





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

August 29, 2014

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

**TO: OFFSETTING LESSEES AND OPERATORS**

**RE: APPLICATION OF CHEVRON U.S.A. INC. FOR A NON-STANDARD  
SPACING AND PRORATION UNIT, AND COMPULSORY POOLING,  
LEA COUNTY, NEW MEXICO.  
(Gamma Ridge 14-24-34-5H Well)**

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

This application has been set for hearing before a Division Examiner at 8:15 AM on September 14, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-Hearing Statement with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

Questions concerning this application should be directed to Cody Cole at (713) 372-1103 or ccole@chevron.com.

Sincerely,

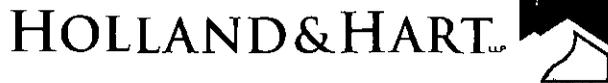
Michael H. Feldewert

**Holland & Hart LLP**

Phone [505] 988-4421 Fax [505] 983-6043 [www.hollandhart.com](http://www.hollandhart.com)

110 North Guadalupe Suite 1 Santa Fe, NM 87501 **Mailing Address** P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Billings Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C. ♻️



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

August 29, 2014

**VIA CERTIFIED MAIL**  
**CERTIFIED RECEIPT REQUESTED**

**TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS**

**Re: APPLICATION OF CHEVRON U.S.A. INC. FOR A NON-STANDARD  
SPACING AND PRORATION UNIT, AND COMPULSORY POOLING,  
LEA COUNTY, NEW MEXICO.  
(Grama Ridge 14-24-34-5H Well)**

Ladies & Gentlemen:

This letter is to advise you that Chevron U.S.A. Inc., has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be 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 Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Cody Cole, at (713) 372-1103 or ccole@chevron.com.

Sincerely,

Michael H. Feldewert

**Holland & Hart LLP**

Phone [505] 988-4421 Fax [505] 983-6043 [www.hollandhart.com](http://www.hollandhart.com)

110 North Guadalupe Suite 1 Santa Fe, NM 87501 **Mailing Address** P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Billings Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C.

**CHEVRON U.S.A. INC.  
GRAMMA RIDGE 14-24-34-5H WELL**

**OFFSETS**

Energex, LLC  
Attn.: Tim Lilley  
4425 98th Street, Suite 200  
Lubbock Texas 79424

Crump Energy Partners, LLC  
Attn.: Brian Hall  
P.O. Box 50820  
Midland, Texas 79710

Partners IV, LP  
Attn.: Brian Hall  
P.O. Box 50820  
Midland, TX 79710

COG Operating LLC  
One Concho Center  
Midland, TX 79701

**POOLED PARTIES**

Artesia Oil and Gas LLC  
P.O. Box 1768  
Artesia, NM 88211

Frank M. Johnson, Jr. and  
wife, Harriet Johnson  
315 E. Orchard Park  
Dexter, NM 88230

Clora Meadows  
700 South Ohio  
Roswell, NM 88201

Roy Barton, Jr.  
P.O. Box 978  
Hobbs, NM 88241

Norma J. Barton  
P.O. Box 728  
Hobbs, NM 88241

Burlington Resources  
Attn: Ashley Manning-Dyke  
600 N. Dairy Ashford Road  
P10-5 Office 5026  
Houston, TX 77079

Roy G. Barton, Jr.  
P.O. Box 978  
Hobbs, NM 88241

Crown Oil Partners IV, LP  
Attn: Brian Hall  
P.O. Box 50820  
Midland, TX 79710

7006 2760 0001 6377 1771

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**OFFICIAL CHECK** 5H

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

Postmark: AUG 29 2014

Energex, LLC  
 ATTN: Tim Lilley  
 4425 98th St., Ste 200  
 Lubbock, TX 79424

PS Form 3811, August 2004 See Reverse for Instructions

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL CHECK** 5H

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

Postmark: AUG 29 2014

Energex, LLC  
 ATTN: Tim Lilley  
 4425 98th St., Ste 200  
 Lubbock, TX 79424

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

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Energex, LLC  
 ATTN: Tim Lilley  
 4425 98th St., Ste 200  
 Lubbock, TX 79424

2. Article Number (Transfer from service label): 7006 2760 0001 6377 1771

**SECTION ON DELIVERY**

A. Signature: [Signature]  Agent  Addressee

B. Received by (Printed Name): [Signature] C. Date of Delivery: 9/2

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

7006 2760 0001 6377 1788

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL CHECK** 5H

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

Postmark: AUG 29 2014

Crump Energy Partners, LLC  
 ATTN: Brian Hall  
 P.O. Box 50820  
 Midland, Texas 79710

PS Form 3811, August 2004 See Reverse for Instructions

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL CHECK** 5H

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

Postmark: AUG 29 2014

Crump Energy Partners, LLC  
 ATTN: Brian Hall  
 P.O. Box 50820  
 Midland, Texas 79710

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

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Crump Energy Partners, LLC  
 ATTN: Brian Hall  
 P.O. Box 50820  
 Midland, Texas 79710

2. Article Number (Transfer from service label): 7006 2760 0001 6377 1788

**SECTION ON DELIVERY**

A. Signature: [Signature]  Agent  Addressee

B. Received by (Printed Name): [Signature] C. Date of Delivery: 9/2/14

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.

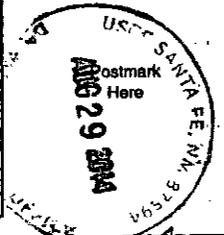
4. Restricted Delivery? (Extra Fee)  Yes

9871 2637 0000 0922 9006

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)  
**OFFICIAL** *CHOWBET*

Postage	\$	
Certified Fee		300
Return Receipt Fee (Endorsement Required)		270
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	



Partners IV, LP  
 ATTN: Brian Hall  
 P.O. Box 50820  
 Midland, Texas 79710

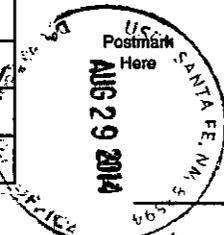
PS Form 3800, August 2006 See Reverse for Instructions

0297 2639 0000 0922 9006

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**OFFICIAL** *WVROVISTEF*

Postage	\$	
Certified Fee		300
Return Receipt Fee (Endorsement Required)		270
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	



COG Operating LLC  
 One Concho Center  
 Midland, TX 79701

PS Form 3800, August 2006 See Reverse for Instructions

**CERTIFIED MAIL™**

**SENDER:** \_\_\_\_\_

**ATTENTION ON DELIVERY**

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

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

**A. Signature**  
 Agent  
 Addressee

**B. Received by (Printed Name)** \_\_\_\_\_ **C. Date of Delivery** 9-3-14

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

**1. Article Addressed to:**  
 Partners, IV, LP  
 ATTN: Brian Hall  
 P.O. Box 50820  
 Midland, Texas 79710

**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:** 11 114 77006 2760 0001 6377 1863

(Transfer from service label)

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

7006 2760 0001 6377 1887

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL** *Kennon St.*

Postage	\$
Certified Fee	3.00
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here  
 AUG 29 2014  
 SANTA FE, NM 87516

Artesia Oil and Gas LLC  
 PO Box 1768  
 Artesia, NM 88211

See Reverse for Instructions

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

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

NOTES: 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:

Artesia Oil and Gas LLC  
 PO Box 1768  
 Artesia, NM 88211

2. Article Number (Transfer from service label) 7006 2760 0001 6377 1887

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

4. Restricted Delivery? (Extra Fee)  Yes

A. Signature *Janie White*  Agent  Addressee  
 B. Received by (Printed Name) *Janie White* C. Date of Delivery

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

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

7006 2760 0001 6377 1894

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL** *Kennon St.*

Postage	\$
Certified Fee	3.00
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here  
 AUG 29 2014  
 SANTA FE, NM 87516

Frank M. Johnson, Jr. and wife, Harriet Johnson  
 315 E. Orchard Park  
 Dexter, NM 88230

See Reverse for Instructions

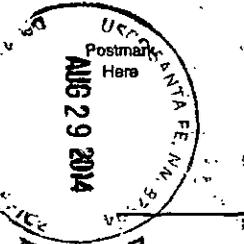
7006 2760 0001 6377 1900

U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL RETURN RECEIPT**

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



Clora Meadows  
700 South Ohio  
Roswell, NM 88201

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6377 1917

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL RETURN RECEIPT**

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



Roy Barton, Jr.  
PO Box 978  
Hobbs, NM 88241

PS Form 3800, August 2006 See Reverse for Instructions

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

**SENDER: CC** SECTION ON DELIVERY

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

A. Signature: *[Signature]*  Agent  Addressee

B. Received by (Printed Name): *Clora Meadows* C. Date of Delivery: *8-2-14*

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

1. Article Addressed to:  
Clora Meadows  
700 South Ohio  
Roswell, NM 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: *7006 2760 0001 6377 1900*  
(Transfer from service label)

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

*Returned*

7006 2760 0000 6377 1764

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL** *Chlorine 5H*

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

Postmark Here  
 AUG 29 2014  
 SANTA FE, NM

Norma J. Barton  
 PO Box 728  
 Hobbs, NM 88241

PS Form 3800, August 2006 See Reverse for Instructions

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

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:  
 Norma J. Barton  
 PO Box 728  
 Hobbs, NM 88241

2. Article Number (Transfer from service label)  
 7006 2760 0000 6377 1764

**SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*Norma J. Barton*

B. Received by (Printed Name)  Agent  Addressee  
 Norma J. Barton

C. Date of Delivery  
 9-4-14

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

7006 2760 0000 6377 1931

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**CERTIFIED MAIL™ RECEIPT**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL** *Chlorine 5H*

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

Postmark Here  
 AUG 29 2014  
 SANTA FE, NM

Burlington Resources  
 Attn: Ashley Manning- Dyke  
 600 N. Dairy Ashford Rd  
 P10-5 Office 5026  
 Houston, TX, 77079

PS Form 3800, August 2006 See Reverse for Instructions

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

**SENDER**

- 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:  
 Burlington Resources  
 Attn: Ashley Manning- Dyke  
 600 N. Dairy Ashford Rd  
 P10-5 Office 5026  
 Houston, TX, 77079

2. Article Number (Transfer from service label)  
 7006 2760 0000 6377 1931

**SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*Ashley Manning-Dyke*

B. Received by (Printed Name)  Agent  Addressee  
 Ashley Manning-Dyke

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

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

7006 2760 0001 6377 1757

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**OFFICIAL MAIL**

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

Postmark Here  
 AUG 29 2014  
 SANTA FE, NM 87501

Roy G. Barton, Jr  
 PO Box 978  
 Hobbs, NM 88241

PS Form 3800, August 2005 See Reverse for Instructions

# Returned

7006 2760 0001 6377 1795

**U.S. Postal Service™**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL MAIL**

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

Postmark Here  
 AUG 29 2014  
 SANTA FE, NM 87501

Crown Oil Partners IV, LP  
 ATTN: Brian Hall  
 P.O. Box 50820  
 Midland, Texas 79710

PS Form 3800, August 2005 See Reverse for Instructions

**CERTIFIED MAIL**

**SENDER'S USE ONLY** (PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE)

**SECTION ON DELIVERY**

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

A. Signature  Agent  Addressee  
 X *[Signature]*

B. Received by (Printed Name) *[Signature]* C. Date of Delivery 9/3/14

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

1. Article Addressed to:  
 Crown Oil Partners IV, LP  
 ATTN: Brian Hall  
 P.O. Box 50820  
 Midland, Texas 79710

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 7006 2760 0001 6377 1795  
 (Transfer from service label)

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

7006 2620 0001 6377 1849

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL** *Chen*

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

Postmark Here  
 AUG 29 2014  
 U.S. POSTAL SERVICE  
 SANTA FE, NM 97594

Energex, LLC  
 ATTN: Tim Lilley  
 4425 98th St., Ste 200  
 Lubbock, TX 79424

PS Form 3800, August 2006 See Reverse for Instructions

7006 2620 0001 6376 7262

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL** *Chen*

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

Postmark Here  
 AUG 29 2014  
 U.S. POSTAL SERVICE  
 SANTA FE, NM 97594

Clora Meadows  
 700 South Ohio  
 Roswell, NM 8820

PS Form 3800, August 2006 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION** PLACE STICKER AT TOP OF ENVELOPE, FOLD AT DOTTED LINE

**SECTION ON DELIVERY**

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

1. Article Addressed to:  
 Energex, LLC  
 ATTN: Tim Lilley  
 4425 98th St., Ste 200  
 Lubbock, TX 79424

2. Article Number (Transfer from service label) 7006 2760 0001 6377 1849

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

4. Restricted Delivery? (Extra Fee)  Yes

A. Signature *[Signature]*  Agent  Addressee  
 B. Received by (Printed Name) C. Date of Delivery 9/2

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

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

**SENDER: COMPLETE THIS SECTION** PLACE STICKER AT TOP OF ENVELOPE, FOLD AT DOTTED LINE

**SECTION ON DELIVERY**

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

1. Article Addressed to:  
 Clora Meadows  
 700 South Ohio  
 Roswell, NM 8820

2. Article Number (Transfer from service label) 7006 2760 0001 6376 7262

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

4. Restricted Delivery? (Extra Fee)  Yes

A. Signature *[Signature]*  Agent  Addressee  
 B. Received by (Printed Name) C. Date of Delivery 9-3-14  
*Clora Meadows*

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

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

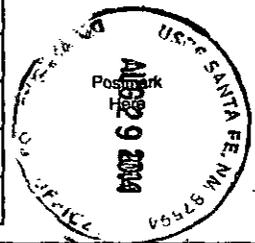
426T 22E9 T000 6377 1924  
7006 2760 0001 6377 1924

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

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**OFFICIAL** *Chenon 5H*

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



Norma J. Barton  
 PO Box 728  
 Hobbs, NM 88241

PS Form 3800, August 2005

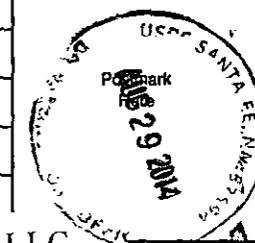
959T 22E9 T000 0922 9007  
7006 2760 0001 6377 1856

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**OFFICIAL** *Chenon 5H*

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



Crump Energy Partners, LLC  
 ATTN: Brian Hall  
 P.O. Box 50820  
 Midland, Texas 79710

PS Form 3800, August 2005

**CERTIFIED MAIL**

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:  
 Norma J. Barton  
 PO Box 728  
 Hobbs, NM 88241

2. Article Number (Transfer from service label): 7006 2760 0001 6377 1924

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

CTION ON DELIVERY

A. Signature: *Norma J. Barton*  Agent  Addressee

B. Received by (Printed Name): *Norma J. Barton* C. Date of Delivery: *9-4-14*

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

**CERTIFIED MAIL**

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:  
 Crump Energy Partners, LLC  
 ATTN: Brian Hall  
 P.O. Box 50820  
 Midland, Texas 79710

2. Article Number (Transfer from service label): 7006 2760 0001 6377 1856

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

CTION ON DELIVERY

A. Signature: *Brian Hall*  Agent  Addressee

B. Received by (Printed Name): *Brian Hall* C. Date of Delivery: *9-3-14*

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

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

4. Restricted Delivery? (Extra Fee)  Yes