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

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

CASE NOS. 15332

AFFIDAVIT

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

Jordan L. Kessler, attorney in fact and authorized representative of COG Operating LLC, the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Applications were provided under the notice letters attached hereto.

Jordan L. Kessler

SUBSCRIBED AND SWORN to before this 8th day of July 2015 by Jordan L. Kessler.

OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO
My commission expires 01/14/19

Notary Public

BEFORE THE OIL CONVERSATION DIVISION
Santa Fe, New Mexico
Exhibit No. 5
Submitted by: COG OPERATING LLC
Hearing Date: July 9, 2015

HOLLAND&HART LLP

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

June 4, 2015

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS 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. Cookie Tosser 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 June 25, 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 Aaron Young, at (432) 221-0343 or ayoung@concho.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC

HOLLAND&HART LLP

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

June 4, 2015

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

Re: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico. Cookie Tosser 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 June 25, 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 Aaron Young, at (432) 221-0343 or ayoung@concho.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC

COG OPERATING LLC
COOKIE TOSSER STATE COM NO. 2H WELL

POOLED PARTIES:

EOG Resources, Inc.
PO Box 2267
Midland, TX 79702

OFFSETS:

Matador Production Company
5400 Lyndon B. Johnson Fwy
#1500
Dallas, TX 75240

Read & Stevens
PO Box 1518
Roswell, NM 88202

8 Way OG Inc.
P.O. Box 371
Midland, TX 79701

Anderson Oil Ltd.
5005 Woodway Dr., Suite 300
Houston, TX 77056

Avery, Rosemary T.
P.O. Box 3
Roswell, NM 88202

Chevron USA, Inc.
P.O. Box 730436
Dallas, TX 75373

Chevron USA, Inc
4508 N. Big Spring St
Midland, TX 79705

Chevron USA, Inc
1400 Smith St.
Houston, TX 77002

Crosby, SW III
P.O. Box 2346
Roswell, NM 88202

Diamond Head Prop
P.O. Box 2127
Midland, TX 79702

Edward R. Hudson Trust 4
616 Texas St
Ft. Worth, TX 76102

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

Estate of Josephine T. Hudson
616 Texas St
Ft. Worth, TX 76102

Explorers Petro Corp.
P.O. Box 1933
Roswell, NM 88202

Grover, Arden R.
P.O. Box 3666
Midland, TX 79702

Harvey E. Yates Co.
P.O. Box 1933
Roswell, NM 88202

Hudson, Edward R., Jr.
616 Texas St
Ft. Worth, TX 76102

Hudson, Lewis Delmar
616 Texas St
Ft. Worth, TX 76102

Lamb, Garland C.
3208 Maxwell
Midland, TX 79705

Lindy's Living Trust
Francis H. Hudson, Trustee,
4200 S. Hulen, Ste 302
Ft. Worth, TX 76109

Lindy's Living Trust
Francis H. Hudson, Trustee,
616 Texas St
Ft. Worth, TX 76102

Mewbourne Oil Co.
500 W. Texas Ave., Suite 1020
Midland, TX 79701

Nadel and Gussman Capitan LLC
15 East 5th Street, Suite 3200
Tulsa, OK 74103

COG OPERATING LLC
COOKIE TOSSER STATE COM NO. 2H WELL

Nadel and Gussman Capitan LLC
601 Marienfeld St. #508
Midland, TX 79701

Nadel and Gussman Heyco LLC
P.O. Box 1936
Roswell, NM 88202

Nadel and Gussman Heyco LLC
601 Marienfeld St. #508
Midland, TX 79701

Osborn, Calvin W.
RR 2 Box 48
Lovington, NM 88260

Redfern Oil Co.
P.O. Box 50890
Midland, TX 79710

Reeser, Wayne F.
1512 W. Aspen
Lovington, NM 88260

Spell Inc.
P.O. Box 50890
Midland, TX 79710

Spiral Inc.
P.O. Box 1933
Roswell, NM 88202

Stratco Operating Co. Inc.
400 Buckeye Trail
Austin, TX 78746

Withcer, Marvin D.
P.O. Box 1983
Midland, TX 79702

Yates Energy Corp.
P.O. Box 2323
Roswell, NM 88201

Yates US Inc.
P.O. Box 2323
Roswell, NM 88202

Zorro Partners Ltd.
616 Texas St
Ft. Worth, TX 76102

7014 1200 0001 1539 3629

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

For delivery information visit OFFIC

MHF/COG
COOKIE TOSSER 2H

Postage	$
Certified Fee	3.45
Return Receipt Fee (Endorsement Required)	2.80
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

USPS SANTA FE, NM 87594 JUN - 4 2015 Postmark Here DE VARGAS POST OFFICE

Sent To
Street, A
or PO Bo
City, Sta

EOG Resources, Inc.
PO Box 2267
Midland, TX 79702

PS Form ... Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

EOG Resources, Inc.
PO Box 2267
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by *(Printed Name)* J Berry C. Date of Delivery 6-9-15

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

2. Article Number *(Transfer from service label)* 7014 1200 0001 1539 3629

PS Form 3811, July 2013 Domestic Return Receipt

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

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

MHF/COG
COOKIE TOSSER 2H

OFFICIAL USE

Postage	$
Certified Fee	3.45
Return Receipt Fee (Endorsement Required)	2.80
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here
USPS SANTA FE, NM 87594
JUN - 4 2015
DE VARGAS POST OFFICE

Sent To
Matador Production Company
Street, Apt. No., or PO Box No.
5400 Lyndon B. Johnson Fwy
#1500
City, State, ZIP+4
Dallas, TX 75240

PS Form 3800, August 2006 See Reverse for Instructions

7014 1200 0001 1539 3636

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:

Matador Production Company
5400 Lyndon B. Johnson Fwy
#1500
Dallas, TX 75240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 6/8/15

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

2. Article Number *(Transfer from service label)* 7014 1200 0001 1539 3636

PS Form 3811, July 2013 Domestic Return Receipt

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

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

MHF/COG
COOKIE TOSSER 2H

OFFICIAL USE

Postage	$
Certified Fee	3.45
Return Receipt Fee (Endorsement Required)	2.80
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here
USPS SANTA FE, NM 87594
JUN - 4 2015
DE VARGAS POST OFFICE

Sent To
Read & Stevens
Street, Apt. No., or PO Box No.
PO Box 1518
City, State, ZIP+4
Roswell, NM 88202

PS Form 3800, August 2006 See Reverse for Instructions

7014 1200 0001 1539 3643

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Read & Stevens
PO Box 1518
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

USPS ROSWELL, NM JUN 10 2015

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7014 1200 0001 1539 3643

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3520

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

For delivery information visi

MHF/COG
COOKIE TOSSER 2H

OFFIC

Postage	$
Certified Fee	3.45
Return Receipt Fee (Endorsement Required)	2.80
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

USPS SANTA FE, NM 87594 — Postmark Here — JUN - 2015 — DE VARGAS POST OFFICE

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

8 Way OG Inc.
P.O. Box 371
Midland, TX 79701

PS Form 380

7014 1200 0001 1539 3537

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

For delivery information vi

MHF/COG
COOKIE TOSSER 2H

HOUSTON TX 770

Postage	$ $3.45
Certified Fee	$3.45
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
Total Postage & Fees	$0.71
	$4.16

0496 — SANTA FE, NM 87594 — 07 Jun 2015 Postmark Here — 06/05/2015 POST OFFICE

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

Anderson Oil Ltd.
5005 Woodway Dr., Suite 300
Houston, TX 77056

PS Form 380 — 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:

8 Way OG Inc.
P.O. Box 371
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature — Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery 6-12-15

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

2. Article Number *(Transfer from service label)* 7014 1200 0001 1539 3520

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:

Anderson Oil Ltd.
5005 Woodway Dr., Suite 300
Houston, TX 77056

COMPLETE THIS SECTION ON DELIVERY

A. Signature — Agent ☐ Addressee

B. Received by (Printed Name) Deb Yorek — C. Date of Delivery 6-9-15

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

2. Article Number *(Transfer from service label)* 7014 1200 0001 1539 3537

PS Form 3811, July 2013 — Domestic Return Receipt

7014 1200 0001 1539 3544

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

MHF/COG
COOKIE TOSSER 2H

For delivery information vis

ROSWELL NM 88202

OFFICIAL USE

Postage	$	$3.45
Certified Fee		$2.45
Return Receipt Fee (Endorsement Required)		$0.00 $2.80
Restricted Delivery Fee (Endorsement Required)		N/A N/A
Total Post		$0.71 $4.16

USPS SANTA FE, NM 87594
07 JUN 2015 Postmark Here
06/04/2015
POST OFFICE

Sent To
Avery, Rosemary T.
Street, Apt. or PO Box
P.O. Box 3
City, State,
Roswell, NM 88202

PS Form 3

7014 1200 0001 1539 3551

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

MHF/COG
COOKIE TOSSER 2H

For delivery information

DALLAS TX 75373

OFFICIAL USE

Postage	$	$3.45
Certified Fee		$2.45
Return Receipt Fee (Endorsement Required)		$0.00 $2.80
Restricted Delivery Fee (Endorsement Required)		N/A N/A
Total Postage & Fees		$0.71 $4.16

USPS SANTA FE, NM 87594
Postmark Here
JUN 2 2015
06/04/2015
POST OFFICE

Sent To
Chevron USA, Inc.
Street, Apt. or PO Box
P.O. Box 730436
City, State,
Dallas, TX 75373

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:

Chevron USA, Inc.
P.O. Box 730436
Dallas, TX 75373

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received (Printed Name) Chris Thornquist C. Date of Delivery JUN 09 2015

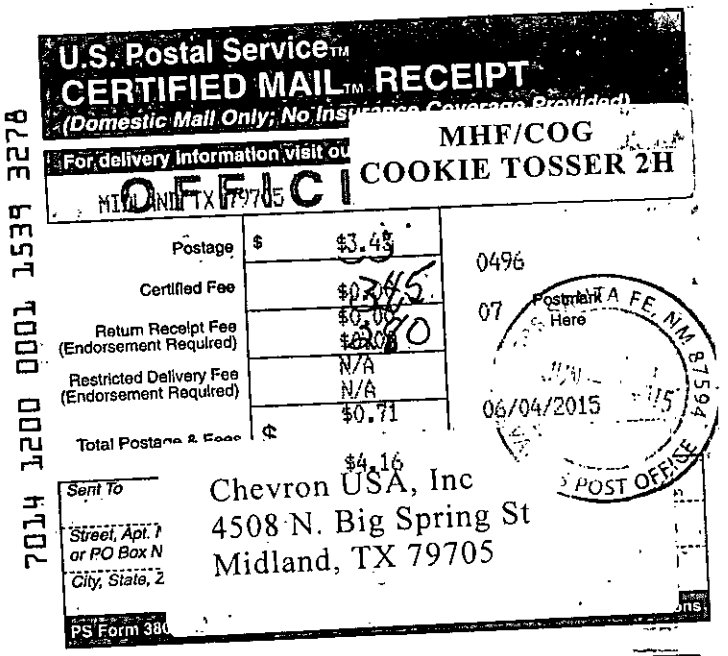
D. Is delivery address different from item 1? ☑ Yes
If YES, enter delivery address below: ☐ No

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3551

PS Form 3811, July 2013 Domestic Return Receipt



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com
MIDLAND TX 79705
OFFICIAL USE

Postage	$	$3.45
Certified Fee		$0.345
Return Receipt Fee (Endorsement Required)		$0.280
Restricted Delivery Fee (Endorsement Required)		N/A
Total Postage & Fees	$	$0.71
		$4.16

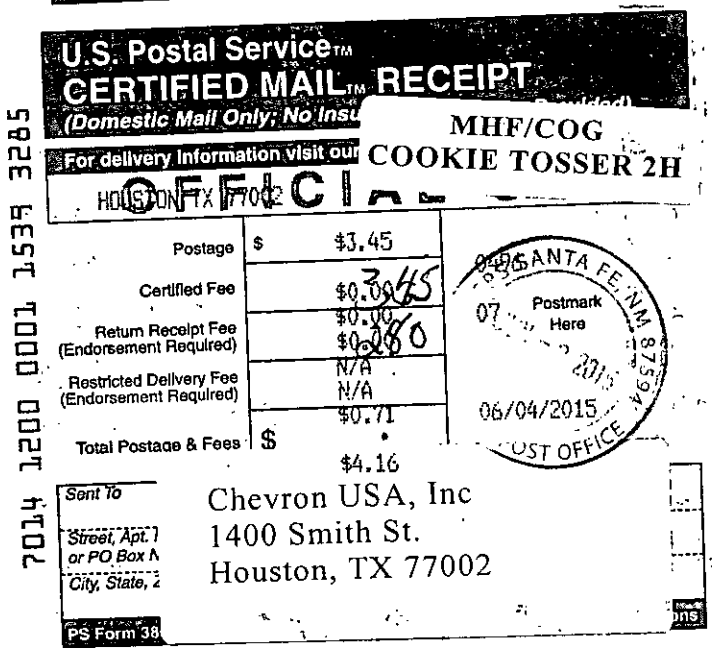
MHF/COG
COOKIE TOSSER 2H

0496
07
Postmark Here
SANTA FE, NM 87594
06/04/2015
POST OFFICE

Sent To
Chevron USA, Inc
Street, Apt. No., or PO Box No.
4508 N. Big Spring St
City, State, ZIP+4
Midland, TX 79705

PS Form 3800

7014 1200 0001 1539 3278



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com
HOUSTON TX 77002
OFFICIAL USE

Postage	$	$3.45
Certified Fee		$0.345
Return Receipt Fee (Endorsement Required)		$0.280
Restricted Delivery Fee (Endorsement Required)		N/A
Total Postage & Fees	$	$0.71
		$4.16

MHF/COG
COOKIE TOSSER 2H

0496
07
Postmark Here
SANTA FE, NM 87594
06/04/2015
POST OFFICE

Sent To
Chevron USA, Inc
Street, Apt. No., or PO Box No.
1400 Smith St.
City, State, ZIP+4
Houston, TX 77002

PS Form 3800

7014 1200 0001 1539 3285

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
4508 N. Big Spring St
Midland, TX 79705

A. Signature
X Rose Colligan
☐ Agent
☐ Addressee

B. Received by (Printed Name) ROSE COLLIGAN
C. Date of Delivery 6-15-15

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

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3278

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:

Chevron USA, Inc
1400 Smith St.
Houston, TX 77002

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3285

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3292

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

For delivery information visit

MHF/COG
COOKIE TOSSER 2H

OFFICIAL USE

Postage	$ $3.45
Certified Fee	$0.3455
Return Receipt Fee (Endorsement Required)	$0.0880
Restricted Delivery Fee (Endorsement Required)	N/A
	N/A
Total Postage & Fees	$0.71
	$4.16

0496
07 Postmark Here 2015
06/04/2015

Sent To
Crosby, SW III
Street, or PO E
P.O. Box 2346
City, St
Roswell, NM 88202

PS Form

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:

Crosby, SW III
P.O. Box 2346
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) S. CROSBY
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

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3292

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3308

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

For delivery information visit

MHF/COG
COOKIE TOSSER 2H

OFFICIAL USE

Postage	$ $3.45
Certified Fee	$0.3455
Return Receipt Fee (Endorsement Required)	$0.0880
Restricted Delivery Fee (Endorsement Required)	N/A
	N/A
Total Postage & Fees	$0.71
	$4.16

0496
07 Postmark Here
06/04/2015

Sent To
Diamond Head Prop
Street, Ap
P.O. Box 2127
City, State
Midland, TX 79702

PS Form

See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Diamond Head Prop
P.O. Box 2127
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) ELAINE E-LOVE
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

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3308

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3315

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

MHF/COG
COOKIE TOSSER 2H

For delivery information vi
FORT WORTH TX 76102
OFFICE

Postage	$ $3.45
Certified Fee	$3.30
Return Receipt Fee (Endorsement Required)	$2.70
Restricted Delivery Fee (Endorsement Required)	N/A
	N/A
	$0.71
Total Pos	$4.16

USPS SANTA FE, NM 87504
Postmark Here
JUN 2 2015
06/04/2015
POST OFFICE

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

Edward R. Hudson Trust 4
616 Texas St
Ft. Worth, TX 76102

PS Form 3800, August 2006

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Edward R. Hudson Trust 4
616 Texas St
Ft. Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Staci Gilberg
C. Date of Delivery 6-15

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

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3315

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3322

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

MHF/COG
COOKIE TOSSER 2H

For delivery information visi
MIDLAND TX 79706
OFFICE

Postage	$ $3.45
Certified Fee	$3.30
Return Receipt Fee (Endorsement Required)	$2.70
Restricted Delivery Fee (Endorsement Required)	N/A
	N/A
	$0.71
Total Postr	$4.16

USPS SANTA FE, NM 87504
Postmark Here
JUN 2 2015
06/04/2015
POST OFFICE

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

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

PS Form 3800, August 2006

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

COMPLETE THIS SECTION ON DELIVERY

A. Signature
[signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) C Berry
C. Date of Delivery 6-9-15

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

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3322

PS Form 3811, July 2013 Domestic Return Receipt

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

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

FORT WORTH TX 76102

MHF/COG
COOKIE TOSSER 2H

OFFICE

Postage	$3.45
Certified Fee	$3.05
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
Total Postage & Fees	$0.71
	$4.16

USPS SANTA FE, NM 87594
Postmark Here
07 JUN 2015
DEVARGAS POST OFFICE
06/04/2015

Sent To: Estate of Josephine T. Hudson
Street, Apt. or PO Box: 616 Texas St
City, State: Ft. Worth, TX 76102

PS Form 3800, August 2006 — See Reverse for Instructions

7014 1200 0001 1539 3339

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

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

ROSWELL NM 88202

MHF/COG
COOKIE TOSSER 2H

OFFICE

Postage	$3.45
Certified Fee	$3.05
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
Total Postage & Fees	$0.71
	$4.16

USPS SANTA FE, NM 87594
Postmark Here
02 JUN 2015
DEVARGAS POST OFFICE
06/04/2015

Sent To: Explorers Petro Corp.
Street, Apt. or PO Box: P.O. Box 1933
City, State: Roswell, NM 88202

PS Form 3800, August 2006 — See Reverse for Instructions

7014 1200 0001 1539 3346

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Estate of Josephine T. Hudson
616 Texas St
Ft. Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Stacy Gilberg ☒ Agent ☐ Addressee

B. Received by (Printed Name) Stacy Gilberg C. Date of Delivery 6/5

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

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3339

PS Form 3811, July 2013 Domestic Return Receipt

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Explorers Petro Corp.
P.O. Box 1933
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

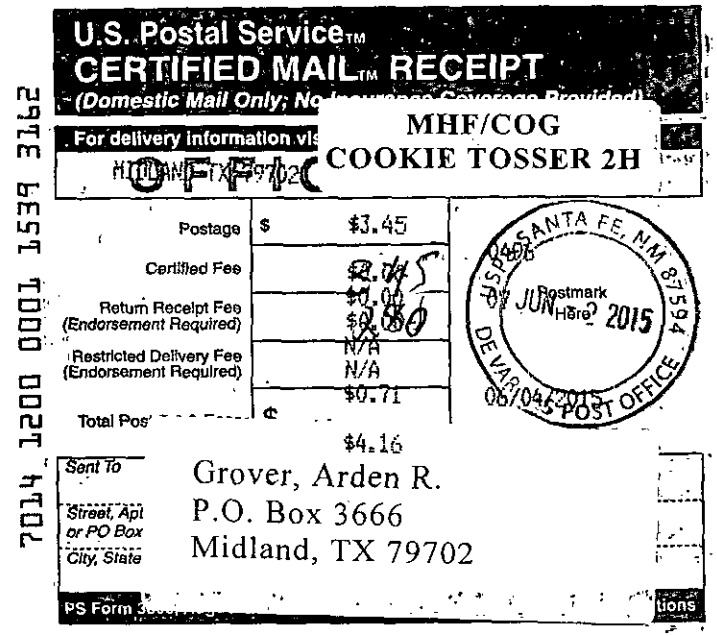
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3346

PS Form 3811, July 2013 Domestic Return Receipt



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com
MIDLAND TX 79702
OFFICIAL USE

Postage	$ $3.45
Certified Fee	$2.95
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
Total Postage & Fees	$0.71
	$4.16

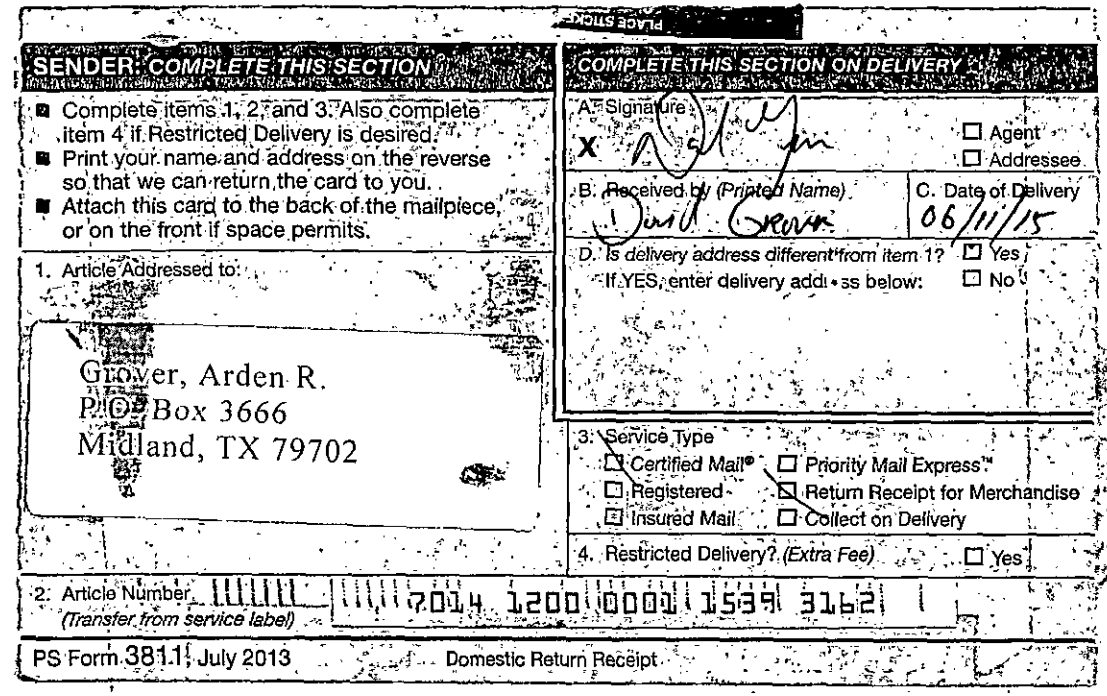
MHF/COG
COOKIE TOSSER 2H

USPS SANTA FE, NM 87594
Postmark Here
JUN 2015
06/04/2015
DEVARCOS POST OFFICE

Sent To: Grover, Arden R.
Street, Apt. or PO Box: P.O. Box 3666
City, State: Midland, TX 79702

PS Form 3800, August 2006 ... ions

7014 1200 0001 1539 3162



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:
Grover, Arden R.
P.O. Box 3666
Midland, TX 79702

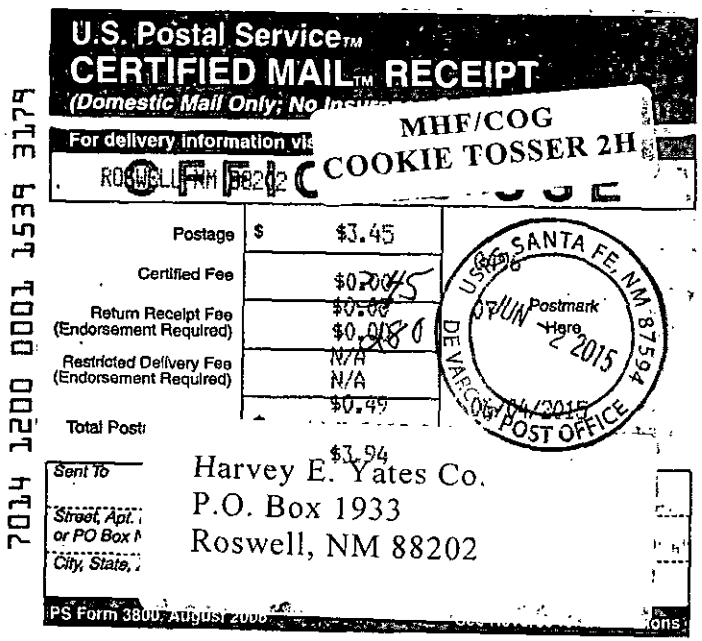
COMPLETE THIS SECTION ON DELIVERY
A. Signature: X ☐ Agent ☐ Addressee
B. Received by (Printed Name) | C. Date of Delivery: 06/11/15
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7014 1200 0001 1539 3162

PS Form 3811, July 2013 Domestic Return Receipt



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com
ROSWELL NM 88202
OFFICIAL USE

Postage	$ $3.45
Certified Fee	$2.95
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
Total Postage & Fees	$0.49
	$3.94

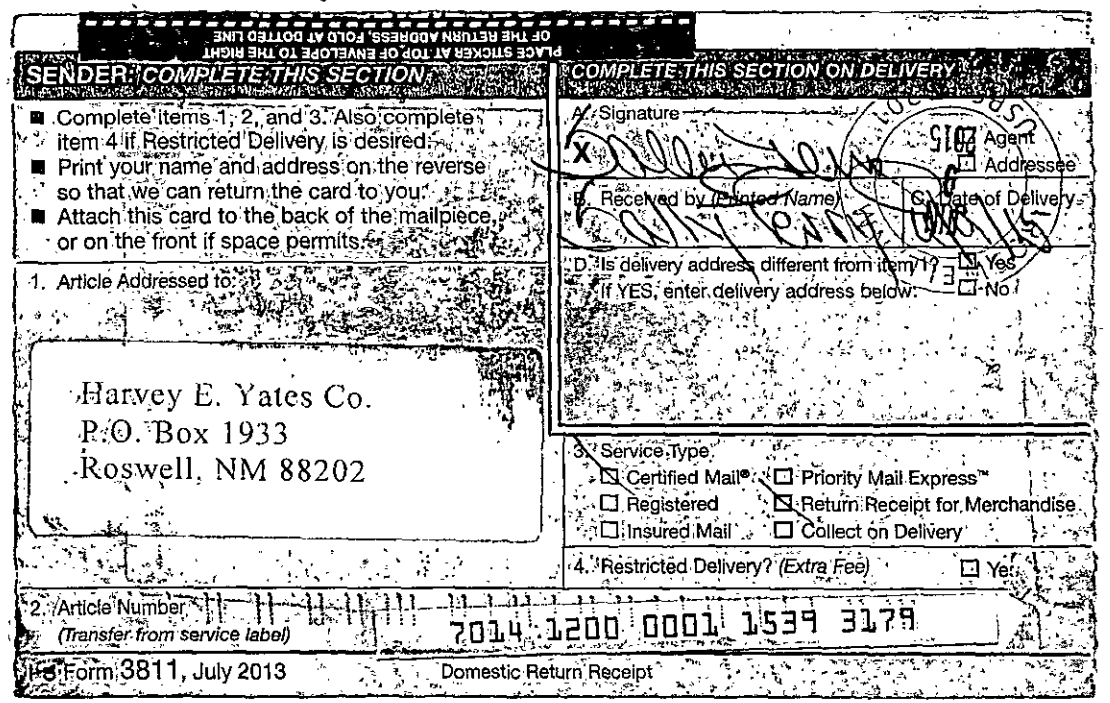
MHF/COG
COOKIE TOSSER 2H

USPS SANTA FE, NM 87594
Postmark Here
JUN 2015
06/04/2015
DEVARCOS POST OFFICE

Sent To: Harvey E. Yates Co.
Street, Apt. or PO Box: P.O. Box 1933
City, State: Roswell, NM 88202

PS Form 3800, August 2006 ... ions

7014 1200 0001 1539 3179



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

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

1. Article Addressed to:
Harvey E. Yates Co.
P.O. Box 1933
Roswell, NM 88202

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7014 1200 0001 1539 3179

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3445

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

For delivery information visit our website at www.usps.com
FORT WORTH TX 76102

MHF/COG
COOKIE TOSSER 2H

OFFICIAL

Postage	$ $3.45
Certified Fee	$3.45
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
	$0.71
Total Postage & Fees	$ $4.16

USPS SANTA FE, NM 87594
JUN Postmark Here 2015
DE VARGAS POST OFFICE
06/04/2015

Sent To: Hudson, Edward R., Jr.
Street, Apt. No., or PO Box No.: 616 Texas St
City, State, ZIP+4: Ft. Worth, TX 76102

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:

Hudson, Edward R., Jr.
616 Texas St
Ft. Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Staci Gilbert ☑ Agent ☐ Addressee

B. Received by (Printed Name): Staci Gilbert
C. Date of Delivery: JUN 08 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

2. Article Number (Transfer from service label): 7014 1200 0001 1539 3445

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3452

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For delivery information visit our website at www.usps.com
FORT WORTH TX 76102

MHF/COG
COOKIE TOSSER 2H

OFFICIAL

Postage	$ $3.45
Certified Fee	$3.45
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
	$0.71
Total Postage & Fees	$ $4.16

USPS SANTA FE, NM 87594
Postmark Here 2015
DE VARGAS POST OFFICE
06/04/2015

Sent To: Hudson, Lewis Delmar
Street, Apt. No., or PO Box No.: 616 Texas St
City, State, ZIP+4: Ft. Worth, TX 76102

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:

Hudson, Lewis Delmar
616 Texas St
Ft. Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Staci Gilbert ☑ Agent ☐ Addressee

B. Received by (Printed Name): Staci Gilbert
C. Date of Delivery: JUN 08 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

2. Article Number (Transfer from service label): 7014 1200 0001 1539 3452

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3469

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(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit MIDLAND TX 79705

MHF/COG
COOKIE TOSSER 2H

OFFICIAL

Postage	$3.45
Certified Fee	$2.95
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
	$0.71
Total F	$4.16

USPS SANTA FE, NM 87594
Postmark Here
07JUN 2015
DE VA 06/04/2015 POST OFFICE

Sent To: Lamb, Garland C.
Street, or PO E: 3208 Maxwell
City, St: Midland, TX 79705

PS Form 3800, August 2006 ... ructions

7014 1200 0001 1539 3476

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit FORT WORTH TX 76109

MHF/COG
COOKIE TOSSER 2H

OFFICIAL

Postage	$3.45
Certified Fee	$2.95
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
	$0.71
Total Postage & Fees	$9.91

USPS SANTA FE, NM 87594
Postmark Here
2 2015
06/04/2015 POST OFFICE

Sent To: Lindy's Living Trust
Francis H. Hudson, Trustee,
Street, or PO E: 4200 S. Hulen, Ste 302
City, St: Ft. Worth, TX 76109

PS Form ... ructions

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:

Lindy's Living Trust
Francis H. Hudson, Trustee,
4200 S. Hulen, Ste 302
Ft. Worth, TX 76109

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) TANYA STOUT C. Date of Delivery 6-8-15

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

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3476

PS Form 3811, July 2013 Domestic Return Receipt

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(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

MHF/COG
COOKIE TOSSER 2H

Postage	$3.45
Certified Fee	$2.95
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
Total Postage & Fees	$9.21

USPS SANTA FE, NM 87594
JUN 2015
Postmark Here
DE VARGAS POST OFFICE
06/04/2015

Sent To: Lindy's Living Trust
Street, Apt. No., or PO Box No.: Francis H. Hudson, Trustee, 616 Texas St
City, State, ZIP+4: Ft. Worth, TX 76102

PS Form 3800, August 2006 See Reverse for Instructions

7014 1200 0001 1539 3360

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:

Lindy's Living Trust
Francis H. Hudson, Trustee,
616 Texas St
Ft. Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Staci E. Hudson ☐ Agent ☐ Addressee

B. Received by (Printed Name) Staci Gilberg C. Date of Delivery JUN 08 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

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3360

PS Form 3811, July 2013 Domestic Return Receipt

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

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

MIDLAND TX 79701

OFFICIAL USE

MHF/COG
COOKIE TOSSER 2H

Postage	$3.45
Certified Fee	$2.95
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
Total Postage & Fees	$9.21

USPS SANTA FE, NM 87594
JUN 2015
Postmark Here
DE VARGAS POST OFFICE
06/04/2015

Sent To: Mewbourne Oil Co.
Street, Apt. No., or PO Box No.: 500 W. Texas Ave., Suite 1020
City, State, ZIP+4: Midland, TX 79701

PS Form 3800, August 2006 See Reverse for Instructions

7014 1200 0001 1539 3377

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mewbourne Oil Co.
500 W. Texas Ave., Suite 1020
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

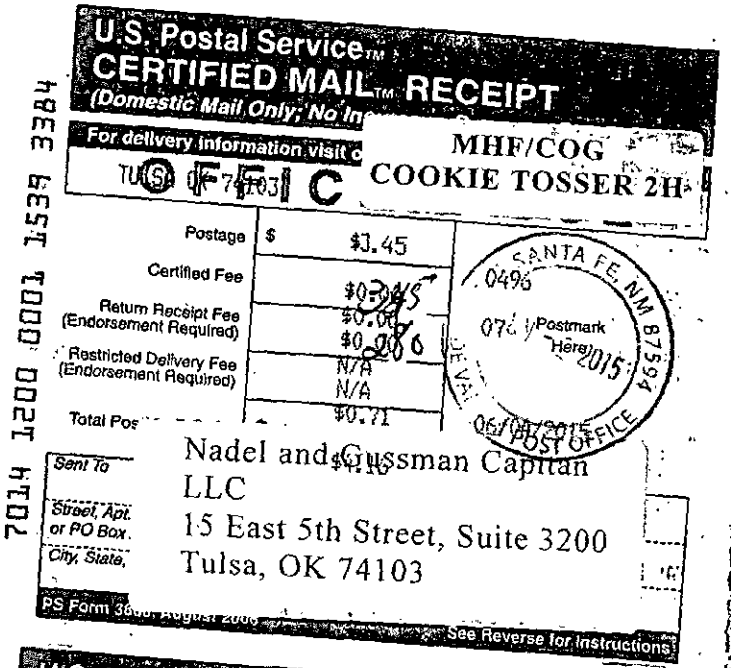
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

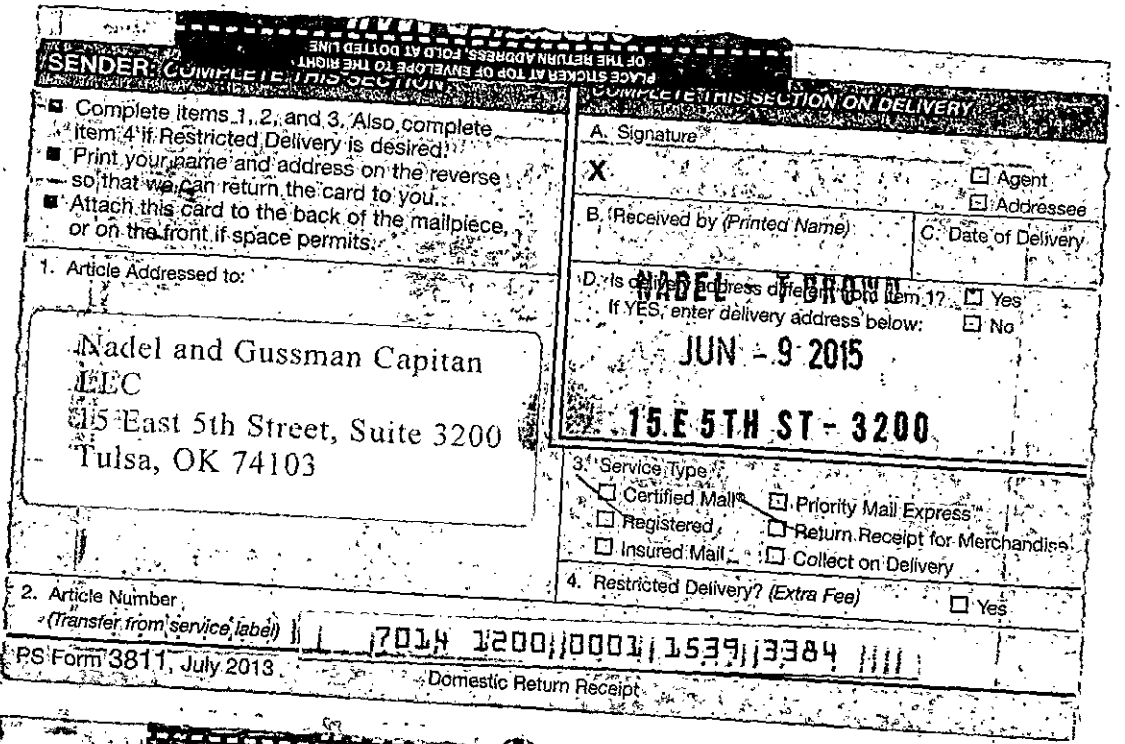
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3377

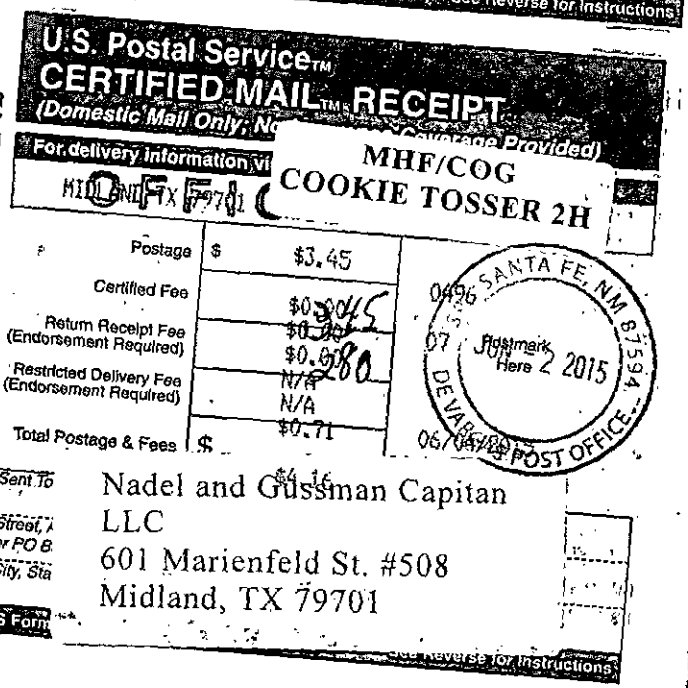
PS Form 3811, July 2013 Domestic Return Receipt



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com
MHF/COG
COOKIE TOSSER 2H
OFFICIAL USE
Postage $3.45
Certified Fee $3.45
Return Receipt Fee (Endorsement Required) $0.00
Restricted Delivery Fee (Endorsement Required) N/A
Total Postage & Fees $0.71
SANTA FE, NM 87594
0496
07 Postmark Here 2015
06/04/2015
POST OFFICE
Sent To Nadel and Gussman Capitan LLC
Street, Apt. or PO Box 15 East 5th Street, Suite 3200
City, State, Tulsa, OK 74103
PS Form 3800, August 2006 See Reverse for Instructions
7014 1200 0001 1539 3384



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:
Nadel and Gussman Capitan LLC
15 East 5th Street, Suite 3200
Tulsa, OK 74103
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
JUN - 9 2015
15 E 5TH ST - 3200
3. Service Type
Certified Mail® Priority Mail Express™
Registered Return Receipt for Merchandise
Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7014 1200 0001 1539 3384
PS Form 3811, July 2013 Domestic Return Receipt



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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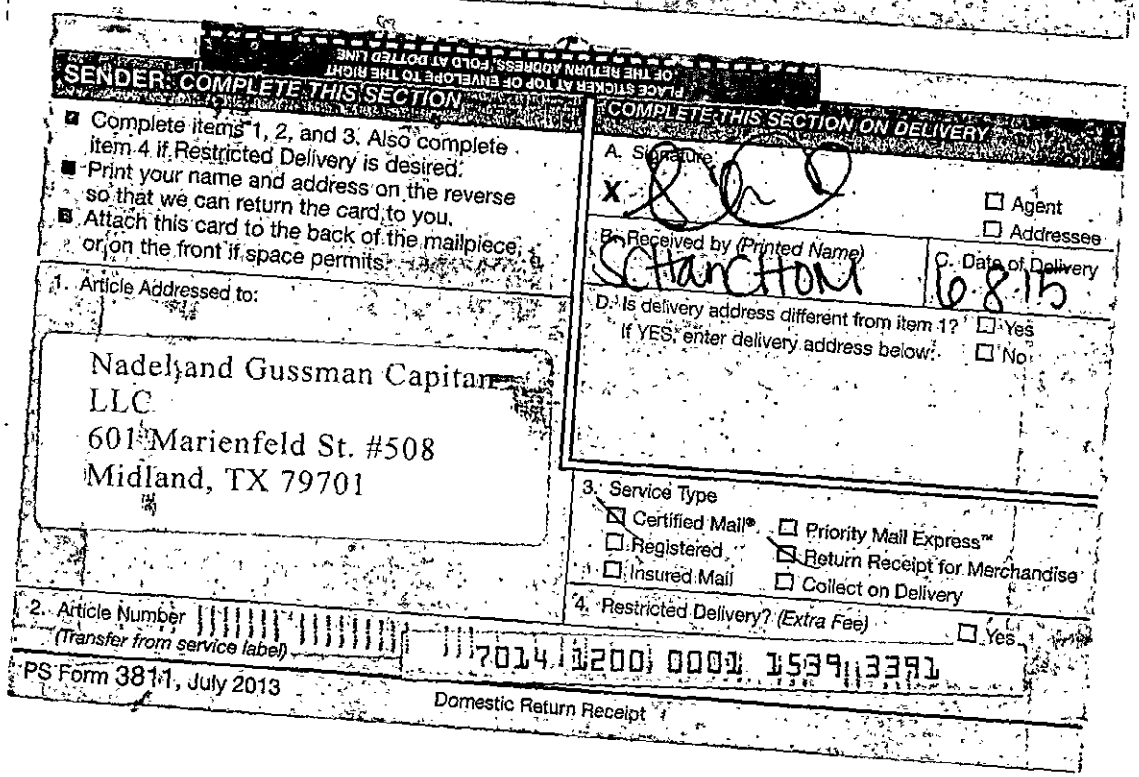
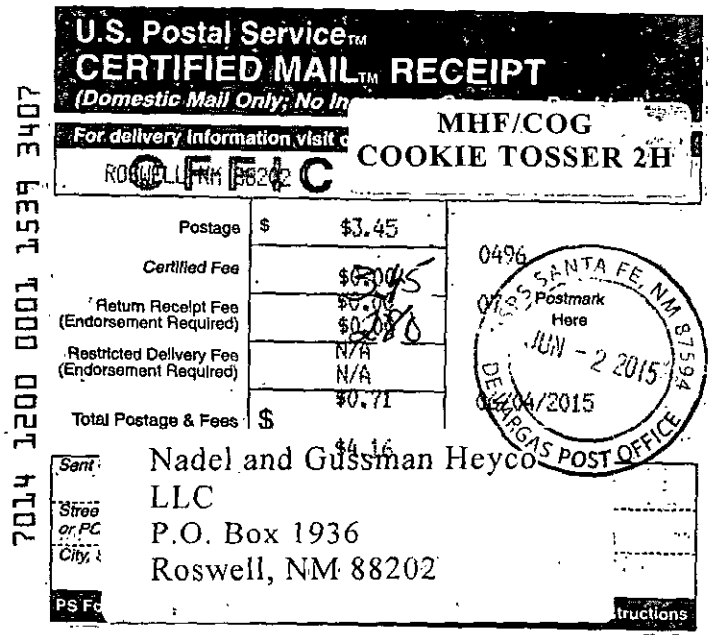
For delivery information visit our website at www.usps.com
MHF/COG
COOKIE TOSSER 2H
OFFICIAL USE
Postage $3.45
Certified Fee $3.45
Return Receipt Fee (Endorsement Required) $0.00
Restricted Delivery Fee (Endorsement Required) N/A
Total Postage & Fees $0.71
SANTA FE, NM 87594
0496
07 Postmark Here JUN 2 2015
06/04/2015
POST OFFICE
Sent To Nadel and Gussman Capitan LLC
Street, Apt. or PO Box 601 Marienfeld St. #508
City, State, Midland, TX 79701
PS Form 3800, August 2006 See Reverse for Instructions
7014 1200 0001 1539 3391



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:
Nadel and Gussman Capitan LLC
601 Marienfeld St. #508
Midland, TX 79701
COMPLETE THIS SECTION ON DELIVERY
A. Signature
X
Agent
Addressee
B. Received by (Printed Name) S Stanchfield
C. Date of Delivery 6.8.15
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
2. Article Number (Transfer from service label) 7014 1200 0001 1539 3391
PS Form 3811, July 2013 Domestic Return Receipt



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In
For delivery information visit
ROSWELL NM 88202
OFFICIAL USE
MHF/COG
COOKIE TOSSER 2H

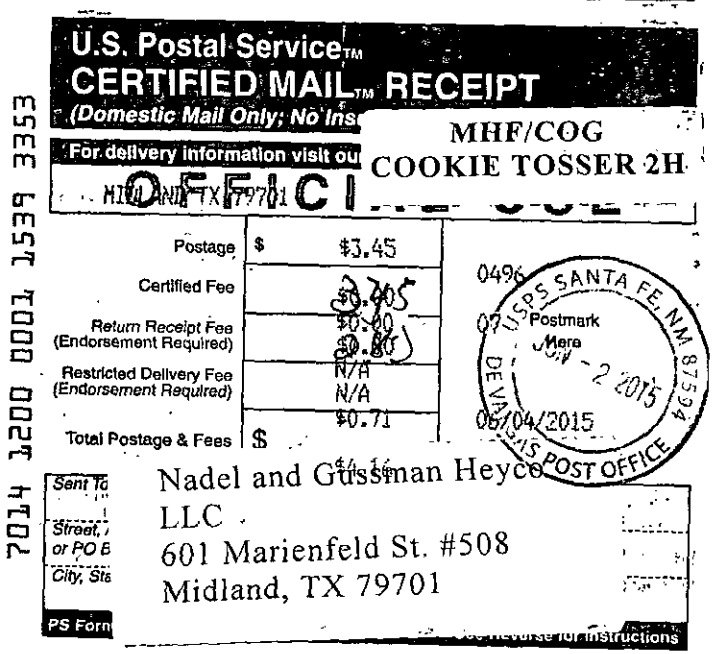
Postage	$	$3.45
Certified Fee		$3.005
Return Receipt Fee (Endorsement Required)		$0.00 $2.80
Restricted Delivery Fee (Endorsement Required)		N/A N/A
Total Postage & Fees	$	$0.71 $4.16

0496 07 USPS SANTA FE, NM 87594 Postmark Here JUN - 2 2015 06/04/2015 DEVARGAS POST OFFICE

Sent
Stree
or PC
City,
PS Fo
tructions

Nadel and Gussman Heyco
LLC
P.O. Box 1936
Roswell, NM 88202

7014 1200 0001 1539 3407



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Ins
For delivery information visit ou
MIDLAND TX 79701
OFFICIAL USE
MHF/COG
COOKIE TOSSER 2H

Postage	$	$3.45
Certified Fee		$3.005
Return Receipt Fee (Endorsement Required)		$0.00 $2.80
Restricted Delivery Fee (Endorsement Required)		N/A N/A
Total Postage & Fees	$	$0.71

0496 07 USPS SANTA FE, NM 87594 Postmark Here JUN - 2 2015 06/04/2015 DEVARGAS POST OFFICE

Sent To
Street,
or PO B
City, Sta
PS Form
See Reverse for Instructions

Nadel and Gussman Heyco
LLC
601 Marienfeld St. #508
Midland, TX 79701

7014 1200 0001 1539 3353

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:

Nadel and Gussman Heyco
LLC
P.O. Box 1936
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
[illegible] 6.8.15

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

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3407

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:

Nadel and Gussman Heyco
LLC
601 Marienfeld St. #508
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
SChanctom 6.8.15

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

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3353

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3568

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

MHF/COG
COOKIE TOSSER 2H

For delivery information visit
LOVINGTON NM 88260
OFFIC

Postage	$ $3.45
Certified Fee	$3.05
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
Total	$0.71 $4.16

FE, NM 87594
0496
07 Postmark Here JUN 2015
DE VARGAS POST OFFICE
06/04/2015

Sent To: Osborn, Calvin W.
Street, or PO I: RR 2 Box 48
City, St: Lovington, NM 88260

PS For ... ructions

7014 1200 0001 1539 3575

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

MHF/COG
COOKIE TOSSER 2H

For delivery information visit
MIDLAND TX 79710
OFFIC

Postage	$ $3.45
Certified Fee	$3.05
Return Receipt Fee (Endorsement Required)	$2.80
Restricted Delivery Fee (Endorsement Required)	N/A
Total	$0.71 $4.16

FE, NM 87594
0496
07 Postmark Here JUN 2 2015
DE VARGAS POST OFFICE
06/04/2015

Sent To: Redfern Oil Co.
Street, or PO I: P.O. Box 50890
City, St: Midland, TX 79710

PS For ... See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Osborn, Calvin W.
RR 2 Box 48
Lovington, NM 88260

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X C.W. Osborn ☐ 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

2. Article Number *(Transfer from service label)* 7014 1200 0001 1539 3568

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3582

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

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

LOVINGTON NM 88260

MHF/COG
COOKIE TOSSER 2H

OFFICIAL USE

Postage	$ $3.45
Certified Fee	$3.45
Return Receipt Fee (Endorsement Required)	$0.00
Restricted Delivery Fee (Endorsement Required)	N/A
Total Postage & Fees	$ $4.16

USPS SANTA FE, NM 87594 0496 03 JUN -2 2015 Postmark Here
DEC 04 2015 POST OFFICE

Sent To: Reeser, Wayne F.
Street, Apt. No., or PO Box No.: 1512 W. Aspen
City, State, ZIP+4: Lovington, NM 88260

PS Form 3800, August 2006 See Reverse for Instructions

7014 1200 0001 1539 3490

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

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

MIDLAND TX 79710

MHF/COG
COOKIE TOSSER 2H

OFFICIAL USE

Postage	$ $3.45
Certified Fee	$3.45
Return Receipt Fee (Endorsement Required)	$0.00
Restricted Delivery Fee (Endorsement Required)	N/A
Total Postage & Fees	$ $4.16

USPS SANTA FE, NM 87594 0496 07 JUN 2 2015 Postmark Here
DEC 04 2015 POST OFFICE

Sent To: Spell Inc.
Street, Apt. No., or PO Box No.: P.O. Box 50890
City, State, ZIP+4: Midland, TX 79710

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:

Reeser, Wayne F.
1512 W. Aspen
Lovington, NM 88260

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3582

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3506

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

For delivery information visit ROSWELL NM 88202 OFFICE

MHF/COG
COOKIE TOSSER 2H

Postage	$ $3.45
Certified Fee	$2.95
Return Receipt Fee (Endorsement Required)	$0.00
Restricted Delivery Fee (Endorsement Required)	$2.80 N/A
Total Postage & Fees	N/A $0.71
	$4.16

Postmark Here JUN 2 2015 USPS SANTA FE, NM 87501 DE VARGAS POST OFFICE
06/04/2015

Sent To: Spiral Inc.
Street, Apt. No. or PO Box No.: P.O. Box 1933
City, State, ZIP+4: Roswell, NM 88202

PS Form 3800, August 2006 — See Reverse for Instructions

7014 1200 0001 1539 3513

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

For delivery information visit AUSTIN TX 78746 OFFICE

MHF/COG
COOKIE TOSSER 2H

Postage	$ $3.45
Certified Fee	$2.95
Return Receipt Fee (Endorsement Required)	$0.00
Restricted Delivery Fee (Endorsement Required)	$2.80 N/A
Total Postage & Fees	N/A $0.71
	$4.16

0496 07 Postmark Here JUN - 2 2015 DE VARGAS POST OFFICE SANTA FE, NM 87501
06/04/2015

Sent To: Stratco Operating Co. Inc.
Street, Apt. No. or PO Box No.: 400 Buckeye Trail
City, State, ZIP+4: Austin, TX 78746

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:

Spiral Inc.
P.O. Box 1933
Roswell, NM 88202

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7014 1200 0001 1539 3506

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:

Stratco Operating Co. Inc.
400 Buckeye Trail
Austin, TX 78746

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☑ Addressee

B. Received by (Printed Name) C. Date of Delivery 6/15/15

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

2. Article Number *(Transfer from service label)* 7014 1200 0001 1539 3513

PS Form 3811, July 2013 Domestic Return Receipt

Returned

7014 1200 0001 1539 3483

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

MHF/COG
COOKIE TOSSER 2H

For delivery information visit our website at www.usps.com®
MIDLAND TX 79702 OFFICIAL USE

Postage	$ $3.45
Certified Fee	$3.45
Return Receipt Fee (Endorsement Required)	$0.00 $2.80
Restricted Delivery Fee (Endorsement Required)	N/A N/A
Total Postage & Fees	$ $0.71 $4.16

0496 07 USPS SANTA FE, NM 87594 DE VARGAS POST OFFICE Postmark Here JUN - 2 2015 06/04/2015

Sent To
Street, Apt. No., or PO Box
City, State, ZIP+4

Withcer, Marvin D.
P.O. Box 1983
Midland, TX 79702

PS Form 3800, August 2006 See Reverse for Instructions

7014 1200 0001 1539 3414

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

MHF/COG
COOKIE TOSSER 2H

For delivery information visit our website at www.usps.com®
ROSWELL NM 88201 OFFICIAL USE

Postage	$ $3.45
Certified Fee	$3.45
Return Receipt Fee (Endorsement Required)	$0.00 $2.80
Restricted Delivery Fee (Endorsement Required)	N/A N/A
Total Postage & Fees	$ $0.71 $4.16

0496 07 USPS SANTA FE, NM 87594 DE VARGAS POST OFFICE Postmark Here JUN - 2 2015 06/04/2015

Sent To
Street, Apt. No., or PO Box
City, State, ZIP+4

Yates Energy Corp.
P.O. Box 2323
Roswell, NM 88201

PS Form 3800, August 2006 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Yates Energy Corp.
P.O. Box 2323
Roswell, NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Pat Escalante ☐ Agent ☐ Addressee

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

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

RECEIVED JUN 10 2015 88201

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3414

PS Form 3811, July 2013 Domestic Return Receipt

7014 1200 0001 1539 3421

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

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

ROSWELL, NM 88202

OFFICIAL USE

MHF/COG
COOKIE TOSSER 2H

Postage	$ $3.45
Certified Fee	$3.45
Return Receipt Fee (Endorsement Required)	$0.00 $2.80
Restricted Delivery Fee (Endorsement Required)	N/A
Total Postage & Fees	$0.71
	$ $4.16

USPS SANTA FE, NM 87594 0496 JUL 07 Postmark Here 2015 POST OFFICE 06/04/2015

Sent To: Yates US Inc.
Street, Apt. No., or PO Box No.: P.O. Box 2323
City, State, ZIP+4®: Roswell, NM 88202

PS Form 3800, August 2006 See Reverse for Instructions

7014 1200 0001 1539 3438

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

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

FORT WORTH, TX 76102

OFFICIAL USE

MHF/COG
COOKIE TOSSER 2H

Postage	$ $3.45
Certified Fee	$3.45
Return Receipt Fee (Endorsement Required)	$0.00 $2.80
Restricted Delivery Fee (Endorsement Required)	N/A
Total Postage & Fees	$0.71
	$ $4.16

USPS SANTA FE, NM 87594 0496 JUL 07 Postmark Here 2015 POST OFFICE 06/04/2015

Sent To: Zorro Partners Ltd.
Street, Apt. No., or PO Box No.: 616 Texas St
City, State, ZIP+4®: Ft. Worth, TX 76102

PS Form 3800, August 2006 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Yates US Inc.
P.O. Box 2323
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Pat Escalante ☐ Agent ☐ Addressee

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

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

ROSWELL JUN 16 2015 88201

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3421

PS Form 3811, July 2013 Domestic Return Receipt

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Zorro Partners Ltd.
616 Texas St
Ft. Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Stacy E Gilbert ☑ Agent ☐ Addressee

B. Received by (Printed Name) Stacy E Gilbert C. Date of Delivery JUN 16 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

2. Article Number (Transfer from service label) 7014 1200 0001 1539 3438

PS Form 3811, July 2013 Domestic Return Receipt