

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

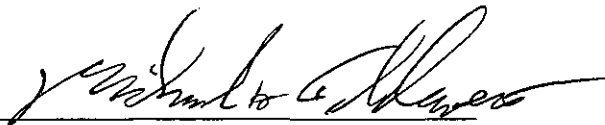
**APPLICATION OF COG OPERATING LLC
FOR A NON-STANDARD SPACING AND
PRORATION UNIT AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.**

CASE NO. 15283

AFFIDAVIT

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

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

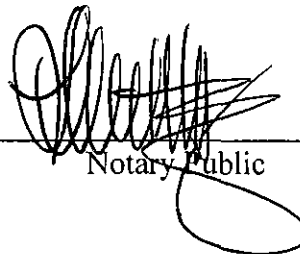


Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 1st day of April 2015 by Michael H. Feldewert.



OFFICIAL SEAL
NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires 01/14/19



Notary Public

**BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 8
Submitted by: COG Operating LLC
Hearing Date: April 2, 2015**

COG OPERATING LLC
HALBERD 27 STATE COM NO. 2H WELL

POOLED PARTIES:

Yates Industries LLC
105 South Fourth Street
Artesia, NM 88210

Harvey E. Yates Company
Matador Resources Company
P. O. Box 1936
Artesia, NM 88201

John A. Yates,
105 South Fourth Street
Artesia, NM 88210

John A. Yates, Trustee of Trust Q
under the will of Peggy A. Yates,
105 South Fourth Street
Artesia, NM 88210

Marigold LLLP,
P.O. Box 1290
Artesia, NM 88211-1290

Kerr McGee Oil & Gas
Onshore LP,
16666 Northchase Drive
Houston, TX 77060

Yates Energy Corporation
105 South Fourth Street
Artesia, NM 88210

Sharbro Oil Ltd.,
423 W. Main Street
Artesia, NM 88210

Tulipan LLC
P.O. Box 1020
Artesia, NM 88211-1020

OFFSETS:

Alamo Permian Resources, LLC
415 Wall Street
Midland, TX 79701

Occidental Permian Ltd.
P.O. Box 4294
Houston, Texas 77210

Apache Corporation
303 Veterans Airpark Lane
Midland, TX 79701

Breitbart Operating LP
600 Travis, Suite 4800
Houston, TX 77002

Beverly Gooden
5445 Caruth Haven Lane #826
Dallas, TX 75225

Ann Treadwill Henderson, Trustee of
the Mary Ann Curtis Family Trust
1705 Pennington Way
Oklahoma City, OK 73116

Carolyn K. Lisle, Trustee of the Carolyn
K. Lisle 1990 Revocable Trust,
P.O. Box 21357
Oklahoma City, OK 73156

Chisos Ltd.
670 Dona Ana Road SW
Deming, NM 88030

Clayton Williams Energy Inc.
6 Desta Drive, Suite 1100
Midland, TX 79705

DDM Properties, Ltd.
P.O. Box 101
Midland, TX 79702

Debra Denise Latham, Trustee of the
Latham Family Trust under the Will
of Lindley Paul Latham
3402 Chate Place
Midland, TX 79707

Doral Acquisition Corp
3300 N. "A" Street,
Bldg. 2, Ste. 218
Midland, TX 79705

Finwing Corporation
508 W. Wall Street
Midland, TX 79701

GMSR, Ltd.,
P.O. Box 113
Midland, TX 79702-0113

Greg Benton
6 Desta Drive, Ste. 3000
Midland, TX 79705

**COG OPERATING LLC
HALBERD 27 STATE COM NO. 2H WELL**

Joachim Marc Schmid
3315 Gebtry Drive
West Lake Hills, TX 78746

John Kennedy
6 Desta Drive, Ste. 3000
Midland, TX 79705

John Weldon Gilchrist
102 S. Main
Thorndale, TX 76577

Judy F. Mulroy
2231 Pine River Drive
Kingwood, TX 77330

Manta Oil & Gas Inc.
508 W. Wall Street
Midland, TX 79701

Mark B. Heinen
11912 Persuasion Drive
San Antonio, TX 78216

Mark Tisdale
6 Desta Drive, Ste. 3000
Midland, TX 79705

Marla Jo Moats Schmid
5205 Rain Creek Parkway
Austin, TX 78759

Matt Swierc
6 Desta Drive, Ste. 3000
Midland, TX 79705

MelRiggs
6 Desta Drive, Ste. 3000
Midland, TX 79705

Mickey Cunningham
6 Desta Drive, Ste. 3000
Midland, TX 79705

Mike Pollard
6 Desta Drive, Ste. 3000
Midland, TX 79705

Noble Energy Inc.,
1001 Noble Energy Way
Houston, TX 77070

Occidental Permian LP
5 Greenway Plaza, Ste. 110
Houston, TX 77046-0526

Olwick Corporation
P.O. Box 10886
Midland, TX 79702

Petraltis Oil & Gas Inc.
1603 Holloway Ave
Midland, TX 79701

Robert Thomas
2201 Rocky Lane Rd., Apt.
#416
Odessa, TX 79762

S.E.S. Oil & Gas Inc.
P.O. Box 371
Midland, TX 79701

Stacey Hutcherson
112 Gainer Drive
Hutto, TX 78634

Wadi Petroleum Inc.
4355 Sylvanfield Blvd
Houston, TX 77014

Ms. Michal Dedwylder, Trustee for
the Larry S. Marcum & Gordon G.
Marcum II Trust
P.O. Box 2350
Albany, TX 76430

Cross Border Resources, Inc
Attn: Matthew Barstow
2515 McKinney, Ste 900
Dallas, TX 75201

LRE Operating LLC
1111 Bagby Street, Suite 4600
Houston, TX 77002

HOLLAND & HART



Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JLKessler@hollandhart.com

March 13, 2015

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: PARTIES SUBJECT TO POOLING PROCEEDINGS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico.
Halberd 27 State Com No. 2H Well**

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC 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 April 2, 2015. 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 Dylan Park, at (432) 685-2539 or dpark@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone (505) 988-4421 **Fax** (505) 983-6043 **www.hollandhart.com**

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

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

HOLLAND & HART



Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JLKessler@hollandhart.com

March 13, 2015

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSET PARTIES

RE: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico. Halberd 27 State Com No. 2H Well

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

This application has been set for hearing before a Division Examiner at 8:15 AM on April 2, 2015. 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.

If you have any questions about this matter please contact Dylan Park, at (432) 685-2539 or dpark@concho.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone [505] 988-4421 **Fax** [505] 983-6043 **www.hollandhart.com**

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

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

7006 2760 0001 6382 1001

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 For delivery information visit **USPS.com**

OFFICIAL MAIL

MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	220
Restricted Delivery Fee (Endorsement Required)	669

Postmark Here
MAR 13 2015
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

Yates Industries LLC
 105 South Fourth Street
 Artesia, NM 88210

For Instructions: [Click Here](#)

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 Industries LLC
 105 South Fourth Street
 Artesia, NM 88210

2. Article Number (Transfer from service label) **7006 2760 0001 6382 1001**

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
X *SH*

B. Received by (Printed Name) *SHuer te* 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® ☐ Priority Mail Express™
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☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 0882

U.S. Postal Service™
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OFFICIAL MAIL

MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	220
Restricted Delivery Fee (Endorsement Required)	669

Postmark Here
MAR 13 2015
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

Harvey E. Yates Company
 Matador Resources Company
 P. O. Box 1936
 Artesia, NM 88201

For Instructions: [Click Here](#)

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:

Harvey E. Yates Company
 Matador Resources Company
 P. O. Box 1936
 Artesia, NM 88201

2. Article Number (Transfer from service label) **7006 2760 0001 6382 0882**

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee
Harvey E. Yates

B. Received by (Printed Name) *Harvey E. Yates* C. Date of Delivery *3/18/15*

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

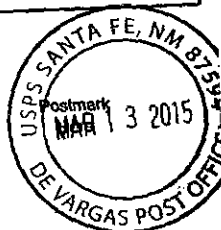
3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 0875

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MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669



John A. Yates,
 105 South Fourth Street
 Artesia, NM 88210

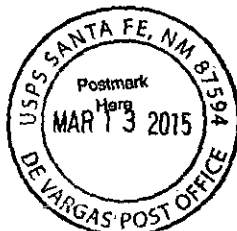
PS Form 3800, August 2005

See Reverse for Instructions

7006 2760 0001 6382 0868

U.S. Postal ServiceTM
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 (Domestic Mail Only; No Insurance Coverage Provided)
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MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669



John A. Yates, Trustee of Trust Q
 under the will of Peggy A. Yates,
 105 South Fourth Street
 Artesia, NM 88210

PS Form 3800, August 2005

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

John A. Yates,
 105 South Fourth Street
 Artesia, NM 88210

2. Article Number (Transfer from service label) 7006 2760 0001 6382 0875

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) *S Huerta* 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[®] ☐ Priority Mail Express[™]
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

John A. Yates, Trustee of Trust Q
 under the will of Peggy A. Yates,
 105 South Fourth Street
 Artesia, NM 88210

2. Article Number (Transfer from service label) 7006 2760 0001 6382 0868

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) *S Huerta* 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[®] ☐ Priority Mail Express[™]
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

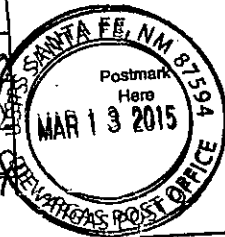
7006 2760 0001 6382 0851

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No) MHF/COG
 For delivery information visit HALBERD 2H
OFFIC

Postage \$ 69
 Certified Fee 339
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669

Marigold LLLP,
 P.O. Box 1290
 Artesia, NM 88211-1290

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:
 Marigold LLLP,
 P.O. Box 1290
 Artesia, NM 88211-1290

2. Article Number 11 11 11 7006 2760 0001 6382 0851
 (Transfer from service label)

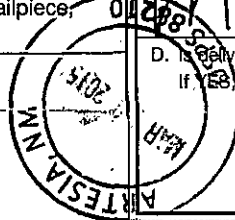
PS Form 3811, July 2013 Domestic Return Receipt

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® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes



7006 2760 0001 6382 0844

U.S. Postal Service
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 For delivery information visit HALBERD 2H
OFFIC

Postage \$ 69
 Certified Fee 339
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669

Kerr McGee Oil & Gas
 Onshore LP,
 16666 Northchase Drive
 Houston, TX 77060

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:
 Kerr McGee Oil & Gas
 Onshore LP,
 16666 Northchase Drive
 Houston, TX 77060

2. Article Number 11 11 11 7006 2760 0001 6382 0844
 (Transfer from service label)

PS Form 3811, July 2013 Domestic Return Receipt

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® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 0637

U.S. Postal Service
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For delivery information visit **MHF/COG**
OFFICE HALBERD 2H

Postage \$ 64
 Certified Fee 3.30
 Return Receipt Fee (Endorsement Required) 2.70
 Restricted Delivery Fee (Endorsement Required) 6.69

Yates Energy Corporation
 105 South Fourth Street
 Artesia, NM 88210

PS Form 3811, July 2013

7006 2760 0001 6382 0620

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

For delivery information visit **MHF/COG**
OFFICE HALBERD 2H

Postage \$ 64
 Certified Fee 3.30
 Return Receipt Fee (Endorsement Required) 2.70
 Restricted Delivery Fee (Endorsement Required) 6.69

Sharbro Oil Ltd.,
 423 W. Main Street
 Artesia, NM 88210

PS Form 3811, July 2013

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 Energy Corporation
 105 South Fourth Street
 Artesia, NM 88210

2. Article Number (Transfer from service label) **7006 2760 0001 6382 0637**

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X [Signature]

B. Received by (Printed Name) S. Huerta 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® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

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:

Sharbro Oil Ltd.,
 423 W. Main Street
 Artesia, NM 88210

2. Article Number (Transfer from service label) **7006 2760 0001 6382 0620**

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee
 X [Signature]

B. Received by (Printed Name) Corey Fowler C. Date of Delivery 3-16-15

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 1018

U.S. Postal Service™
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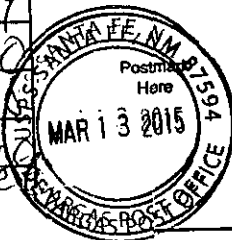
MHF/COG
HALBERD 2H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 2760
 Restricted Delivery Fee (Endorsement Required) 6382

Tulipan LLC
P.O. Box 1020
Artesia, NM 88211-1020

7006 2760 0001 6382 1018

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:

Tulipan LLC
P.O. Box 1020
Artesia, NM 88211-1020

2. Article Number (Transfer from service label)

7006 2760 0001 6382 1018

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Karen Leishman ☐ Agent ☐ Addressee

B. Received by (Printed Name) Loren Leishman C. Date of Delivery 3/16/20

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 0981

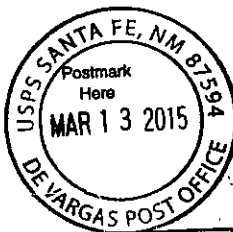
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit

OFFICE

MHF/COG
 HALBERD 2H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee
 (Endorsement Required) 220
 Restricted Delivery Fee
 (Endorsement Required) 669



Alamo Permian Resources, LLC
 415 Wall Street
 Midland, TX 79701

PS Form 3811, August 2000

See Reverse for Instructions

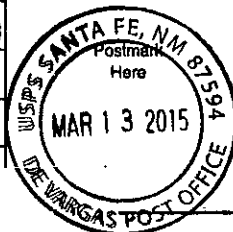
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit

OFFICE

MHF/COG
 HALBERD 2H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee
 (Endorsement Required) 220
 Restricted Delivery Fee
 (Endorsement Required) 669



Occidental Permian Ltd.
 P.O. Box 4294
 Houston, Texas 77210

PS Form 3811, August 2000

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Alamo Permian Resources, LLC
 415 Wall Street
 Midland, TX 79701

2. Article Number 7006 2760 0001 6382 0981 7711
 (Transfer from service label)

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Manning☐ Agent☐ Addressee

B. Received by (Printed Name)

Manning

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®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Occidental Permian Ltd.
 P.O. Box 4294
 Houston, Texas 77210

2. Article Number 7006 2760 0001 6382 0974
 (Transfer from service label)

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Jobee☐ Agent☐ Addressee

B. Received by (Printed Name)

Jobee

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®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

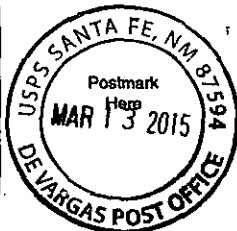
☐ Yes

7006 2760 0001 6382 0967

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

For delivery information visit usps.com**OFFICE**MHF/COG
HALBERD 2H

Postage	\$ 67
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669



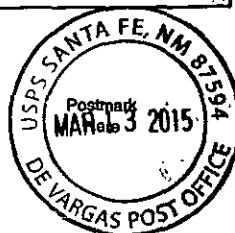
Apache Corporation
 303 Veterans Airpark Lane
 Midland, TX 79701

PS Form 3811, August 2006 See Reverse for Instructions

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

For delivery information visit usps.com**OFFICE**MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669



Breitbart Operating LP
 600 Travis, Suite 4800
 Houston, TX 77002

PS Form 3811, August 2006 See Reverse for Instructions

7006 2760 0001 6382 0950

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:

Apache Corporation
 303 Veterans Airpark Lane
 Midland, TX 79701

2. Article Number
(Transfer from service label)

7006 2760 0001 6382 0967

PS Form 3811, July 2013

Domestic Return Receipt

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:

Breitbart Operating LP
 600 Travis, Suite 4800
 Houston, TX 77002

2. Article Number
(Transfer from service label)

7006 2760 0001 6382 0950

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Sherita Treat

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Sherita Treat

C. Date of Delivery

3/16/15

D. Is delivery address different from item 1?

☐ Yes
☐ No

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail®
☐ Registered
☐ Insured Mail
☐ Priority Mail Express™
☐ Return Receipt for Merchandise
☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes
☐ No

A. Signature

X Sherita Treat

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Sherita Treat

D. Is delivery address different from item 1?

☐ Yes
☐ No

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail®
☐ Registered
☐ Insured Mail
☐ Priority Mail Express™
☐ Return Receipt for Merchandise
☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes
☐ No

7006 2760 0001 6382 1223

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **usps.com**

OFFICIAL USE

MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Postmark
 MAR 13 2015
 USPS SANTA FE, NM 87504
 DE VARGAS POST OFFICE

Beverly Gooden
 5445 Caruth Haven Lane #826
 Dallas, TX 75225

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6382 1230

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **usps.com**

OFFICIAL USE

MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Postmark
 MAR 13 2015
 USPS SANTA FE, NM 87504
 DE VARGAS POST OFFICE

Ann Treadwill Henderson, Trustee of
 the Mary Ann Curtis Family Trust
 1705 Pennington Way
 Oklahoma City, OK 73116

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Ann Treadwill Henderson, Trustee of
 the Mary Ann Curtis Family Trust.
 1705 Pennington Way
 Oklahoma City, OK 73116

2. Article Number (Transfer from service label)

7006 2760 0001 6382 1230

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ X ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery 3-16

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6382 1247

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **OFFICIAL MAIL™**
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Carolyn K. Lisle, Trustee of the Carolyn K. Lisle 1990 Revocable Trust,
 P.O. Box 21357
 Oklahoma City, OK 73156

USPS SANTA FE, NM 87594
 Postmark Here
 MAR 13 2015
 DE VARGAS POST OFFICE

See Reverse for Instructions

7006 2760 0001 6382 1254

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **OFFICIAL MAIL™**
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Chisos Ltd.
 670 Dona Ana Road SW
 Deming, NM 88030

USPS SANTA FE, NM 87594
 Postmark Here
 MAR 13 2015
 DE VARGAS POST OFFICE

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:

Carolyn K. Lisle, Trustee of the Carolyn K. Lisle 1990 Revocable Trust,
 P.O. Box 21357
 Oklahoma City, OK 73156

2. Article Number: 7006 2760 0001 6382 1247

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name): [Signature] C. Date of Delivery: MAR 13 2015

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

3. Service Type: ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

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:

Chisos Ltd.
 670 Dona Ana Road SW
 Deming, NM 88030

2. Article Number: 7006 2760 0001 6382 1254

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name): Lsm. th C. Date of Delivery: 3-16-15

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

3. Service Type: ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 1261

U.S. Postal Service TM	
CERTIFIED MAILTM RECEIPT	
(Domestic Mail Only, No International Countries Permitted)	
For delivery information visit OFFICIAL MAIL SERVICE	
Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
MHF/COG HALBERD 2H USPS SANTA FE, NM 87594 MAR 13 2015 DE VARGAS POST OFFICE	
Clayton Williams Energy Inc. 6 Desta Drive, Suite 1100 Midland, TX 79705	
for instructions	

7006 2760 0001 6382 1278

U.S. Postal Service TM	
CERTIFIED MAILTM RECEIPT	
(Domestic Mail Only, No International Countries Permitted)	
For delivery information visit OFFICIAL MAIL SERVICE	
Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
MHF/COG HALBERD 2H USPS SANTA FE, NM 87594 MAR 13 2015 DE VARGAS POST OFFICE	
DDM Properties, Ltd. P.O. Box 101 Midland, TX 79702	
for instructions	

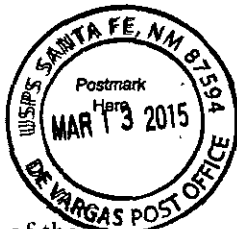
SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		COMPLETE THIS SECTION ON DELIVERY A. Signature X <i>Kim Bickel</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>Kim Bickel</i> Date of Delivery <i>2/14</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
1. Article Addressed to: Clayton Williams Energy Inc. 6 Desta Drive, Suite 1100 Midland, TX 79705		3. Service Type <input checked="" type="checkbox"/> Certified Mail [®] <input type="checkbox"/> Priority Mail Express [™] <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery	
2. Article Number (Transfer from service label) 7006 12760 0001 6382 1261		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, July 2013 Domestic Return Receipt			

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.		COMPLETE THIS SECTION ON DELIVERY A. Signature X <i>Armeda</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>Armeda</i> C. Date of Delivery <i>2/14</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
1. Article Addressed to: DDM Properties, Ltd. P.O. Box 101 Midland, TX 79702		3. Service Type <input checked="" type="checkbox"/> Certified Mail [®] <input type="checkbox"/> Priority Mail Express [™] <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery	
2. Article Number (Transfer from service label) 7006 2760 0001 6382 1278		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, July 2013 Domestic Return Receipt			

526T 2989 1000 6382 1282
7006 2760 0001 6382 1282

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance)
For delivery information visit **OFFICIAL MAIL SERVICE**
HALBERD 2H

Postage	\$ 69
Certified Fee	230
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669



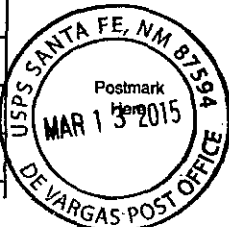
Debra Denise Latham, Trustee of the
Latham Family Trust under the Will
of Lindley Paul Latham
3402 Chate Place
Midland, TX 79707

PS Form 3800, August 2006 See Reverse for Instructions

526T 2989 1000 6382 1282
7006 2760 0001 6382 1282

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance)
For delivery information visit **OFFICIAL MAIL SERVICE**
HALBERD 2H

Postage	\$ 69
Certified Fee	230
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669



Doral Acquisition Corp
3300 N. "A" Street,
Bldg. 2, Ste. 218
Midland, TX 79705

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6382 1308

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Postage Necessary)
 For delivery information visit **usps.com**

OFFICIAL USE

MHF/COG
HALBERD 2H

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

USPS SANTA FE, NM 87594
 Postmark MAR 13 2015
 DEVARGAS POST OFFICE

Finwing Corporation
 508 W. Wall Street
 Midland, TX 79701

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6382 1315

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Postage Necessary)
 For delivery information visit **usps.com**

OFFICIAL USE

MHF/COG
HALBERD 2H

Postage	\$ 6.9
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	6.69

USPS SANTA FE, NM 87594
 Postmark MAR 13 2015
 DEVARGAS POST OFFICE

GMSR, Ltd.,
 P.O. Box 113
 Midland, TX 79702-0113

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

GMSR, Ltd.,
 P.O. Box 113
 Midland, TX 79702-0113

2. Article Number (Transfer from service label)

7006 2760 0001 6382 1315

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Vivian Guajardo* 3/25/15
☐ Agent
☐ Addressee

B. Received by (Printed Name) *Vivian Guajardo* C. Date of Delivery *3/25/15*

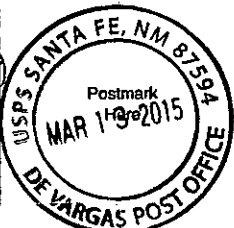
D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

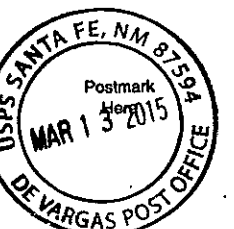
3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6382 1124

U.S. Postal Service TM	
CERTIFIED MAILTM RECEIPT	
(Domestic Mail Only; No Insurance Coverage)	
For delivery information	MHF/COG HALBERD 2H
OFFICIAL	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
	
Greg Benton 6 Desta Drive, Ste. 3000 Midland, TX 79705	

U.S. Postal Service TM	
CERTIFIED MAILTM RECEIPT	
(Domestic Mail Only; No Insurance Coverage)	
For delivery information	MHF/COG HALBERD 2H
OFFICIAL	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
	
Joachim Marc Schmid 3315 Gebtry Drive West Lake Hills, TX 78746	

7006 2760 0001 6382 1124

SEND TO POST OFFICE PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.		USE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X <i>Jim Benton</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <div style="border: 1px solid black; padding: 10px; margin: 10px;"> Greg Benton 6 Desta Drive, Ste. 3000 Midland, TX 79705 </div>		B. Received by (Printed Name) <i>Jim Benton</i> C. Date of Delivery <i>3/11</i>	
2. Article Number (Transfer from service label) 7006 2760 0001 6382 1124		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"/> Priority Mail Express [™] <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, July 2013 Domestic Return Receipt			

7006 2760 0001 6382 1148

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only) **MHF/COG**
 For delivery information **HALBERD 2H**
OFFICIAL

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Postmark: SANTA FE, NM 87594
MAR 13 2015
DE VARGAS POST OFFICE

John Kennedy
 6 Desta Drive, Ste. 3000
 Midland, TX 79705

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided) **MHF/COG**
 For delivery information **HALBERD 2H**
OFFICIAL

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Postmark: SANTA FE, NM 87594
MAR 13 2015
DE VARGAS POST OFFICE

John Weldon Gilchrist
 102 S. Main
 Thorndale, TX 76577

5511 2889 1000 6382 1155

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

John Kennedy
 6 Desta Drive, Ste. 3000
 Midland, TX 79705

2. Article Number

(Transfer from service label)

7006 2760 0001 6382 1148

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Kim Beale

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Kim Beale

C. Date of Delivery

3/14

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SI

COMPLETE THIS SECTION ON DELIVERY

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

1. Article Addressed to:

John Weldon Gilchrist
 102 S. Main
 Thorndale, TX 76577

2. Article Number

(Transfer from service label)

7006 2760 0001 6382 1155

PS Form 3811, July 2013

Domestic Return Receipt

A. Signature

John Weldon Gilchrist

☐ Agent
☒ Addressee

B. Received by (Printed Name)

John Weldon Gilchrist

C. Date of Delivery

3/17/15

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 2760 0001 6382 1162

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT

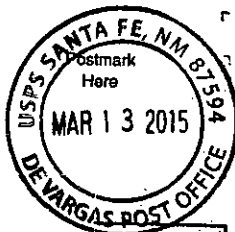
(Domestic Mail Only; No International Service Provided)

For delivery information visit

OFFICE

MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669



Judy F. Mulroy
 2231 Pine River Drive
 Kingwood, TX 77330

PS Form 3811, August 2006

See reverse for instructions

7006 2760 0001 6382 1162

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No International Service Provided)

For delivery information visit

OFFICE

MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669



Manta Oil & Gas Inc.
 508 W. Wall Street
 Midland, TX 79701

PS Form 3811, 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:

Judy F. Mulroy
 2231 Pine River Drive
 Kingwood, TX 77330

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

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

Judy Mulroy
 3/18/13

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 1162

PS Form 3811, July 2013

Domestic Return Receipt

7006 2760 0001 6382 1186

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No International Mail)
 For delivery information visit **OFFIC**
MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Postmark
 MAR 13 2015
 DE VARGAS POST OFFICE

Mark B. Heinen
 11912 Persuasion Drive
 San Antonio, TX 78216

PS Form 3811, August 2006 See Reverse for Instructions

7006 2760 0001 6382 1193

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No International Mail)
 For delivery information visit **OFFIC**
MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Postmark
 MAR 13 2015
 DE VARGAS POST OFFICE

Mark Tisdale
 6 Desta Drive, Ste. 3000
 Midland, TX 79705

PS Form 3811, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Mark Tisdale 6 Desta Drive, Ste. 3000 Midland, TX 79705</p> <p>2. Article Number (Transfer from service label)</p>	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>X <i>Kim Beady</i></p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p><i>Kim Beady</i> 3/14</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>7006 2760 0001 6382 1193</p>	

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6382 1209

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Return Receipt)
 For delivery information visit **OFFICIAL**
MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Postmark
MAR 13 2015
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

Marla Jo Moats Schmid
 5205 Rain Creek Parkway
 Austin, TX 78759

for instructions

7006 2760 0001 6382 1216

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Return Receipt)
 For delivery information visit **OFFICIAL**
MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Postmark
MAR 13 2015
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

Matt Swierc
 6 Desta Drive, Ste. 3000
 Midland, TX 79705

for instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Marla Jo Moats Schmid
 5205 Rain Creek Parkway
 Austin, TX 78759

2. Article Number (Transfer from service label) 7006 2760 0001 6382 1209

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X [Signature]

B. Received by (Printed Name) JORDAN SCHMID
 C. Date of Delivery 3-17-15

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

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:

Matt Swierc
 6 Desta Drive, Ste. 3000
 Midland, TX 79705

2. Article Number (Transfer from service label) 7006 2760 0001 6382 1216

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X [Signature]

B. Received by (Printed Name) Matt Swierc
 C. Date of Delivery 3/17/15

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 1025

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

For delivery information visit **OFFICIAL** **MHF/COG HALBERD 2H**

Postage	\$ 69
Certified Fee	230
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Postmark
MAR 13 2015
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

MelRiggs
 6 Desta Drive, Ste. 3000
 Midland, TX 79705

PS Form 3811, July 2013

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:

MelRiggs
 6 Desta Drive, Ste. 3000
 Midland, TX 79705

2. Article Number (Transfer from service label) 7006 2760 0001 6382 1025

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X Kim Brady

B. Received by (Printed Name) Kim Brady C. Date of Delivery 3/14

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 1032

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

For delivery information visit **OFFICIAL** **MHF/COG HALBERD 2H**

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Postmark
MAR 13 2015
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

Mickey Cunningham
 6 Desta Drive, Ste. 3000
 Midland, TX 79705

PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mickey Cunningham
 6 Desta Drive, Ste. 3000
 Midland, TX 79705

2. Article Number (Transfer from service label) 7006 2760 0001 6382 1032

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X Kim Brady

B. Received by (Printed Name) Kim Brady C. Date of Delivery 3/14

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 1049

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
 (Domestic Mail Only)
 For delivery information: **MHF/COG**
OFFICIAL
HALBERD 2H

Postage	\$ 69
Certified Fee	338
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	164



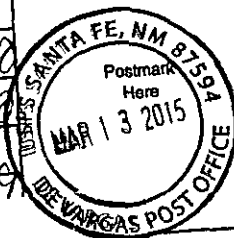
Mike Pollard
 6 Desta Drive, Ste. 3000
 Midland, TX 79705

PS Form 3811, August 2006 PSN 7530-01-000-9001 See Reverse for Instructions

7006 2760 0001 6382 1056

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
 (Domestic Mail Only)
 For delivery information: **MHF/COG**
OFFICIAL
HALBERD 2H

Postage	\$ 69
Certified Fee	338
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	164



Noble Energy Inc.,
 1001 Noble Energy Way
 Houston, TX 77070

PS Form 3811, August 2006 PSN 7530-01-000-9001 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:

Mike Pollard
 6 Desta Drive, Ste. 3000
 Midland, TX 79705

2. Article Number

(Transfer from service label)

7006 2760 0001 6382 1049

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Jim Brady

☐ Agent☐ Addressee

B. Received by (Printed Name)

Jim Brady

C. Date of Delivery

3/13

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail[®]☐ Priority Mail Express[™]☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**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:

Noble Energy Inc.,
 1001 Noble Energy Way
 Houston, TX 77070

2. Article Number

(Transfer from service label)

7006 2760 0001 6382 1056

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

C. Montoya

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Montoya

C. Date of Delivery

MAR 17 2015

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail[®]☐ Priority Mail Express[™]☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

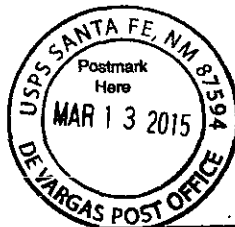
4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 2760 0001 6382 1070

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only)
 For delivery information
OFFICE
MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	230
Return Receipt Fee (Endorsement Required)	220
Restricted Delivery Fee (Endorsement Required)	669



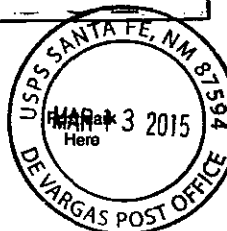
Occidental Permian LP
 5 Greenway Plaza, Ste. 110
 Houston, TX 77046-0526

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6382 1070

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only)
 For delivery information
OFFICE
MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	230
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669



Olwick Corporation
 P.O. Box 10886
 Midland, TX 79702

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:
 Olwick Corporation
 P.O. Box 10886
 Midland, TX 79702

2. Article Number
 (Transfer from service label) 7006 2760 0001 6382 1070

RECIPIENT: COMPLETE THIS SECTION ON DELIVERY

A. Signature
[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[®] ☐ Priority Mail Express[™]
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 2013 Domestic Return Receipt

2006 2760 0001 6382 1087

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No MF/COG)
 For delivery information visit **OFFICIAL MAIL SERVICE**
HALBERD 2H

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

USPS SANTA FE, NM 87594
MAR 12 2015
 Postmark Here
DE VARGAS POST OFFICE

Petratis Oil & Gas Inc.
 1603 Holloway Ave
 Midland, TX 79701

PS Form 3800, August 2006 See Reverse for Instructions

2006 2760 0001 6382 1094

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No MF/COG)
 For delivery information visit **OFFICIAL MAIL SERVICE**
HALBERD 2H

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

USPS SANTA FE, NM 87594
MAR 12 2015
 Postmark Here
DE VARGAS POST OFFICE

Robert Thomas
 2201 Rocky Lane Rd., Apt.
 #416
 Odessa, TX 79762

PS Form 3800, August 2006 See Reverse for Instructions

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

COMPLETE THIS SECTION ON DELIVERY

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

1. Article Addressed to:

Petratis Oil & Gas Inc.
 1603 Holloway Ave
 Midland, TX 79701

2. Article Number (Transfer from service label) 1700612760000163821087

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature ☒ Agent ☐ Addressee
 X [Signature]
 B. Received by (Printed Name) C. Date of Delivery
 Neil Peterson 3/16/15
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6382 1100

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

For delivery information visit
OFFICIAL

MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

S.E.S. Oil & Gas Inc.
P.O. Box 371
Midland, TX 79701

USPS SANTA FE, NM 87594
 MAR 3 2015
 DE VARGAS POST OFFICE

for Instructions

7006 2760 0001 6382 1117

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

For delivery information visit
OFFICIAL

MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$ 1338

Stacey Hutcherson
112 Gainer Drive
Hutto, TX 78634

USPS SANTA FE, NM 87594
 MAR 3 2015
 DE VARGAS POST OFFICE

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:

S.E.S. Oil & Gas Inc.
P.O. Box 371
Midland, TX 79701

2. Article Number (Transfer from service label): 7006 2760 0001 6382 1100

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Stacey Hutcherson*

B. Received by (Printed Name): *Stacey Hutcherson*

C. Date of Delivery: *3-25-15*

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

3. Service Type:
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

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

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6382 0929

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No International Mail)
 For delivery information visit **OFFICIAL MAIL SERVICE**

MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669

Postmark
MAR 13 2015
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Wadi Petroleum Inc.
 4355 Sylvanfield Blvd
 Houston, TX 77014

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:

Wadi Petroleum Inc.
 4355 Sylvanfield Blvd
 Houston, TX 77014

2. Article Number (Transfer from service label) 7006 2760 0001 6382 0929

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) *L Caldwell* C. Date of Delivery *3-17-15*

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 0936

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No International Mail)
 For delivery information visit **OFFICIAL MAIL SERVICE**

MHF/COG
HALBERD 2H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	1069

Postmark
MAR 13 2015
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Ms. Michal Dedwylder, Trustee for
 the Larry S. Marcum & Gordon G.
 Marcum II Trust
 P.O. Box 2350
 Albany, TX 76430

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:

Ms. Michal Dedwylder, Trustee for
 the Larry S. Marcum & Gordon G.
 Marcum II Trust
 P.O. Box 2350
 Albany, TX 76430

2. Article Number (Transfer from service label) 7006 2760 0001 6382 0936

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) *MICHAL DEDWYLDER* C. Date of Delivery *3/19/15*

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 0998

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No MF/COG)
 For delivery information visit **HALBERD 2H**
OFFICIAL

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	220
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$

USPS SANTA FE, NM 87504
 Postmark Here
 MAR 13 2015
 DE VARGAS POST OFFICE

Cross Border Resources, Inc
 Attn: Matthew Barstow
 2515 McKinney, Ste 900
 Dallas, TX 75201

for Instructions

7006 2760 0001 6382 0998

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No MF/COG)
 For delivery information visit **HALBERD 2H**
OFFICIAL

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	220
Restricted Delivery Fee (Endorsement Required)	669

USPS SANTA FE, NM 87504
 Postmark Here
 MAR 13 2015
 DE VARGAS POST OFFICE

LRE Operating LLC
 1111 Bagby Street, Suite 4600
 Houston, TX 77002

for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

LRE Operating LLC
 1111 Bagby Street, Suite 4600
 Houston, TX 77002

2. Article Number (Transfer from service label)

7006 2760 0001 6382 0998

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Kelly Sachs

C. Date of Delivery 3-18-15

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 2013 Domestic Return Receipt