



MODRALL SPERLING  
LAWYERS

September 22, 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 Application of Cimarex Energy Company of Colorado for Non-Standard Oil Spacing and Proration Unit and Compulsory Pooling 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 application with the New Mexico Oil Conservation Division seeking a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on October 16, 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, October 9, 2014, with a copy delivered to the undersigned.

Sincerely,

Jordan L. Kessler  
Attorney for Cimarex Energy  
Company of Colorado

Y:\dox\client\82762\0127\CORRESP\2277773.DOCX

Modrall Sperling  
Rochl 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

**Cimarex Exhibit 6**



MODRALL SPERLING

L A W Y E R S

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**TO: OFFSET PARTIES LISTED ON EXHIBIT A:**

This letter is to advise you that Cimarex Energy Company of Colorado has filed the enclosed application with the New Mexico Oil Conservation Division seeking a non-standard spacing and proration unit 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 E/2 of Section 36, Township 24 South, Range 26 East, NMPM, Eddy County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on October 16, 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.

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Attorney for Cimarex Energy  
Company of Colorado

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Reehl Harris & Sisk P.A.

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

RECEIVED OGD  
2014 SEP 17 P 3 43

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

CASE NO. 15215

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) creating a non-standard 160-acre, more or less, oil spacing and proration unit in the Bone Spring formation, comprised of the W/2 E/2 of Section 36, Township 24 South, Range 26 East, NMPM, Eddy County, New Mexico; and (2) pooling all mineral interests in the Bone Spring 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 E/2 of Section 36 to the proposed well to form a non-standard 160-acre, more or less, oil spacing and proration unit (the "project area").
3. Cimarex proposes to drill the Jake 36 State 7H well to a depth sufficient to test the Bone Spring formation. This well is a horizontal well with a surface location 330 feet from the South line, 1725 feet from the East line, and a terminus 330 feet from the North line, 1725 feet from the East line (Section 36).

4. This project area is within the Cottowood Draw Bone Spring pool (pool code 97494). There are no special pool rules, and the producing interval that Cimarex seeks will comply with the statewide 300-foot setback requirements.

5. Cimarex has sought but been unable to obtain a voluntary agreement from all interest owners in the Bone Spring 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 interests in the Bone Spring 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 October 16, 2014, and after notice and hearing as required by law, the Division enter its order:

A. Creating a non-standard oil spacing and proration unit ("project area") in the Bone Spring formation comprised of W/2 E/2 of Section 36, Township 24 South, Range 26 East, NMPM, Eddy County, New Mexico;

B. Pooling all mineral interests in the Bone Spring formation underlying this non-standard spacing and proration unit/project area;

C. Designating Cimarex as operator of this unit and the well to be drilled thereon;

D. Authorizing Cimarex to recover its costs of drilling, equipping and completing this well;

E. Approving actual operating charges and costs charged for supervision, together with a provision adjusting the rates pursuant to the COPAS accounting procedure; and

F. 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*

C:\Users\christine\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\LHTIQP4P\Draft  
compulsory pooling application for Jake 36 State 7H (W2268017).DOCX

**EXHIBIT A**  
**CIMAREX ENERGY COMPANY OF COLORADO NOTICE LIST**

**Parties to be pooled:**

Isramco Resources, LLC  
3452 Lyrac St.  
Oakton, VA 22124

Mary Shoener  
26 Thunderhill Lane  
Ridgefield, CT 06877

Chester J. Stuebben  
1275 Rock Ave.  
Apt # HH5  
North Plainfield, NJ 07060

Alan D. Tuck, JR. and Evelyn Tuck  
2829 Wilfred Reid Cir.  
Sarasota, FL 34240

Larry Turner  
2902 County Road N-O  
Lamesa, TX 79331

Sande Wische  
3 Morton Ln.  
Warren, NJ 07059

**Offsets**

Chevron USA Inc.  
1400 Smith Street  
Houston, TX 77022

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

HOG Partnership, LP  
5950 Cedar Springs Rd.  
Dallas, TX 75235-6803

Isramco Resources, LLC  
3452 Lyrac St.  
Oakton, VA 22124

Nortex Corporation  
Attn: Robert Kent  
1415 Louisiana Street  
Houston, Texas 77002

MBOB, Inc.  
915 One Energy Square  
Dallas, TX 75026

Chester J. Stuebben  
1275 Rock Ave.  
Apt # HH5  
North Plainfield, NJ 07060

Alan D. Tuck, JR. and Evelyn Tuck  
2829 Wilfred Reid Cir.  
Sarasota, FL 34240

Larry Turner  
2902 County Road N O  
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Irene McIsaac  
3452 Lyrac St.  
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Patricia McIsaac  
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Nancy Redford  
141 S. Norton St.  
Los Angeles, CA 90004

Mary Shoener  
26 Thunderhill Lane  
Ridgefield, CT 06877



Daniel MacIsaac  
902 Schultz Pl.  
Monona, WI 53716

Rubicon Oil & Gas, LLC  
508 W. Wall Street  
Midland, Texas 79701



MODRALL SPERLING

L A W Y E R S

October 1, 2014

VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

**Re: In The Matter of the Application of Cimarex Energy Company of Colorado for Non-Standard Oil Spacing and Proration Unit and Compulsory Pooling in Eddy County, New Mexico.**

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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, October 23, 2014, with a copy delivered to the undersigned.

Sincerely,

Jordan L. Kessler  
Attorney for Cimarex Energy  
Company of Colorado

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

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

RECEIVED OGD  
2014 SEP 17 P 3:43

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

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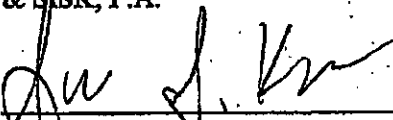
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Earl E. DeBrine, Jr.  
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Telephone: 505.848.1800  
*Attorneys for Applicant*

C:\Users\christine\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\LHTIQP4P\Draft  
compulsory pooling application for Jake 36 State 7H (W2268017).DOCX

**AMENDED EXHIBIT A**  
**CIMAREX ENERGY COMPANY OF COLORADO NOTICE LIST**

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Isramco Resources, LLC  
Attn: Anthony James  
2425 W. Loop S., Ste. 810  
Houston, Texas 77027

Mary Shoener  
26 Thunderhill Lane  
Ridgefield, CT 06877

Chester J. Stuebben  
1275 Rock Ave.  
Apt # HH5  
North Plainfield, NJ 07060

Alan D. Tuck, JR. and Evelyn Tuck  
2829 Wilfred Reid Cir.  
Sarasota, FL 34240

Larry Turner  
2902 County Road N O  
Lamesa, TX 79331

Sande Wische  
3 Morton Ln.  
Warren, NJ 07059

Offsets

Chevron USA Inc.  
1400 Smith Street  
Houston, TX 77022

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

HOG Partnership, LP  
5950 Cedar Springs Rd.  
Dallas, TX 75235-6803

Isramco Resources, LLC

Attn: Anthony James  
2425 W. Loop S., Ste. 810  
Houston, Texas 77027

Nortex Corporation  
Attn: Robert Kent  
1415 Louisiana Street  
Houston, Texas 77002

MBOE, Inc.  
915 One Energy Square  
Dallas, TX 75026

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Daniel MacIsaac  
902 Schultz Pl.  
Monona, WI 53716

Rubicon Oil & Gas, LLC  
508 W. Wall Street  
Midland, Texas 79701

**CERTIFIED MAILING/NOTICE LIST – Cimarex Energy/Jake**  
**Case No. 15215 – Application [Mailed 9/22/14]**

	<b>Pooled Party</b>	<b>USPS Article No.</b>	<b>Date Returned</b>
1.	Isramco Resources, LLC 3452 Lyrac St. Oakton, VA 22124	7008 1300 0001 2834 6948	9/29/14
2.	Mary Shoener 26 Thunderhill Lane Ridgefield, CT 06877	7008 1300 0001 2834 6955	9/29/14
3.	Chester J. Stuebben 1275 Rock Ave., Apt # HH5 North Plainfield, NJ 07060	7008 1300 0001 2834 6962	9/29/14
4.	Alan D. Tuck, Jr. and Evelyn Tuck 2829 Wilfred Reid Cir. Sarasota, FL 34240	7008 1300 0001 2834 6979	9/29/14
5.	Larry Turner 2902 County Road N O Lamesa, TX 79331	7008 1300 0001 2834 6986	9/29/14
6.	Sande Wische 3 Morton Lane Warren, NJ 07059	7008 1300 0001 2834 6993	10/13/14
	<b>Offset Party</b>	<b>USPS Article No.</b>	<b>Date Returned</b>
1.	Chevron USA Inc. 1400 Smith Street Houston, TX 77022	7008 1300 0001 2834 6832	10/3/14
2.	Chevron USA, Inc. P.O. Box 1150 Midland, TX 79702	7010 2780 0002 5895 8817	Returned 10/8/14 – Undeliverable as addressed; no forwarding order on file
3.	HOG Partnership, LP 5950 Cedar Springs Rd. Dallas, TX 75235-6803	7010 2780 0002 5895 8824	10/1/14
4.	Isramco Resources, LLC 3452 Lyrac St. Oakton, VA 22124	7010 2780 0002 5895 8831	9/29/14
5.	Nortex Corporation Attn: Robert Kent 1415 Louisiana Street Houston, Texas 77002	7010 2780 0002 5895 8848	9/30/14
6.	MBOE, Inc. 915 One Energy Square Dallas, TX 75026	7010 2780 0002 5895 8855	Returned 10/8/14 – Unable to Forward
7.	Chester J. Stuebben 1275 Rock Ave. Apt # HH5 North Plainfield, NJ 07060	7010 2780 0002 5895 8862	9/29/14

**CERTIFIED MAILING/NOTICE LIST – Cimarex Energy/Jake**  
**Case No. 15215 – Application [Mailed 9/22/14]**

8.	Alan D. Tuck, Jr. and Evelyn Tuck 2829 Wilfred Reid Cir. Sarasota, FL 34240	7010 2780 0002 5895 8879	9/29/14
9.	Larry Turner 2902 County Road N O Lamesa, TX 79331	7010 2780 0002 5895 8886	9/29/14
10.	Sande Wische 3 Morton Lane Warren, NJ 07059	7010 2780 0002 5895 8893	9/29/14
11.	Irene McIsaac 3452 Lyrac St. Oakton, VA 22124	7010 2780 0002 5895 8909	9/29/14
12.	Patricia McIsaac 3452 Lyrac St. Oakton, VA 22124	7010 2780 0002 5895 8916	9/29/14
13.	Nancy Redford 141 S. Norton St. Los Angeles, CA 90004	7010 2780 0002 5895 8923	10/2/14
14.	Mary Shoener 26 Thunderhill Lane Ridgefield, CT 06877	7010 2780 0002 5895 8930	9/29/14
15.	Daniel MacIsaac 902 Schultz Pl. Monona, WI 53716	7010 2780 0002 5895 8947	10/3/14
16.	Rubicon Oil & Gas, LLC 508 W. Wall Street Midland, Texas 79701	7010 2780 0002 5895 8954	10/1/14
<b>Notice mailed to Isramco – 10/1/14</b>			
	<i>Pooled:</i> Isramco Resources, LLC Attn: Anthony James 2425 W. Loop S., Ste 810 Houston, TX 77027	7010 2780 0002 5895 8978	10/9/14
	<i>Offset:</i> Isramco Resources, LLC Attn: Anthony James 2425 W. Loop S., Ste 810 Houston, TX 77027	7010 2780 0002 5895 8961	10/9/14

Y:\dox\client\82762\0127\GENERAL\W2275882.DOCX

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

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

**OFFICIAL USE**

9469 4E92 1000 00ET 9002

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

Postmark  
Here

SEP 22 2014

Sent To **Isramco Resources, LLC**  
 3452 Lyrac St.  
 Oakton, VA 22124

Street, Apt.  
or PO Box  
City, State

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:

Isramco Resources, LLC  
 3452 Lyrac St.  
 Oakton, VA 22124

**COMPLETE THIS SECTION ON DELIVERY**

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

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

MON 22 SEP 2014 PM

3. Service type  
☒ Certified Mail ☐ Registered Mail ☐ Insured Mail ☐ Registered Mail for Merchandise

4. Restricted Delivery (Extra Fee) ☐ Yes

2. Article Number  
 (Transfer from service label)

7008 1300 0001 2834 6948

PS Form 3811, February 2004

Domestic Return Receipt

102305-02-M-1540

UNITED STATES POSTAL SERVICE

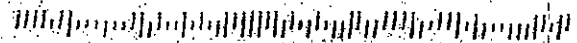


First-Class Mail  
 Postage & Fees Paid  
 USPS  
 Permit No. G-10

• 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 29 2014



7008 1300 0001 2834 6955

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>TM</sup> RECEIPT**  
*(Domestic Mail Only; No Insurance Coverage Provided)*  
 For delivery information visit our website at [www.usps.com](http://www.usps.com)  
**OFFICIAL USE**

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

Postmark  
Here

SEP 22 2014

Sent To **Mary Shoener**  
**26 Thunderhill Lane**  
**Ridgefield, CT 06877**

Street, Apt.  
or PO Box  
City, State

PS Form 3811, February 2004

**SENDER: COMPLETE THIS SECTION**

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

**1. Article Addressed to:**

**Mary Shoener**  
**26 Thunderhill Lane**  
**Ridgefield, CT 06877**

**2. Article Number**  
*(Transfer from service label)*

7008 1300 0001 2834 6955

PS Form 3811, February 2004

Domestic Return Receipt

**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)**

☐

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 29 2014**  
 BY: \_\_\_\_\_



2969 4892 1000 00ET 9002

<b>U.S. Postal Service<sup>TM</sup></b>	
<b>CERTIFIED MAIL<sup>TM</sup> RECEIPT</b>	
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For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
<b>OFFICIAL USE</b>	
Postage \$	Postmark Here  <b>SEP 22 2014</b>
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	
Sent To <b>Chester J. Stuebben</b>	
<b>1275 Rock Ave., Apt # HH5</b>	
<b>North Plainfield, NJ 07060</b>	
PS Form 3811, February 2004	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"><li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>Print your name and address on the reverse so that we can return the card to you.</li><li>Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>	A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:  <b>Chester J. Stuebben</b> <b>1275 Rock Ave., Apt # HH5</b> <b>North Plainfield, NJ 07060</b>	B. Received By (Printed Name) <b>C. Stuebben</b> C. Date of Delivery <b>9-25-14</b>
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below <input type="checkbox"/> No
2. Article Number (Transfer from service label)  <b>7008 1300 0001 2834 6962</b>	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.
PS Form 3811, February 2004	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

UNITED STATES POSTAL SERVICE NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES	First-Class Mail Postage & Fees Paid USPS Permit No. G-10
• Sender: Please print your name, address, and ZIP+4 in this box •	
<b>Jordan Kessler</b> <b>Modrall Sperling Law Firm</b> <b>P.O. Box 2168</b> <b>Albuquerque, NM 87103-2168</b>	
<b>RECEIVED</b> <b>SEP 29 2014</b> By _____	

7008 1300 0001 2834 6979

U.S. Postal Service  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)  
For delivery information visit our website at [www.usps.com](http://www.usps.com)  
**OFFICIAL USE**

Postage	\$	<b>SEP 22 2014</b> Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage	\$	

Sent To: Alan D. Tuck, Jr. and Evelyn Tuck  
Street, Apt. or PO Box #: 2829 Wilfred Reid Cir.  
City, State, ZIP: Sarasota, FL 34240  
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:

Alan D. Tuck, Jr. and Evelyn Tuck  
2829 Wilfred Reid Cir.  
Sarasota, FL 34240

2. Article Number  
(Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent  
*Alan D. Tuck* ☐ 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 ☐ COD  
4. Restricted Delivery (Extra Fee) ☐ Yes

7008 1300 0001 2834 6979

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

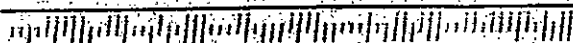


First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• 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 29 2014**  
BY: *[Signature]*



9869 4892 1000 0001 8002

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)  
For delivery information visit our website at [www.usps.com](http://www.usps.com).  
**OFFICIAL USE**

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

**SEP 22 2014**

Postmark  
Here

Sent To  
**Larry Turner**  
Street, Apt.  
or PO Box  
City, State  
**2902 County Road N O**  
**Lamesa, TX 79331**

PS Form

**SENDER: COMPLETE THIS SECTION**

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

**1. Article Addressed to:**

Larry Turner  
2902 County Road N O  
Lamesa, TX 79331

**2. Article Number**  
(Transfer from service label)

7008 1300 0001 2834 6986

PS Form 3811, February 2004

Domestic Return Receipt

102591

**COMPLETE THIS SECTION ON DELIVERY**

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

B. Received by (Printed Name) **Larry Turner** C. Date of Delivery **9-22-14**

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

UNITED STATES POSTAL SERVICE

LUBBOCK TX 794

27 SEP 2014 PM 2:1

First-Class Mail<sup>®</sup>  
Postage & Fees Paid  
USPS  
Permit No. 6410

• 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 29 2014**  
by



EB69 4E92 T000 00CT 8002

U.S. Postal Service <sup>(E)</sup>  
**CERTIFIED MAIL <sup>(M)</sup> RECEIPT**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)  
**OFFICIAL USE**

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

SEP 22 2014  
Postmark Here

Sent To: Sande Wische  
Street, Apt. or PO Box: 3 Morton Lane  
City, State: Warren, NJ 07059

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"><li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>Print your name and address on the reverse so that we can return the card to you.</li><li>Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>	A. Signature <i>X Carol Wische</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:  Sande Wische 3 Morton Lane Warren, NJ 07059	B. Received by (Printed Name) <i>Carol Wische</i> C. Date of Delivery <i>SEP 22 2014</i>
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
	E. 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

7008 1300 0001 2834 6993

PS Form 3811, February 2004

Domestic Return Receipt

UNITED STATES POSTAL SERVICE

102505-02-M-1540

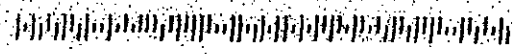
First-Class Mail  
Postage & Fees Paid  
USPS

• 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  
OCT -3 2014  
BY:

03216668



7008 1300 0001 2834 6832

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**OFFICIAL USE**

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

**SEP 22 2014**

Postmark  
Here

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

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:

Chevron USA Inc.  
 1400 Smith Street  
 Houston, TX 77022

2. Article Number  
 (Transfer from service label)

7008 1300 0001 2834 6832

PS Form 3811, February 2004

Domestic Return Receipt

102585-02-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**  
**OCT -3 2014**



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

**CERTIFIED MAIL**

7010 2780 0002 5895 8817

US POSTAGE

37

ZIP

5817

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**CERTIFIED MAIL<sup>TM</sup> RECEIPT**

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SEP 22 2014

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

Postmark  
Here

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

Street, Apt.  
or PO Box  
City, State

**MODRALL SPERLING**

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

**RETURNED TO SENDER**  
**UNDELIVERABLE AS ADDRESSED—**  
**NO FORWARDING ORDER ON FILE**

**Chevron USA Inc.**  
**P.O. Box 1150**  
**Midland, TX 79702**  
**UNDELIVERABLE AS ADDRESSED—**  
**NO FORWARDING ORDER ON FILE**

**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**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature <b>X</b>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery
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"/> e-Postcard	
4. Restricted Delivery (Extra Fee) <input type="checkbox"/> Yes	

**MON 22 SEP 2014 PM 7:02**  
**ALBUQUERQUE NM 87103**

2. Article Number  
(Transfer from service label)

7010 2780 0002 5895 8817

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

**OFFICIAL USE**

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

SEP 22 2014

Sent To  
HOG Partnership, LP  
5950 Cedar Springs Rd.  
Dallas, TX 75235-6803

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:

HOG Partnership, LP  
5950 Cedar Springs Rd.  
Dallas, TX 75235-6803

2. Article Number  
(Transfer from service label)

7010 2780 0002 5895 8824

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

DALLAS 750

29 SEP '14

PM 13 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

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OCT - 1 2014  
BY:

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**OFFICIAL USE**

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

**SEP 22 2014**

Postmark  
Here

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

Isramco Resources, LLC  
 3452 Lyrac St.  
 Oakton, VA 22124

PS Form

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Isramco Resources, LLC  
 3452 Lyrac St.  
 Oakton, VA 22124

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 x *M. Loe* ☐ 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  
 (Transfer from service)

7010 2780 0002 5895 8831

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

SEP 22 2014

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**  
**SEP 29 2014**

7010 2780 0002 5895 8848

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**OFFICIAL USE**

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

**SEP 22 2014**

Postmark  
Here

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

Nortex Corporation  
 Attn: Robert Kent  
 1415 Louisiana Street  
 Houston, Texas 77002

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:

Nortex Corporation  
 Attn: Robert Kent  
 1415 Louisiana Street  
 Houston, Texas 77002

**COMPLETE THIS SECTION ON DELIVERY**

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

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

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

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)

7010 2780 0002 5895 8848

PS Form 3811, February 2004

Domestic Return Receipt

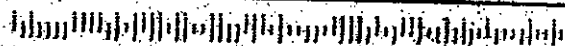
102595-02-M-1540

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 30 2014**  
 BY: \_\_\_\_\_



OF THE RETURN ADDRESS FOLD AT DOTTED LINE

**CERTIFIED MAIL**

7010 2780 0002 5895 8855

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 USE**

Postage \$		<b>SEP 22 2014</b> Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage		

Sent To **MBOE, Inc.**  
915 One Energy Square  
Dallas, TX 75026

PS Form 3811, February 2004

**MODRALL SPERLING**

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

**RECEIVED**  
OCT - 8 2014

**NIXIE 750262033-1N 09/29/14**

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



**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:

**MBOE, Inc.**  
915 One Energy Square  
Dallas, TX 75026

**COMPLETE THIS SECTION ON DELIVERY**

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

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

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

4. Restricted Delivery (Extra Fee) ☐ Yes ☒ No

2. Article Number  
(Transfer from service label)

7010 2780 0002 5895 8855





7010 2780 0002 5895 8862

**U.S. Postal Service**  
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**OFFICIAL USE**

Postage	\$	<b>SEP 22 2014</b>
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Postmark  
Here

Total Po

Sent To **Chester J. Stuebben**  
**1275 Rock Ave.**  
**Apt # HH5**  
**North Plainfield, NJ 07060**

PS Form 3811, February 2004

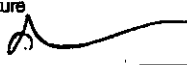
**SENDER: COMPLETE THIS SECTION**

- 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:

**Chester J. Stuebben**  
**1275 Rock Ave**  
**Apt # HH5**  
**North Plainfield, NJ 07060**

**COMPLETE THIS SECTION ON DELIVERY**

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

B. Received by (Printed Name) **C. Stuebben** C. Date of Delivery **9-25-14**

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

**MON 22 SEP 2014 10:18 AM**  
**ALBUQUERQUE NM 87101**

2. 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)

**7010 2780 0002 5895 8862**

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**

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

**SEP 22 2014**

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Sent To: Alan D. Tuck, Jr. and Evelyn Tuck  
Street, Apt. or PO Box: 2829 Wilfred Reid Cir.  
City, State: Sarasota, FL 34240

PS Form

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"><li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>Print your name and address on the reverse so that we can return the card to you.</li><li>Attach this card to the back of the mailpiece or on the front if space permits.</li></ul>	A. Signature <i>x Natali Tuck</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:  Alan D. Tuck, Jr. and Evelyn Tuck 2829 Wilfred Reid Cir. Sarasota, FL 34240	B. Received by (Printed Name) <i>Natali Tuck</i> C. Date of Delivery <i>9-25-14</i> D. Is delivery address different from item 1? If YES, enter delivery address below:  <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Article Number: (Transfer from service label)	3. Service Type: <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

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PS Form 3811, February 2004

Domestic Return Receipt

102596-02-M-1540

UNITED STATES POSTAL SERVICE

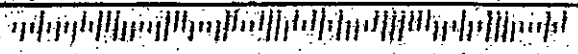


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Modrall Sperling Law Firm  
P.O. Box 2168  
Albuquerque, NM 87103-2168

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**SEP 22 2014**

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

Postmark  
Here

Sent To **Larry Turner**  
**2902 County Road N O**  
**Lamesa, TX 79331**

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:

Larry Turner  
 2902 County Road N O  
 Lamesa, TX 79331

2. Article Number

(Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Larry Turner* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

*LARRY TURNER* **SEP 24 14**

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

E. Is delivery address different from item 1? ☐ Yes ☐ No

F. Is delivery address different from item 1? ☐ Yes ☐ No

G. Is delivery address different from item 1? ☐ Yes ☐ No

H. Is delivery address different from item 1? ☐ Yes ☐ No

I. Is delivery address different from item 1? ☐ Yes ☐ No

J. Is delivery address different from item 1? ☐ Yes ☐ No

K. Is delivery address different from item 1? ☐ Yes ☐ No

L. Is delivery address different from item 1? ☐ Yes ☐ No

M. Is delivery address different from item 1? ☐ Yes ☐ No

N. Is delivery address different from item 1? ☐ Yes ☐ No

O. Is delivery address different from item 1? ☐ Yes ☐ No

P. Is delivery address different from item 1? ☐ Yes ☐ No

Q. Is delivery address different from item 1? ☐ Yes ☐ No

R. Is delivery address different from item 1? ☐ Yes ☐ No

S. Is delivery address different from item 1? ☐ Yes ☐ No

T. Is delivery address different from item 1? ☐ Yes ☐ No

U. Is delivery address different from item 1? ☐ Yes ☐ No

V. Is delivery address different from item 1? ☐ Yes ☐ No

W. Is delivery address different from item 1? ☐ Yes ☐ No

X. Is delivery address different from item 1? ☐ Yes ☐ No

Y. Is delivery address different from item 1? ☐ Yes ☐ No

Z. Is delivery address different from item 1? ☐ Yes ☐ No

AA. Is delivery address different from item 1? ☐ Yes ☐ No

AB. Is delivery address different from item 1? ☐ Yes ☐ No

AC. Is delivery address different from item 1? ☐ Yes ☐ No

AD. Is delivery address different from item 1? ☐ Yes ☐ No

AE. Is delivery address different from item 1? ☐ Yes ☐ No

AF. Is delivery address different from item 1? ☐ Yes ☐ No

AG. Is delivery address different from item 1? ☐ Yes ☐ No

AH. Is delivery address different from item 1? ☐ Yes ☐ No

AI. Is delivery address different from item 1? ☐ Yes ☐ No

AJ. Is delivery address different from item 1? ☐ Yes ☐ No

AK. Is delivery address different from item 1? ☐ Yes ☐ No

AL. Is delivery address different from item 1? ☐ Yes ☐ No

AM. Is delivery address different from item 1? ☐ Yes ☐ No

AN. Is delivery address different from item 1? ☐ Yes ☐ No

AO. Is delivery address different from item 1? ☐ Yes ☐ No

AP. Is delivery address different from item 1? ☐ Yes ☐ No

AQ. Is delivery address different from item 1? ☐ Yes ☐ No

AR. Is delivery address different from item 1? ☐ Yes ☐ No

AS. Is delivery address different from item 1? ☐ Yes ☐ No

AT. Is delivery address different from item 1? ☐ Yes ☐ No

AU. Is delivery address different from item 1? ☐ Yes ☐ No

AV. Is delivery address different from item 1? ☐ Yes ☐ No

AW. Is delivery address different from item 1? ☐ Yes ☐ No

PS Form 3811, February 2004

Domestic Return Receipt

102585-02-M-1540

UNITED STATES POSTAL SERVICE

ALBUQUERQUE, TX 770

25 SEP 2014 PM 2

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

**SEP 22 2014**

Postmark  
Here

Sent To: **Sande Wische**  
 Street, Apt. or PO Box: **3 Morton Lane**  
 City, State: **Warren, NJ 07059**

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:

Sande Wische  
 3 Morton Lane  
 Warren, NJ 07059

2. Article Number  
 (Transfer from service label)

7010 2780 0002 5895 8893

PS Form 3811, February 2004

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Sande Wische*

☐ Agent  
☐ Addressee

B. Received by (Print name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below

☐ Yes  
☒ No

SEP 26 2014

3. Service Type

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

4. Restricted Delivery (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE

07059

26 SEP '14

PM 10 1

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

**SEP 22 2014**

Postmark  
Here

Total Pct

Sent To **Irene McIsaac**  
**3452 Lyrac St.**  
**Oakton, VA 22124**

PS Form 3890, 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:

**Irene McIsaac**  
**3452 Lyrac St.**  
**Oakton, VA 22124**

2. Article Number

(Transfer from service label)

**7010 2780 0002 5895 8909**

PS Form 3811, February 2004

Domestic Return Receipt

102585-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X** *McIsaac*

☐ 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

**MON 22 SEP 2014 PM**

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

**27 SEP 14**  
**PM 5 L**

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

SEP 22 2014

Postmark Here

Sent To Patricia McIsaac  
3452 Lyrac St.  
Oakton, VA 22124

Street, Apt. or PO Box  
City, State

PS Form 3811

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"><li>Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li><li>Print your name and address on the reverse so that we can return the card to you.</li><li>Attach this card to the back of the mailpiece or on the front if space permits.</li></ul>	<p>A. Signature <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</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 <input type="checkbox"/> No If YES, enter delivery address below: _____</p> <p>1. Article Addressed to:  Patricia McIsaac 3452 Lyrac St. Oakton, VA 22124</p> <p>2. Article Number _____ (Transfer from service label)</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"/> COD <input type="checkbox"/> Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
7010 2780 0002 5895 8916	

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

UNITED STATES POSTAL SERVICE

27 SEP 14 PM 5.1

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

**SEP 22 2014**

Postmark  
Here

Sent To **Nancy Redford**  
 Street, Apt or PO Box **141 S. Norton Street**  
 City, State **Los Angeles, CA 90004**

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:

Nancy Redford  
 141 S. Norton Street  
 Los Angeles, CA 90004

2. Article Number  
 (Transfer from service label)

7010 2780 0002 5895 8923

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1

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 & Fees Paid

USPS  
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Certified Fee

Return Receipt Fee  
(Endorsement Required)

Restricted Delivery Fee  
(Endorsement Required)

Total Post

**SEP 22 2014**

Postmark  
Here

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

Mary Shoener  
26 Thunderhill Lane  
Ridgefield, CT 06877

PS Form 3811, Registered Mail

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Mary Shoener  
26 Thunderhill Lane  
Ridgefield, CT 06877

**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?  
If YES, enter delivery address below.

☐ Yes

☐ No

2. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ S.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

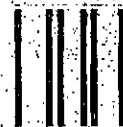
7010 2780 0002 5895 8930

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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Albuquerque, NM 87103-2168

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

**SEP 22 2014**

Postmark  
Here

Sent To  
**Daniel MacIsaac**  
 Street, Ap  
or PO Box  
**902 Schultz Pl.**  
 City, State  
**Monona, WI 53716**

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:

**Daniel MacIsaac**  
**902 Schultz Pl.**  
**Monona, WI 53716**

2. Article Number  
(Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Signature]*

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

**9-30-14**

D. Is delivery address different from item 1?  
 If YES, enter delivery address below:

☐ Yes  
☐ No

**MON 22 SEP 2014 PM**

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

**7010 2780 0002 5895 8947**

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

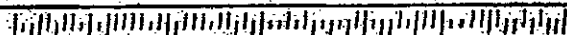


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 Permit No. 6104

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

**RECEIVED**  
**OCT -3 2014**  
 BY *[Signature]*





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**OFFICIAL USE**

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

**SEP 22 2014**

Postmark  
Here

Sent To  
Rubicon Oil & Gas, LLC  
508 W. Wall Street  
Midland, Texas 79701

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:**

Rubicon Oil & Gas, LLC  
508 W. Wall Street  
Midland, Texas 79701

**2. Article Number**  
(Transfer from service)

7010 2780 0002 5895 8954

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE / ODESSA

TX 797 11

29 SEP 2014 PM

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Permit No. G-10

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

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

**OCT - 1 2014**

Postmark  
Here

Sent To **Isramco Resources, LLC**  
**Attn: Anthony James**  
 Street, Apt. or PO Box **2425 W. Loop S., Ste 810**  
 City, State **Houston, TX 77027**

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:

**Isramco Resources, LLC**  
**Attn: Anthony James**  
**2425 W. Loop S., Ste 810**  
**Houston, TX 77027**

2. Article Number  
 (Transfer from service label)

7010 2780 0002 5895 8978

PS Form 3811, February 2004

Domestic Return Receipt

102566-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

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

B. Received by (Printed Name) **QUANG PHAM** C. Date of Delivery **10/6/14**

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

**RECEIVED**  
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 BY: *[Signature]*

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

**OCT - 1 2014**

Postmark  
Here

Sent To **Isramco Resources, LLC**  
Attn: Anthony James  
2425 W. Loop S., Ste 810  
Houston, TX 77027

PS Form 38

**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:

Isramco Resources, LLC  
Attn: Anthony James  
2425 W. Loop S., Ste 810  
Houston, TX 77027

2. Article Number  
(Transfer from service label)

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PS Form 3811, February 2004

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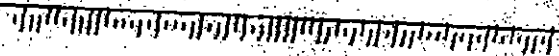


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Jordan Kessler  
Modrall Sperling Law Firm  
P.O. Box 2168  
Albuquerque, NM 87103-2168

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

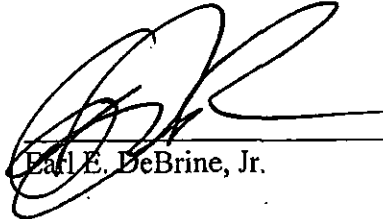
APPLICATION OF CIMAREX  
ENERGY COMPANY OF COLORADO  
FOR A NON-STANDARD OIL SPACING  
AND PRORATION UNIT AND COMPULSORY  
POOLING, EDDY COUNTY, NEW MEXICO.

CASE NO. 15215

AFFIDAVIT

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

Earl E. DeBrine, Jr., attorney in fact and authorized representative of Cimarex Energy Co. 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.

  
\_\_\_\_\_  
Earl E. DeBrine, Jr.

SUBSCRIBED AND SWORN to before me this 13 day of November, 2014 by Earl E. DeBrine, Jr.

Kathleen T Allen  
\_\_\_\_\_  
Notary Public

My commission expires: 07-23-2018

# Affidavit of Publication

No. 23199

State of 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 October 2, 2014

Second Publication

Third Publication

Fourth Publication

Fifth Publication

Sixth Publication

Subscribed and sworn before me this

2nd day of October 2014



OFFICIAL SEAL  
Latisha Romine  
NOTARY PUBLIC-STATE OF NEW MEXICO

My commission expires: 5/12/2015

Latisha Romine

Latisha Romine

Notary Public, Eddy County, New Mexico

# Copy of Publication:

## LEGAL NOTICE

CASE NO. 152151. Notice to all affected parties, heirs and devisees, including Sande Wische, Chevron, USA, HOG Partnership, LP, Nortex Corporation, MBOE, Inc., Nancy Reford, Daniel MacIsaac, and Rubicon Oil and Gas, LLC. Application of Cimarex Energy Company of Colorado for a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico. Applicant seeks an order from the Division: (1) creating a non-standard 160-acre, more or less, oil spacing and proration unit in the Bone Spring formation, comprised of the W/2 E/2 of Section 36, Township 24 South, Range 26 East, NMPM, Eddy County, New Mexico; and (2) pooling all mineral interests in the Bone Spring 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 Jake 36 State 7H well, to be horizontally drilled. The producing area for this well will be 330 feet from the project area boundary. 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 30 miles South of Carlsbad New Mexico.

Published in the Artesia Daily Press, Artesia, N.M., October 2, 2014 Legal No. 23199.