

March 25, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: Nearburg Exploration Company
c/o Scott Hall
Montgomery & Andrews
P.O. Box 2307
Santa Fe, New Mexico 87504-2307

Re: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.
SRO State Com No. 43H Well

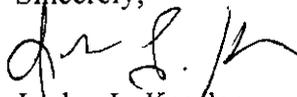
Dear Mr. Hall:

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 14, 2016. 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.

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If you have any questions about this matter please contact Ryan Owen, at (432) 818-2327 or ROwen@concho.com.

Sincerely,



Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC



March 25, 2016

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, Lea County, New Mexico. SRO State Com No. 43H Well

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Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC

COG OPERATING LLC
SRO STATE COM 43H & 44H WELLS

Party to be Pooled:

Nearburg Exploration Company, L.L.C.
3300 N. A St., Bldg. 2 Suite 120
Midland, TX 79705

Offsets:

Yates Petroleum Corporation
105 S. 4th Street
Artesia, NM 88211

Abo Petroleum Corporation
105 S. 4th Street
Artesia, NM 88211

Myco Industries, Inc.
105 S. 4th Street
Artesia, NM 88211

OXY Y-1 Company
P.O. Box 4294
Houston, TX 77210

The Allar Company
P.O. Box 1567
Graham, TX 76450

Chevron USA Inc.
Attn: NOJV Group
P.O. Box 2100
Houston, TX 77252

Devon Energy Production Company LP
20 North Broadway, Suite 1500
Oklahoma City, OK 73102

7015 3010 0001 8827 2021

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Extra Services & Fees (check box, add fee as appropriate)

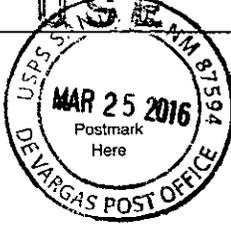
Return Receipt (hardcopy) \$ 2.00

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$



Postage \$

Nearburg Exploration
Company, L.L.C.
3300 N. A St., Bldg. 2 Suite 120
Midland, TX 79705

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 3010 0001 8827 2021

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.00

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$



Postage \$

Yates Petroleum Corporation
105 S. 4th Street
Artesia, NM 88211

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse, so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature [Signature]</p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
	<p>B. Received by (Printed Name) [Signature]</p>	<p>C. Date of Delivery 3/28/16</p>
<p>1. Article Addressed to:</p> <p>Yates Petroleum Corporation 105 S. 4th Street Artesia, NM 88211</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7015 3010 0001 8827 2038</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input checked="" type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>(over 300)</p>		

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 2045

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OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 2.70
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage \$
 Total F \$
 Sent To \$
 Street 105 S. 4th Street
 City, S Artesia, NM 88211

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

USPS SAN JUAN, NM 87594
 MAR 25 2016
 Postmark Here
 DE VARGAS POST OFFICE

7015 3010 0001 8827 2052

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 2.70
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage \$
 Total \$
 Sent To \$
 Street 105 S. 4th Street
 City Myco Industries, Inc. Artesia, NM 88211

PS Form 3800, April 2015 PSN 7530-02-000-9047 Instructions

USPS SAN JUAN, NM 87594
 MAR 25 2016
 Postmark Here
 DE VARGAS POST OFFICE

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.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Abo Petroleum Corporation
 105 S. 4th Street
 Artesia, NM 88211

9590 9401 0128 5225 9677 36

2. Article Number (Transfer from service label)
 7015 3010 0001 8827 2045

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
 Priority Mail Express®
 Adult Signature
 Registered Mail™
 Adult Signature Restricted Delivery
 Registered Mail Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Return Receipt for Merchandise
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:
 Myco Industries, Inc.
 105 S. 4th Street
 Artesia, NM 88211

9590 9401 0128 5225 9677 43

2. Article Number (Transfer from service label)
 7015 3010 0001 8827 2052

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
 Priority Mail Express®
 Adult Signature
 Registered Mail™
 Adult Signature Restricted Delivery
 Registered Mail Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Return Receipt for Merchandise
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 2069

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only *COG/SPO 424 H*

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

OFFICIAL USE

Certified Mail Fee
\$ 3.45

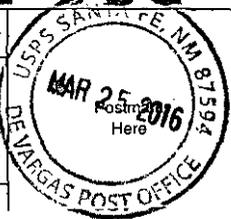
Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 2.80
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postage
\$ _____
Total P
\$ _____

Sent To
OXY Y-1 Company
P.O. Box 4294
Houston, TX 77210

Street
City, St

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
OXY Y-1 Company
P.O. Box 4294
Houston, TX 77210

9590 9401 0128 5225 9677 50

2. Article Number (Transfer from service label)
7015 3010 0001 8827 2069

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee
J. Y. [Signature]

B. Received by (Printed Name)
J. Y. [Signature]

C. Date of Delivery
 Yes
 No

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

3. Service Type
 Priority Mail Express®
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

7015 3010 0001 8827 2076

**U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee
\$ 3.45

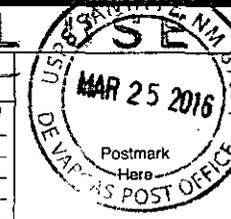
Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 2.80
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postage
\$ _____
Total Post
\$ _____

Sent To
The Allar Company
P.O. Box 1567
Graham, TX 76450

Street and
City, State

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:
The Allar Company
P.O. Box 1567
Graham, TX 76450

9590 9401 0128 5225 9677 67

2. Article Number (Transfer from service label)
7015 3010 0001 8827 2076

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee
Melanie Barnett

B. Received by (Printed Name)
Melanie Barnett

C. Date of Delivery
 Yes
 No
3-28-16

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

3. Service Type
 Priority Mail Express®
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

7015 3010 0001 8827 2083

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only *CO6/SD 492*

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

OFFICIAL USE

Certified Mail Fee \$ 345

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 250

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Chevron USA Inc.

Street and Attn: NOJV Group

City, State P.O. Box 2100
Houston, TX 77252

USPS SANTA FE, NM 87504
 MAR 22 2016
 DE VARGAS POST OFFICE

PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7015 3010 0001 8827 2090

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only *CO6/SD 434*

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OFFICIAL USE

Certified Mail Fee \$ 345

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 250

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Devon Energy Production

Street and Company LP

City, State 20 North Broadway, Suite 1500
Oklahoma City, OK 73102

USPS SANTA FE, NM 87504
 MAR 22 2016
 DE VARGAS POST OFFICE

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE OR ON THE RETURN ADDRESS, FOLD AT 00

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ 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.
Attn: NOJV Group
P.O. Box 2100
Houston, TX 77252

2. Article Number (Transfer from service label)
7015 3010 0001 8827 2083

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Delivery Restricted Delivery
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

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 No
 If YES, enter delivery address below: _____

9590 9401 0128 5225 9677 74

USPS SANTA FE, NM 87504
 MAR 30 2016
 BARBARA FORD

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ 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:
Devon Energy Production
Company LP
20 North Broadway, Suite 1500
Oklahoma City, OK 73102

2. Article Number (Transfer from service label)
7015 3010 0001 8827 2090

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Delivery Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

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 No
 If YES, enter delivery address below: _____

9590 9401 0128 5225 9670 64

USPS OKLAHOMA CITY, OK
 MAR 28 2016
 CENTER CITY

COG OPERATING LLC
SRO STATE COM 43H & 44H WELLS

Party to be Pooled:

Nearburg Exploration Company, L.L.C.
3300 N. A St., Bldg. 2 Suite 120
Midland, TX 79705

Offsets:

Yates Petroleum Corporation
105 S. 4th Street
Artesia, NM 88211

Abo Petroleum Corporation
105 S. 4th Street
Artesia, NM 88211

Myco Industries, Inc.
105 S. 4th Street
Artesia, NM 88211

OXY Y-1 Company
P.O. Box 4294
Houston, TX 77210

The Allar Company
P.O. Box 1567
Graham, TX 76450

Chevron USA Inc.
Attn: NOJV Group
P.O. Box 2100
Houston, TX 77252

Devon Energy Production Company LP
20 North Broadway, Suite 1500
Oklahoma City, OK 73102



March 25, 2016

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c/o Scott Hall
Montgomery & Andrews
P.O. Box 2307
Santa Fe, New Mexico 87504-2307

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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

March 25, 2016

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

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SRO State Com No. 44H Well

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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. ☉

7015 3010 0001 8827 2106

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OFFICIAL USE

Certified Mail Fee \$ 345

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.50

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

DE VARGAS POST OFFICE
 SANTA FE, NM 87504
 MAR 25 2016
 Here

Nearburg Exploration
 Company, L.L.C.
 3300 N. A St., Bldg. 2 Suite 120
 Midland, TX 79705

for Instructions

7015 3010 0001 8827 2118

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OFFICIAL USE

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Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.50

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

DE VARGAS POST OFFICE
 SANTA FE, NM 87504
 Postmark
 MAR 25 2016
 Here

Yates Petroleum Corporation
 105 S. 4th Street
 Artesia, NM 88211

PS Form 3800, April 2015 PSN 7530-02-000-9047 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.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nearburg Exploration
 Company, L.L.C.
 3300 N. A St., Bldg. 2 Suite 120
 Midland, TX 79705

2. Article Number (Transfer from service label):

7015 3010 0001 8827 2106

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature *X* *Friesela* Agent Addressee

B. Received by (Printed Name) *Friesela* C. Date of Delivery *4/1/16*

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

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Insured Mail Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 3010 0001 8827 0645

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only *COG/ASD 4/2/16*

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

OFFICIAL USE

Certified Mail Fee
\$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 2.80
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postage
\$ _____

USPS SANTA FE, NM 87504
MAR 23 2016
DE VARGAS POST OFFICE

Abo Petroleum Corporation
105 S. 4th Street
Artesia, NM 88211

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 3010 0001 8827 0652

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only *COG/ASD 4/2/16*

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

OFFICIAL USE

Certified Mail Fee
\$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ 2.80
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postage
\$ _____

USPS SANTA FE, NM 87504
MAR 23 2016
DE VARGAS POST OFFICE

Myco Industries, Inc.
105 S. 4th Street
Artesia, NM 88211

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
Abo Petroleum Corporation
105 S. 4th Street
Artesia, NM 88211

2. Article Number (Transfer from service label)
7015 3010 0001 8827 0645

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *3/28/16*

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

3. Service Type
 Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation™
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Mail Restricted Delivery (0)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:
Myco Industries, Inc.
105 S. 4th Street
Artesia, NM 88211

2. Article Number (Transfer from service label)
7015 3010 0001 8827 0652

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *3/28/16*

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

3. Service Type
 Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation™
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

Mail Restricted Delivery (0)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 0669

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only *COB/ISRO 4444*

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postmark Here

OXY Y-1 Company
P.O. Box 4294
Houston, TX 77210

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

OXY Y-1 Company
P.O. Box 4294
Houston, TX 77210

2. Article Number (Transfer from service label)

9590 9401 0128 5225 9676 0c
 7015 3010 0001 8827 0669

PS Form 3811, July 2015 PSN 7530-02-000-9053 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 No
 If YES, enter delivery address below:

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

7015 3010 0001 8827 0676

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only *COB/ISRO 4444*

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 2.80

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

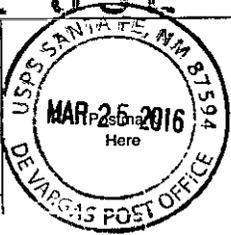
Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postmark Here

The Allar Company
P.O. Box 1567
Graham, TX 76450

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

The Allar Company
P.O. Box 1567
Graham, TX 76450

2. Article Number (Transfer from service label)

9590 9401 0128 5225 9676 77
 7015 3010 0001 8827 0676

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

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

Melanie Barrett 3-29-16

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

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

7015 3010 0001 8827 0683

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

206/1320 444

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

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 3.45

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$



Postage

Chevron USA Inc.
Attn: NOJV Group
P.O. Box 2100
Houston, TX 77252

7015 3010 0001 8827 0690

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

206/1320 4394

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

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ 3.45

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$



Postage

Devon Energy Production
Company LP
20 North Broadway, Suite 1500
Oklahoma City, OK 73102

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.
- 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.
Attn: NOJV Group
P.O. Box 2100
Houston, TX 77252

9590 9401 0128 5225 9677 05

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0683

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Barbara Jordan*

B. Received by (Printed Name) _____

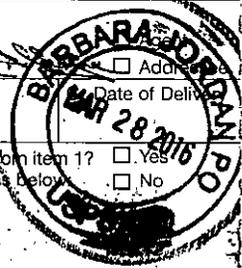
C. Date of Delivery _____

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

3. Service Type

Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation™
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Devon Energy Production
Company LP
20 North Broadway, Suite 1500
Oklahoma City, OK 73102

9590 9401 0128 5225 9677 05

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0683

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *David Carrillo*

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

Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation™
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

