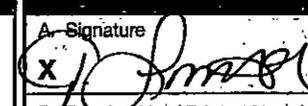
Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Postmark
 Here
AUG 21 2014

Sent To **COG Acreage, LP**
550 West Texas Avenue, Ste 100
Midland, TX 79701

Street, Apt. N. or PO Box N.
 City, State, Z.

PS Form 3811

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) Jennifer Smith</p> <p>C. Date of Delivery 08/25/14</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>COG Acreage, LP 550 West Texas Avenue, Ste 100 Midland, TX 79701</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number: (Transfer from service)</p> <p>7014 0150 0000 5970 8564</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

UNITED STATES POSTAL SERVICE

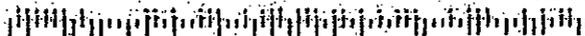


First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
AUG 29 2014
 BY: _____



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

OFFICIAL USE

7014 0150 0000 5970 8571

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

Postmark
Here
AUG 21 2014

Sent To **CWPLCO, INC.**

Street, or PO E **6 Desta Drive**

City, St **Midland, TX 79705**

PS Form 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:

**CWPLCO, INC.
 6 Desta Drive
 Midland, TX 79705**

2. Article Number
 (Transfer from service) **7014 0150 0000 5970 8571**

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee
Kim Beach

B. Received by (Printed Name) **Kim Beach**

C. Date of Delivery **8/28**

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

102595-02-M-1540

UNITED STATES POSTAL SERVICE ODESSA TX 79702
 28 AUG 2014 PM

First Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

**Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168**

RECEIVED
AUG 28 2014
 BY:

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

OFFICIAL USE

7014 0150 0000 5970 8588

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

Postmark
 Here
AUG 21 2014

Sent To **Chevron USA Inc.**
 1400 Smith Street
 Houston, TX 77022

Street, Apt 1
 or PO Box N

City, State, Z

PS Form 38

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <i>[Signature]</i> Agent <input type="checkbox"/> Addressee <input checked="" type="checkbox"/></p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Chevron USA Inc. 1400 Smith Street Houston, TX 77022</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number: 7014 0150 0000 5970 8588 (Transfer from service label)</p>	

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

UNITED STATES POSTAL SERVICE

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 AUG 29 2014
 BY _____

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

CERTIFIED MAIL™



7014 0150 0000 5970 8595

Hasler
08/21/2014
US POSTAGE \$0



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

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

OFFICIAL USE

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

Postmark Here

AUG 21 2014

Sent To **Chevron USA Inc.**
P.O. Box 1150
Midland, TX 79702

PS Form 38

MODRALL SPERLING

Modrall Sperling Roehl Harris & Sisk, P.A.
P.O. Box 2168
Albuquerque NM 87103-2168

RETURNED TO SENDER
NO SUCH NUMBER

Chevron USA Inc.
P.O. Box 1150
Midland, TX 79702

NO SUCH NUMBER
NS10

AUG 23 2014

0511

RECEIVED
SEP 15 2014

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:

Chevron USA Inc.
P.O. Box 1150
Midland, TX 79702

2. Article Number

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Agent
 Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) Yes

7014 0150 0000 5970 8595

7014 0150 0000 5970 8601

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Post	

Postmark
Here
AUG 21 2014

Sent To
Clayton Williams, Jr.
Street, Apt or PO Box
Six Desta Drive, Suite 6500
City, State,
Midland, TX 79705

PS Form 3811, August 2004 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:

Clayton Williams, Jr.
Six Desta Drive, Suite 6500
Midland, TX 79705

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Kim P. [Signature] Addressee

B. Received by (Printed Name) **Kim P. [Signature]** C. Date of Delivery **8-26-14**

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) **7014 0150 0000 5970 8601**

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

UNITED STATES POSTAL SERVICE



First Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
AUG 28 2014



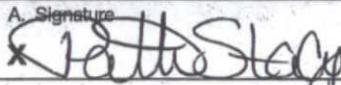
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com®

OFFICIAL USE

7014 0150 0000 5970 8618

Postage	\$	Postmark Here AUG 21 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total P		
Sent To Morris E. Schertz and Holly K. Schertz P.O. Box Drawer 2588 Roswell, NM 88202		
Street, A or PO B		
City, Sta		
PS Form Instructions		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery Pat Stacy 8-25-14</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Morris E. Schertz and Holly K. Schertz P.O. Box Drawer 2588 Roswell, NM 88202</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p> <p>7014 0150 0000 5970 8618</p>	
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-1540

UNITED STATES POSTAL SERVICE
 LUBBOCK, TX 79404
 25 AUG 2014 04 21

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. 640

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 AUG 29 2014
 BY: _____

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

7014 0150 0000 5970 8625

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

OFFICIAL USE

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

Postmark
 Here
AUG 21 2014

Sent To: **Empire Energy, LLC**
 Street: **1213 West 3rd Street**
 City, St: **Roswell, NM 88201**

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Empire Energy, LLC
1213 West 3rd Street
Roswell, NM-88201

2. Article Number
 (Transfer from service label)

7014 0150 0000 5970 8625

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name)
Mary O'Neil

C. Date of Delivery
28 AUG 2014
88201

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

Domestic Return Receipt 102595-02-M-1540

UNITED STATES POSTAL SERVICE

28 AUG 2014 PM 1

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-40

• Sender: Please print your name, address, and ZIP+4 in this box •

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SEP - 2 2014

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

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OFFICIAL USE

7014 0150 0000 5970 8632

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

Postmark
Here

AUG 2 1 2014

Sent To **New State Gas, LLC**
 Street, Apt. or PO Box **1213 West 3rd Street**
 City, State **Roswell, NM 88201**

PS Form _____

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <i>[Signature]</i></p> <p>B. Received by (Printed Name) <i>Ronald H. Harker</i> Date of Delivery <i>AUG 28 2014</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below. <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>New State Gas, LLC 1213 West 3rd Street Roswell, NM 88201</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service) 7014 0150 0000 5970 8632</p>	

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

UNITED STATES POSTAL SERVICE

ALBUQUERQUE, TX 754

28 AUG 2014 PM 11

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
AUG 28 2014
 BY: _____

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

7034 0150 0000 5970 8649

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

OFFICIAL USE

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

Postmark
 Here
AUG 21 2014

Sent To **Mary Ann Jenkins**
 Street, Ap. or PO Box **287 Moon Ranch Rd.**
Elida, NM 88116
 City, State

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:

Mary Ann Jenkins
 287 Moon Ranch Rd.
 Elida, NM 88116
PO Box 2754
Roswell NM 88202

2. Article Number

(Transfer from service label)

7034 0150 0000 5970 8649

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) **ROSSELL** C. Date of Delivery **AUG 21 2014**

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

PO BOX 2754
Roswell, NM 88202

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

4. Restricted Delivery? (Extra Fee) Yes

UNITED STATES POSTAL SERVICE



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

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AUG 29 2014
 BY:

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

OFFICIAL USE

7014 0150 0000 5970 8656

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

Postmark
Here

AUG 21 2014

Sent To Joy Elizabeth Cooksey
 Street, Apt. or PO Box P.O. Box 45
 City, State, Carlsbad, NM 88221

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Joy Cooksey</u> C. Date of Delivery <u>8-25-14</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Joy Elizabeth Cooksey P.O. Box 45 Carlsbad, NM 88221</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number: (Transfer from service label)</p> <p>7014 0150 0000 5970 8656</p>	<p>CARLSBAD NM AUG 25 2014 88220-0000</p>

UNITED STATES POSTAL SERVICE
 LUBBOCK TX 79401
 25 AUG 2014 PM 2

First-Class Mail
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 USPS
 Permit No. C-10

• Sender: Please print your name, address, and ZIP+4 in this box

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
AUG 29 2014

CARLSBAD NM
AUG 25 2014
88220-0000

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

CERTIFIED MAIL



14 0150 0000 5970 8663



U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only, No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE

Postmark Here
AUG 21 2014

Sent To: **Velta Jean Daigneault, SSP**
9008 Pony Express Trail NE
Albuquerque, NM 87109

Street, A or PO Box
 City, State

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Pr.	

9999 8269 0000 0570 4702

MODRALL SPERLING

Modrall Sperling Roehl Harris & Sisk, P.A.
P.O. Box 2168
Albuquerque NM 87103-2168

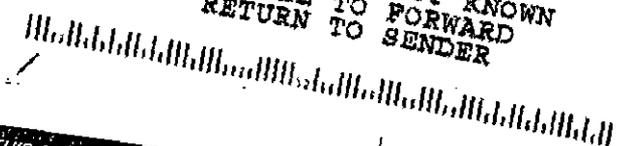
NOT AT THIS ADDRESS !!

NIXIE

871092018-1N

**RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD
RETURN TO SENDER**

08/25/14



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:

Velta Jean Daigneault, SSP
9008 Pony Express Trail NE
Albuquerque, NM 87109

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X

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

7070 0500 0000 5970 8663



7014 0150 0000 5970 8670

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Postmark
Here
AUG 21 2014

Sent To **Larry G. Phillips and Anne C. Phillips**
P.O. Box 2197
Midland, TX 79702

Street, Apt. 1
or PO Box N
City, State, Z

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery <i>Larry Phillips</i> <i>8-25-14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>Larry G. Phillips and Anne C. Phillips P.O. Box 2197 Midland, TX 79702</p>		<p>3. Service Type</p> <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

2. Article Number (Transfer from service label) **7014 0150 0000 5970 8670**

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

UNITED STATES POSTAL SERVICE **ODDSS** TX 79721

First Class Mail
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USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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AUG 29 2014
BY:

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OFFICIAL USE

7014 0150 0000 5970 8687

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total F	

Postmark
 Here
AUG 21 2014

Sent To
 Street, or PO I
 City, St

COG Operating LLC
One Concho Center
600 W. Illinois Avenue
Midland, TX 79701

PS Form 3811, February 2004 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:

COG Operating LLC
One Concho Center
600 W. Illinois Avenue
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

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

D. Is delivery address different from item 1? 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: **7014 0150 0000 5970 8687**
 (Transfer from service label)

UNITED STATES POSTAL SERVICE

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 Postage & Fees Paid
 USPS
 Permit No. G-10

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Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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AUG 29 2014
 BY: _____

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7014 0150 0000 5970 8694

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Postmark
 Here
AUG 21 2014

Sent To **The Leonard Trust**
P.O. Box 400
 Street, or PO E **Roswell, TX 88202**
 City, St

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) J LEONARD</p> <p>C. Date of Delivery AUG 23 2014</p> <p>D. Is delivery address different from item 1, 2, or 3? If YES, enter delivery address below: 400</p>
<p>1. Article Addressed to:</p> <p>The Leonard Trust P.O. Box 400 Roswell, TX 88202</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p> <p>7014 0150 0000 5970 8694</p>	

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

UNITED STATES POSTAL SERVICE

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 Permit No. G-10

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Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
AUG 25 2014

BY: _____

Has
08/21/14
US POSTAGE \$0
FIRST CLASS
Z1
011D



14 0150 0000 5970 8700

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Postmark Here
AUG 21 2014

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total P/c	

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

**Holsum Inc.
723 North Main
Roswell, NM 88201**

MODRALL SPERLING

Modrall Sperling Roehl Harris & Slisk, P.A.
P.O. Box 2168
Albuquerque NM 87103-2168

*FOR SD
INT
8-27-14*

**Holsum Inc.
723 North Main
Roswell, NM 88201**

NIXIE 882012038-1N 08/28/14

**RETURN TO SENDER
UNABLE TO FORWARD
UNABLE TO FORWARD
RETURN TO SENDER**

0070 9270 0000 0570 8700

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:

**Holsum Inc.
723 North Main
Roswell, NM 88201**

2. Article Number

COMPL

A. Sign Addressee

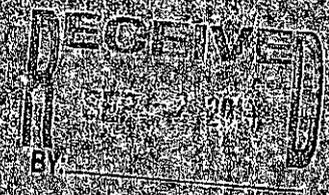
B. Received by (Printed Name) C. Date of Delivery

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

7014 0150 0000 5970 8700



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7014 0150 0000 5970 8717

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

Postmark
Here

AUG 21 2014

Sent To	Tumbleweed Exploration LLC
Street, A or PO Box	5002 Greentree Ave.
City, State	Midland, TX 79707
PS Form	ctions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Jordan Kessler</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Jordan Kessler</i></p> <p>C. Date of Delivery AUG 28 2014</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Tumbleweed Exploration LLC 5002 Greentree Ave. Midland, TX 79707</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p> <p>7014 0150 0000 5970 8717</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

UNITED STATES POSTAL SERVICE

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 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 AUG 28 2014

7014 0150 0000 5970 8724

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Po	

Postmark
Here
AUG 21 2014

Sent To **Critterville LLC**
 Street, Ap or PO Box **P.O. Box 620**
 City, State **Wimberly, TX 78676**

PS Form 3811, August 2004 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:

Critterville LLC
 P.O. Box 620
 Wimberly, TX 78676

2. Article Number
(Transfer from service label)

7014 0150 0000 5970 8724

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Melby M. Hezopoud* Agent Addressee

B. Received by (Printed Name) *Melby M Hezopoud* C. Date of Delivery *8-29-14*

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

AUSTIN
 UNITED STATES POSTAL SERVICE
 29 AUG '14
 PM 2 L

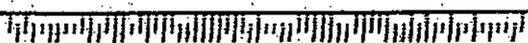


First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 SEP - 3 2014



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7014 0150 0000 5970 8731

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

Postmark
 Here
AUG 21 2014

Sent To: **El Capitan Ventures LLC**
 4322 Fondren
 Street, or PO: **San Antonio, TX 78217**
 City, S

PS Form 3800, August 2006

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:

El Capitan Ventures LLC
 4322 Fondren
 San Antonio, TX 78217

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

B. Received by (Printed Name): *Patrick Leonard* C. Date of Delivery: *8/25/14*

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) **7014 0150 0000 5970 8731**

UNITED STATES POSTAL SERVICE
 SAN ANTONIO TX 782
 25 AUG '14
 PN 41

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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 AUG 28 2014

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

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7014 0150 0000 5970 8748

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total F	

Postmark
Here
AUG 21 2014

Sent To **Shannon C. Leonard, Trustee of the
Shannon C. Leonard Child's Trust**

Street, or PO E **1018 Sunset Canyon N.**

City, St **Dripping Springs, TX 78620**

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:

**Shannon C. Leonard, Trustee of the
Shannon C. Leonard Child's Trust
1018 Sunset Canyon N.
Dripping Springs, TX 78620**

2. Article Number (Transfer from service label):

COMPLETE THIS SECTION ON DELIVERY

A. Signature *S. Parker* Agent Addressee

B. Received by (Printed Name) *S. Parker* C. Date of Delivery *8-25-14*

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

7014 0150 0000 5970 8748

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

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USPS
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P.O. Box 2168
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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	¢

Postmark
Here
AUG 21 2014

Sent To
 Street, Apt. No. or PO Box No.
 City, State, ZIP
**Michael Kyle Leonard, Trustee of the
 Michael Kyle Leonard Child's Trust
 P.O. Box 2625
 Eagle Pass, TX 78853**

PS Form 3800

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Michael Leonard</i> C. Date of Delivery <i>8-21-14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Michael Kyle Leonard, Trustee of the Michael Kyle Leonard Child's Trust P.O. Box 2625 Eagle Pass, TX 78853</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number <i>7014 0150 0000 5970 8755</i> (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

UNITED STATES POSTAL SERVICE
 SAN ANTONIO TX 780
 29 AUG 14

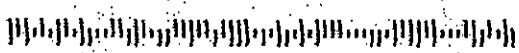
First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

**Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168**

RECEIVED
 SEP -3 2014

BY: *[Signature]*



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OFFICIAL USE

7014 0150 0000 5970 8762

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total *	

Postmark
 Here
AUG 21 2014

Sent To: **JB III Partners, LP**
 Street, or PO: **21 Lord William Penn Dr.**
 City, St: **Morristown, NJ 07960**

PS Form Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Jordan Kessler</i> C. Date of Delivery <i>8/25/14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below.</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px;"> JB III Partners, LP 21-Lord-William Penn Dr. Morristown, NJ 07960 </div>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label)</p> <p>7014 0150 0000 5970 8762</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>



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

UNITED STATES POSTAL SERVICE

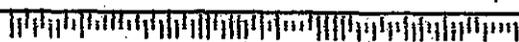
SEP 14

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 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 SEP - 5 2014
 BY: _____



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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total F	¢

Postmark
Here
AUG 21 2014

Sent To **Lucie Investments, LP**

Street, or PO E **159 S.E. Ballantrea Ct.**

City, St **Port St. Lucie, FL 34952**

PS Form 3811, February 2004

SENDER COMPLETE THIS SECTION

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

1. Article Addressed to:

Lucie Investments, LP
159 S.E. Ballantrea Ct.
Port St. Lucie, FL 34952

1590

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) **DAVID**

C. Date of Delivery **8-27-14**

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) **0150 0000 5970 8779**

UNITED STATES POSTAL SERVICE



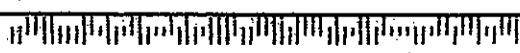
First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
SEP - 2 2014
BY: _____

1100000



U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only. No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

Postmark Here
AUG 21 2014

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

Sent To
CLM Production Co.
3008 Bandolina Avenue
Roswell, NM 88201

Street, Apt. No., or PO Box No.
 City, State, Zip



CERTIFIED MAIL



7014 0150 0000 5970 8786

MODRALL
 Modrall Sperling Roehl Harris & Sisk, P.A.

CLM
 3008 E
 Roswe
 NIXIE

882012038-1N

08/28/14

RETURN TO SENDER
 UNABLE TO FORWARD
 UNABLE TO FORWARD
 RETURN TO SENDER

9828 0265 0000 0570 4702

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:

 CLM Production Co.
 3008 Bandolina Avenue
 Roswell, NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Agent Addressee

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

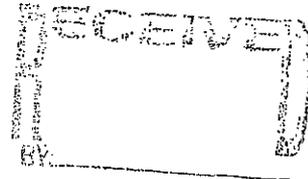
D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

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

7014 0150 0000 5970 8786



⑤ VACANT
 8/23/14

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

OFFICIAL USE

7014 0150 0000 5970 8793

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Postmark
Here
AUG 21 2014

Sent To **Lincoln Oil & Gas, LLC**
 Street, Apt. or PO Box # **701 Three Cross Roswell**
 City, State **Roswell, NM 88201**

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>Kathy Bradshaw</i></p> <p>B. Received by (Printed Name) <i>Kathy Bradshaw</i></p> <p>C. Date of Delivery <i>8/22/14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Lincoln Oil & Gas, LLC 701 Three Cross Roswell Roswell, NM 88201</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

UNITED STATES POSTAL SERVICE

23 AUG 2014 PM 11

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 AUG 25 2014

BY _____

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

OFFICIAL USE

7014 0150 0000 5970 8809

Postage	\$	Postmark Here AUG 21 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To **William V. Palmer, LLC**
 Street, Apt or PO Box **3226 E. Anderson Dr.**
 City, State **Lovington, NM 88260**

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:

William V. Palmer, LLC
3226 E. Anderson Dr.
Lovington, NM 88260

2. Article Number
 (Transfer from service label) **7014 0150 0000 5970 8809**

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee
Shelley Palmer

B. Received by (Printed Name) **Shelley Palmer** C. Date of Delivery **8/23/14**

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

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

UNITED STATES POSTAL SERVICE
 25 AUG 2014 PM 1

First Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Spering Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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AUG 29 2014
 BY:

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

OFFICIAL USE

7014 0150 0000 5970 8816

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

Postmark
 Here
AUG 21 2014

Sent To **Diamond Star Production Co. LLC**
 Street, Apt. No., or PO Box No. **P.O. Box 638**
 City, State, ZIP+4 **Ardmore, OK 73402**

PS Form 3800, Aug

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:

Diamond Star Production Co. LLC
P.O. Box 638
Ardmore, OK 73402

2. Article Number
 (Transfer from service label)

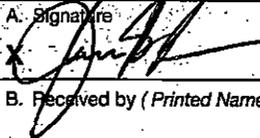
7014 0150 0000 5970 8816

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 8/25/14

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

UNITED STATES POSTAL SERVICE

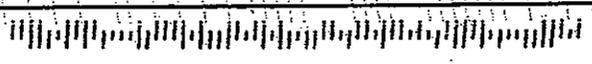


First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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 Albuquerque, NM 87103-2168

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AUG 28 2014
 BY:



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

OFFICIAL USE

7014 0150 0000 5970 8823

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

Postmark
 Here
AUG 21 2014

Sent To: **Betty R. Young**
 Street, or PO Box: **1311 W. 3rd St.**
 City, State: **Roswell, NM 88201**

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Betty R. Young
1311 W. 3rd St.
Roswell, NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

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

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

88201

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): **7014 0150 0000 5970 8823**

UNITED STATES POSTAL SERVICE
 25 AUG 2014 PM 1
 First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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AUG 29 2014
 BY: _____

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CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$	Postmark Here AUG 21 2014
Certified Fee		
Return Receipt Fee <small>(Endorsement Required)</small>		
Restricted Delivery Fee <small>(Endorsement Required)</small>		
Total		

7014 0150 0000 5970 8830

<small>Sent to</small>	Carolyn R. Beall
<small>Street or PO</small>	P.O. Box 3098
<small>City, S</small>	Midland, TX 79702
<small>PS Form</small>	<small>Instructions</small>

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Andrea Alvidiz</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (<i>Printed Name</i>) C. Date of Delivery <i>Andrea Alvidiz</i> <i>8-26-14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Carolyn R. Beall P.O. Box 3098 Midland, TX 79702 </div>	<p>3. Service Type</p> <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number <small>(Transfer from service label)</small></p>	<div style="border: 1px solid black; padding: 5px; font-weight: bold; font-size: 1.2em;"> 7014 0150 0000 5970 8830 </div>

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

UNITED STATES POSTAL SERVICE

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

AUG 28 2014

7014 0150 0000 5970 8847

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

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

OFFICIAL USE

Postage	\$	Postmark Here AUG 21 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To **Stacie L. Sexe**
 Street, Apt. 1 or PO Box # **400 N. Pennsylvania Ave, Ste. 1000**
 City, State, Z **Roswell, NM 88201-4780**

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Stacie L. Sexe
400 N. Pennsylvania Ave, Ste. 1000
Roswell, NM 88201-4780

2. Article Number: (Transfer from service label)

7014 0150 0000 5970 8847

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Hailia Della* Agent Addressee

B. Received by (Printed Name) _____ C. Date of Delivery **8-25-14**

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

UNITED STATES POSTAL SERVICE
 LUBBOCK TX 79401



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

25 AUG 2014 PM 2:11

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
AUG 29 2014
 BY: _____

7014 0150 0000 5970 8854

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

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

OFFICIAL USE

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

Postmark
Here
AUG 21 2014

Sent To **Watson Properties, LLC**
 Street, Apt. or PO Box # **3905 Futura Dr.**
 City, State, ZIP+4® **Roswell, NM 88201**

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Watson Properties, LLC
3905-Futura-Dr.
Roswell, NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) **Barbara J. Watson**

C. Date of Delivery **8/23/14**

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) **7014 0150 0000 5970 8854**

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

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
AUG 25 2014



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CERTIFIED MAIL RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

7014 0150 0000 5970 8878

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

Postmark
Here

AUG 21 2014

Sent To **Yates Petroleum Corporation**
 Street, A or PO Box **105 S. Fourth Street**
 City, State **Artesia, NM 88210**

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Yates Petroleum Corporation
 105 S. Fourth Street
 Artesia, NM 88210

2. Article Number:

7014 0150 0000 5970 8878

(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *8/25/14*

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-1000

UNITED STATES POSTAL SERVICE

LUBBOCK TX 794

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
AUG 29 2014
 BY: _____

658

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

7014 0150 0000 5970 8885

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total F	

Postmark
Here

AUG 21 2014

Sent To **ABO Petroleum Corporation**

Street, or PO Box **105 S. Fourth Street**

City, State, ZIP+4® **Artesia, NM 88210**

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

**ABO Petroleum Corporation
 105 S. Fourth Street
 Artesia, NM 88210**

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *[Signature]* Agent Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *8/25/14*

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) **7014 0150 0000 5970 8885**

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

UNITED STATES POSTAL SERVICE
 LURBOCK TX 754



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

**Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168**

RECEIVED
AUG 29 2014
 BY: _____

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

7014 0150 0000 5970 8892

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

OFFICIAL USE

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

Postmark
Here

AUG 21 2014

Sent to **Myco Industries, Inc.**

Street, or PO **105 S. Fourth Street**

City, S **Artesia, NM 88210**

PS Form Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. <p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>Myco Industries, Inc. 105 S. Fourth Street Artesia, NM 88210</p> </div> <p>2. Article Number: <i>(Transfer from service label)</i> 7014 0150 0000 5970 8892</p>	<p>A. Signature</p> <p>X <i>Angela</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by <i>(Printed Name)</i> Angela <input checked="" type="checkbox"/> Date of Delivery 8/21/14</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? <i>(Extra Fee)</i> <input type="checkbox"/> Yes</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

UNITED STATES POSTAL SERVICE

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
AUG 29 2014
 BY: _____

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

7034 0150 0000 5970 8908

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

OFFICIAL USE

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

Postmark
 Here
AUG 21 2014

Sent To **OXY Y-1 Company**
 Street, Apt or PO Box **P.O. Box 2750**
 City, State, **Houston, TX 77227**

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>ADAM</i></p> <p>C. Date of Delivery SEP 3 2014</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>OXY Y-1 Company P.O. Box 2750 Houston, TX 77227</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p> <p>7034 0150 0000 5970 8908</p>	

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

UNITED STATES POSTAL SERVICE

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
SEP - 8 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 USE

7014 0150 0000 5970 8915

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

Postmark Here
AUG 21 2014

Sent: **OXY USA Inc.**
 Street or PO: **P.O. Box 27570**
 City, State, ZIP+4: **Houston, TX 77227**

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

OXY USA Inc.
 P.O. Box 27570
 Houston, TX 77227

2. Article Number (Transfer from service)

7014 0150 0000 5970 8915

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) *[Signature]* C. Date of Delivery

D. Is delivery address different from item 17 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

UNITED STATES POSTAL SERVICE

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
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 BY: _____

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

OFFICIAL USE

7014 0150 0000 5970 8922

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

Postmark
 Here
AUG 21 2014

Sent To: **Nearburg Exploration, LLC**
 Street, A or PO Box: **P.O. Box 823085**
 City, State: **Dallas, TX 75382**

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, LLC
 P.O. Box 823085
 Dallas, TX 75382

2. Article Number
 (Transfer from service label) **7014 0150 0000 5970 8922**

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name): **GAS ROBERTS** C. Date of Delivery: **8/26/14**

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

UNITED STATES POSTAL SERVICE

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Spering Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

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AUG 29 2014
 BY: _____

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CERTIFIED MAIL RECEIPT
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For delivery information visit our website at www.usps.com

7014 0150 0000 5970 8939

OFFICIAL USE

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

Postmark
Here
AUG 21 2014

Sent To **CL&F Resources, LP**
450 Gears Road
Street, Apt. or PO Box | **Houston, TX 77067**
City, State, |

PS Form 38
10/10/09

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

OFFICIAL USE

7014 0150 0000 5970 8946

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

Postmark
 Here
AUG 21 2014

Sent To: **CL&F Resources, LP**
Attn: Gary Dobbs

Street or PO: **16945 N. Chase Drive**

City, St: **4 Greenspoint Place, Ste 1500**
Houston, TX 77060

PS Form 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:

CL&F Resources, LP
Attn: Gary Dobbs
16945 N. Chase Drive
4 Greenspoint Place, Ste 1500
Houston, TX 77060

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) **mdcymason** C. Date of Delivery **8/28/14**

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) **7014 0150 0000 5970 8946**

HOUSTON
UNITED STATES POSTAL SERVICE
28 AUG 14
PM 5 L

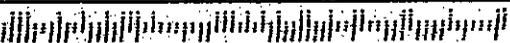


First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
AUG 29 2014
 BY: _____



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

CERTIFIED MAIL



7014 0150 0000 5970 8953

Has
08/21/14
US POSTAGE \$0
Z
011

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

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

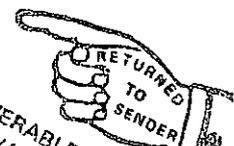
Postmark
AUG 21 2014

Total Pos
Sent To
Fasken Land & Minerals
303 W. Wall Street, Suite 1900
Midland, TX 79701
Street, Apt. or PO Box
City, State,

PS Form 3800, August 2006 See reverse for instructions

MODRALL SPERLING

Modrall Sperling Roehl Harris & Sisk, P.A.
P.O. Box 2168
Albuquerque NM 87103-2168



UNDELIVERABLE AS ADDRESSED - NO FORWARDING ORDER ON FILE

Fasken Land & Minerals
303 W. Wall Street, Suite 1900
Midland, TX 79701

UNDELIVERABLE AS ADDRESSED - NO FORWARDING ORDER ON FILE

RECEIVED
SEP 16 2014
BY

Handwritten signature

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:

Fasken Land & Minerals
303 W. Wall Street, Suite 1900
Midland, TX 79701

2. Article Number

7014 0150 0000 5970 8953

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) Yes

U.S. Postal Service™
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OFFICIAL USE

7014 0150 0000 5970 8960

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

Postmark
Here
AUG 21 2014

Sent To: **Read & Stevens, Inc.**
 Street, Apt. or PO Box: **P.O. Box 1518**
 City, State: **Roswell, NM 88202**

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

**Read & Stevens, Inc.
 P.O. Box 1518
 Roswell, NM 88202**

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) **G. GRIFFITH**

C. Date of Delivery **AUG 25 2014**

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

7014 0150 0000 5970 8960

UNITED STATES POSTAL SERVICE

First Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

**Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168**

RECEIVED
AUG 29 2014
 BY: _____

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OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark Here

AUG 21 2014

Total P
 Sent To
 Bane Bigbie, Inc.
 RR 1 Box 26
 Ringling, OK 73456-9703

PS Form 3800, August 2008

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

CERTIFIED MAIL™



4 0150 0000 5970 8977

Hasler
 08/21/2014
US POSTAGE


MODRALL SPERLING
 Modrall Sperling Roehl Harris & Sisk, P.A.
 P.O. Box 2168
 Albuquerque NM 87103-2168

Handwritten: Bane Bigbie, Inc. RR 1 Box 26

Bane Bigbie, Inc.
 RR 1 Box 26

NIXIE 734563087-1N 08/28/14

**RETURN TO SENDER
 UNABLE TO FORWARD
 UNABLE TO FORWARD
 RETURN TO SENDER**

2269 0265 0000 0570 4702

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:

Bane Bigbie, Inc.
 RR 1 Box 26
 Ringling, OK 73456-9703

COMPL

A. Signature Agent Addressee

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

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

RECEIVED
 SEP 2 2014

2. Article Number

7074 0150 0000 5970 8977

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

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

OFFICIAL USE

7014 0150 0000 5970 8984

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

AUG 21 2014
 Postmark
 Here

Sent To **Bane Bigbie, Inc.**
 Attn: Bane Bigbie, President
 Street, Apt or PO Box **P.O. Box 998**
 City, State **Ardmore, OK 73402**

PS Form 3811

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:

Bane Bigbie, Inc.
Attn: Bane Bigbie, President
P.O. Box 998
Ardmore, OK 73402

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Johnnie Kolan Agent Addressee

B. Received by (Printed Name) **JOHNNIE KOLAN** C. Date of Delivery **8-25-14**

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) **7014 0150 0000 5970 8984**

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

UNITED STATES POSTAL SERVICE

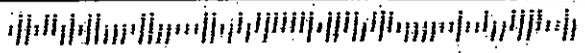


First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
AUG 28 2014
 BY: _____



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

OFFICIAL USE

7014 0150 0000 5970 8991

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

AUG 21 2014

Postmark
Here

Sent To **Centennial, LLC**
P.O. Box 1837
 Street, Apt. or PO Box # **Roswell, NM 88202**
 City, State, & ZIP+4®

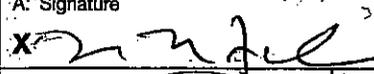
PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

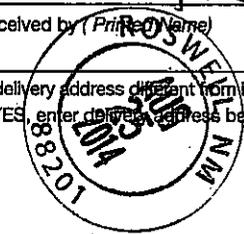
1. Article Addressed to:
Centennial, LLC
P.O. Box 1837
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent Addressee

B. Received by (Print Name) _____ C. Date of Delivery _____

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: **7014 0150 0000 5970 8991**
 (Transfer from service label)

UNITED STATES POSTAL SERVICE
 LUBBOCK TX 794



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box: •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
AUG 29 2014
 BY: _____

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

7014 0150 0000 5970 9004

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Post:	

AUG 21 2014
 Postmark
 Here

Sent To: **Hat Mesa Oil Co.**
 P.O. Box 1216
 Albuquerque, NM 87103-1216

Street, Apt. 1 or PO Box #
 City, State, Z

PS Form 3811

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:

Hat Mesa Oil Co.
 P.O. Box 1216
 Albuquerque, NM 87103-1216

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) *[Signature]* C. Date of Delivery **8/22/14**

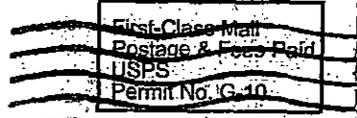
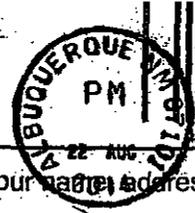
D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) Yes

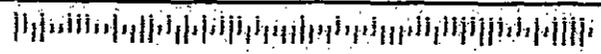
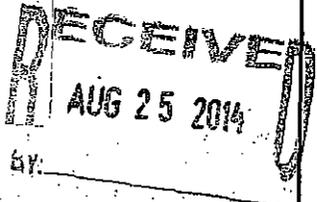
2. Article Number **7014 0150 0000 5970 9004**
 (Transfer from service label)

UNITED STATES POSTAL SERVICE



• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168



7014 0150 0000 5970 9011

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

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

OFFICIAL USE

AUG 21 2014

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

Postmark
Here

Sent To: Mewbourne Oil Company
 Street, Ap or PO Box: P.O. Box 7698
 City, State: Tyler, TX 75711

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mewbourne Oil Company
 P.O. Box 7698
 Tyler, TX 75711

2. Article Number (Transfer from service label): 7014 0150 0000 5970 9011

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Henry Granville* Agent Addressee

B. Received by (Printed Name): HENRY GRANVILLE C. Date of Delivery: 8-28-14

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 102595-02M-1540

UNITED STATES POSTAL SERVICE
TEXAS
DALLAS 750
28 AUG '14
PM 8 L

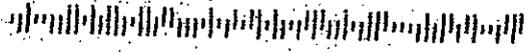


First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 SEP -3 2014
 BY: _____



7014 0150 0000 5970 9028

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

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Po	

AUG 21 2014
Postmark
Here

Sent To **Panhandle Oil and Gas, Inc.**
 Street, Ap or PO Box **5400 N. Grand Blvd., Suite 300**
 City, State **Oklahoma City, OK 73112**

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:

Panhandle Oil and Gas, Inc.
 5400 N. Grand Blvd., Suite 300
 Oklahoma City, OK 73112

2. Article Number
(Transfer from service label)

7014 0150 0000 5970 9028

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Jordan Kessler* Agent
 Addressee

B. Received by (Printed Name) **Jordan Kessler** C. Date of Delivery **8-25-14**

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

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

UNITED STATES POSTAL SERVICE CITY
 OK 730
 25 AUG '14

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

PM 5 L

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 AUG 28 2014
 BY: _____

3216868

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

OFFICIAL USE

7014 0150 0000 5970 9035

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

AUG 21 2014

Postmark
Here

Sent To **Worrall Investment Corporation**
 Attn: John Worrall
 Street, Apt. No. or PO Box No. **P.O. Box 1834**
 City, State, ZIP **Roswell, NM 88202**

PS Form 3800

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:

Worrall Investment Corporation
 Attn: John Worrall
 P.O. Box 1834
 Roswell, NM 88202

2. Article Number
 (Transfer from service label)

7014 0150 0000 5970 9035

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Sharon Sloat Agent Addressee

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

D. Is delivery address different from front? 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

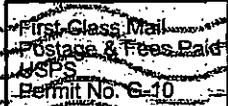
Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

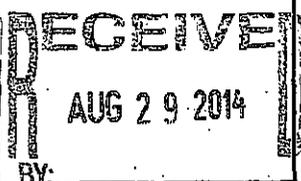
LUBBOCK TX 794

25 AUG 2014 PM 2



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Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168



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Sent To: **JTD Resources, LLC**
 Attn: Dan Leonard
 P.O. Box 3422
 Midland, TX 79702

Street, Apt. No. or PO Box No.
 City, State, Zi

PS Form 3800

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>JTD Resources, LLC Attn: Dan Leonard P.O. Box 3422 Midland, TX 79702</p> </div>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number: <i>7014 0150 0000 5970 9042</i> (Transfer from service)</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

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