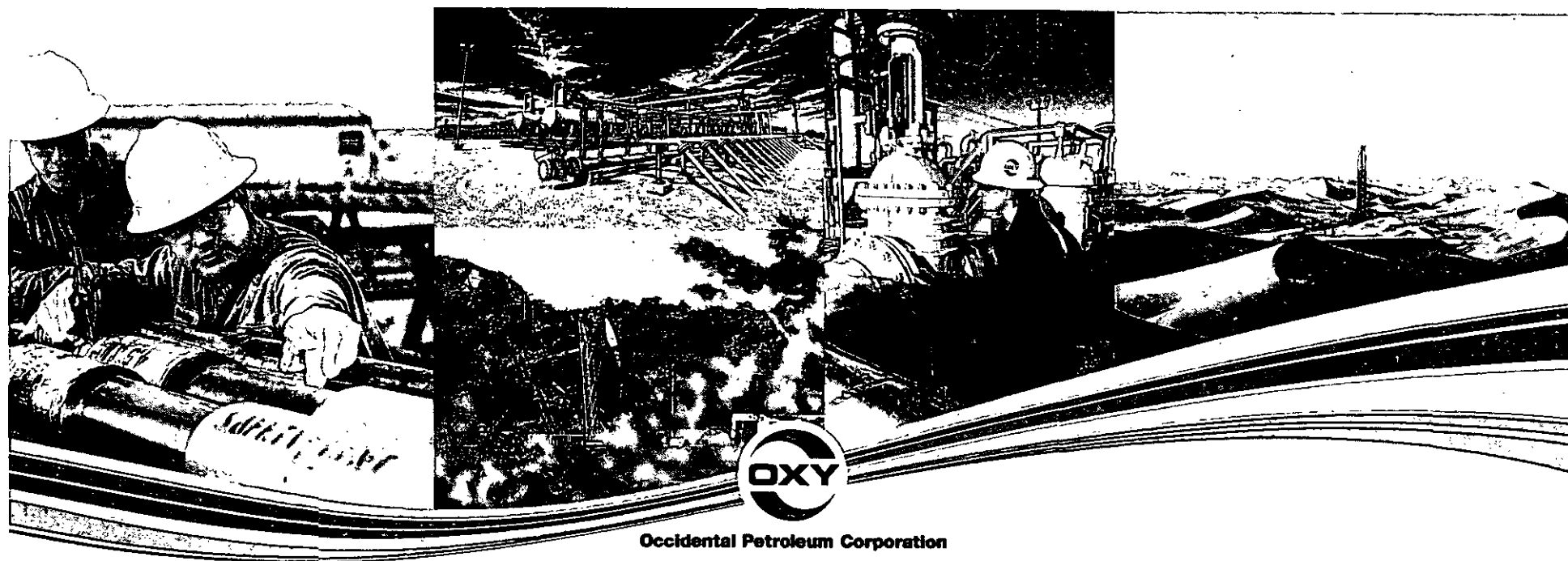
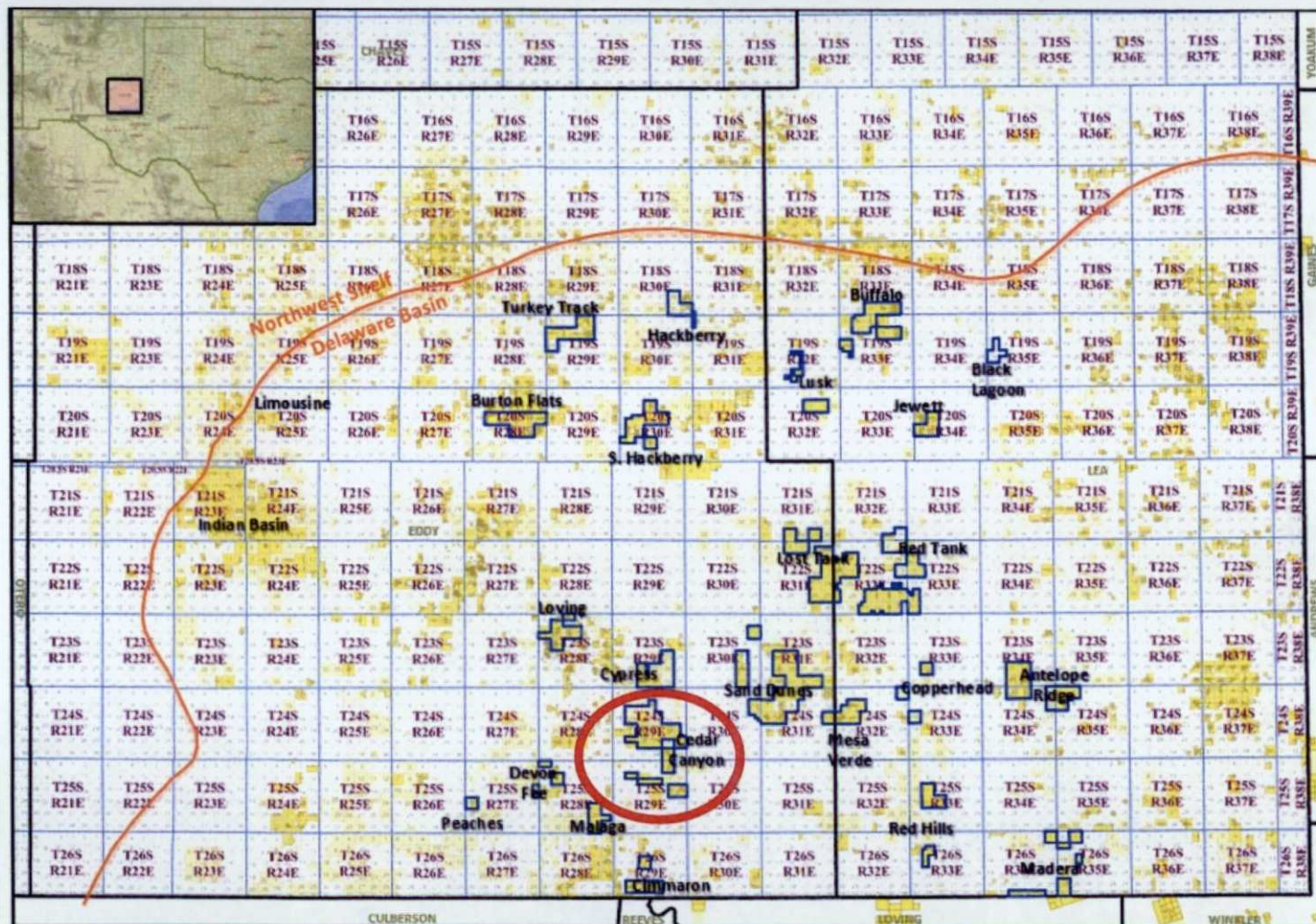


CEDAR CANYON 23-3H EXHIBITS



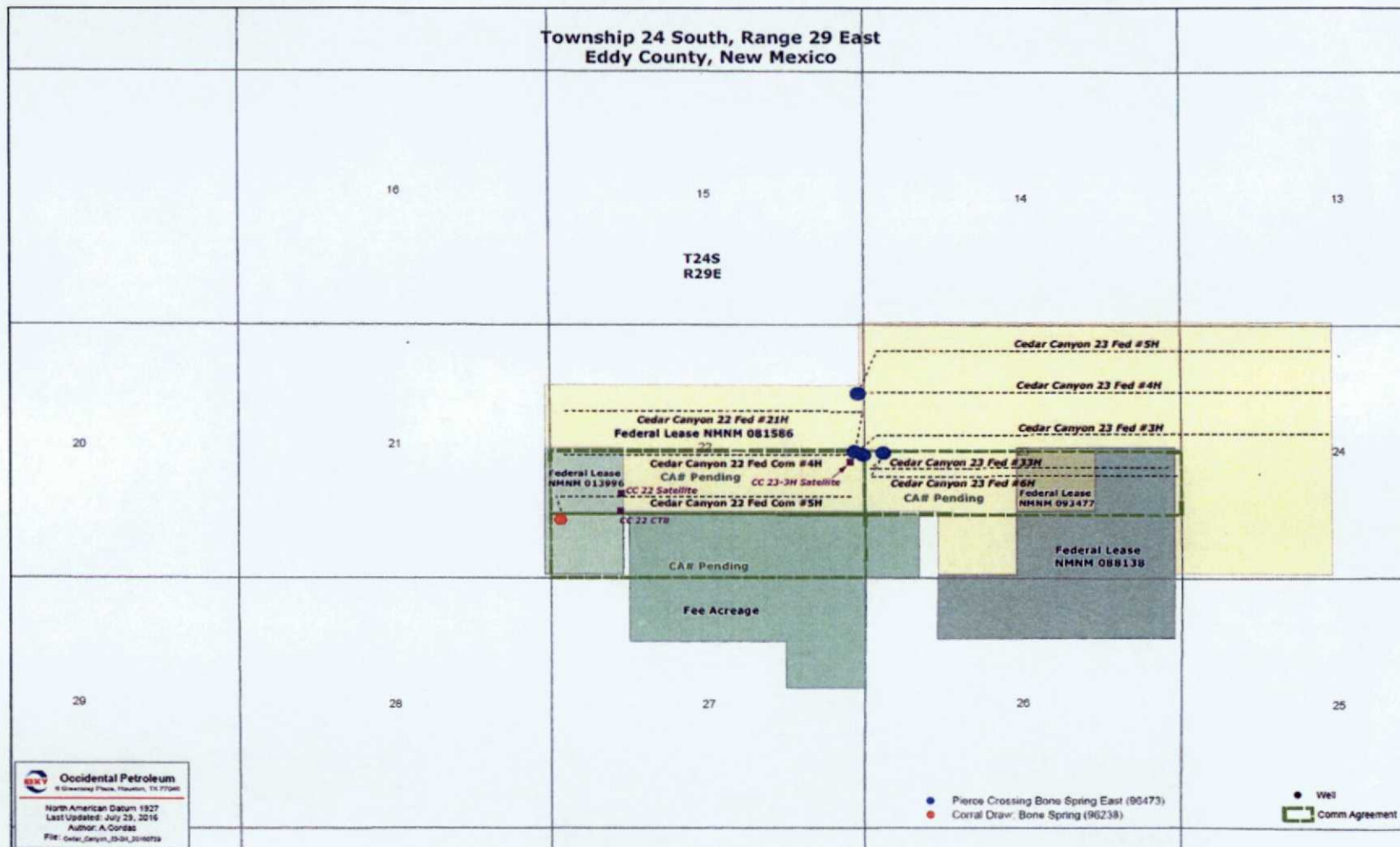
Occidental Petroleum Corporation

Oxy Cedar Canyon Asset



BEFORE THE OIL CONSERVATION DIVISION
 Santa Fe, New Mexico
 Exhibit No. 1
 Submitted by:
OXY USA, INC.
 Hearing Date: September 15, 2016





BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 2
Submitted by:
OXY USA, INC.
Hearing Date: September 15, 2016

LEGAL DESCRIPTION OF LEASES

- a) 160-acre spacing unit comprised of S/2 N/2 of Section 22, currently dedicated to the Cedar Canyon 22 Federal No. 21H (30-015-43642) well and producing from the Pierce Crossing; Bone Spring East Pool (96473);
- (b) 160-acre spacing unit comprised of N/2 S/2 of Section 22, currently dedicated to the Cedar Canyon 22 Federal No. 4H (30-015-43708) well and producing from the Pierce Crossing; Bone Spring East Pool (96473);
- (c) 160-acre spacing unit comprised of N/2 S/2 of Section 22, currently dedicated to the Cedar Canyon 22 Federal No. 5H (30-015-43758) well and producing from the Corral Draw Bone Spring Pool (96238);
- (d) 240-acre spacing unit comprised of N/2 S/2 of Section 23 and the N/2 SW/4 of Section 24, currently dedicated to the Cedar Canyon 23 Federal No. 3H (30-015-43290) well. The Cedar Canyon 23 Federal No. 3H (30-015-43290) well is currently producing from the Pierce Crossing; Bone Spring East Pool (96473).
- (e) 240-acre spacing unit comprised of S/2 N/2 of Section 23 and the S/2 NW/4 of Section 24, currently dedicated to the Cedar Canyon 23 Federal No. 4H (30-015-43281) well and producing from the Pierce Crossing; Bone Spring East Pool (96473).
- (f) 240-acre spacing unit comprised of N/2 N/2 of Section 23 and the NW/4 NW/4 of N/2 of Section 24, currently dedicated to the Cedar Canyon 23 Federal No. 5H (30-015-43282) well and producing from the Pierce Crossing; Bone Spring East Pool (96473).
- (g) 160-acre spacing unit comprised of N/2 S/2 of Section 23, currently dedicated to the Cedar Canyon 23 Federal No. 6H (API No. pending) well, and the Cedar Canyon 23 Federal No. 33H (API No. pending) well. The Cedar Canyon 23 Federal No. 6H and Cedar Canyon 23 Federal No. 33H wells are expected to produce from the Pierce Crossing; Bone Spring East Pool (96473).
- (h) Any future spacing unit located in the S/2 S/2 of Section 23 or the SW/4 of Section 24.

DATE IN	SUSPENSE	ENGINEER	LOGGED IN	TYPE	APP NO.
---------	----------	----------	-----------	------	---------

ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
 - Engineering Bureau -
 1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Application Acronyms:

[NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]
[DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
[PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
[WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
[SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
[EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

[1] TYPE OF APPLICATION - Check Those Which Apply for [A]

[A] Location - Spacing Unit - Simultaneous Dedication
☐ NSL ☐ NSP ☐ SD

Check One Only for [B] or [C]

[B] Commingling - Storage - Measurement
☐ DHC ☐ CTB ☒ PLC ☐ PC ☒ OLS ☒ OLM

[C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
☐ WFX ☐ PMX ☐ SWD ☐ IPI ☐ EOR ☐ PPR

[D] Other: Specify _____

[2] NOTIFICATION REQUIRED TO: - Check Those Which Apply, or ☐ Does Not Apply

- [A] ☒ Working, Royalty or Overriding Royalty Interest Owners**
- [B] ☐ Offset Operators, Leaseholders or Surface Owner**
- [C] ☐ Application is One Which Requires Published Legal Notice**
- [D] ☒ Notification and/or Concurrent Approval by BLM or SLO**
 U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
- [E] ☒ For all of the above, Proof of Notification or Publication is Attached, and/or,**
- [F] ☐ Waivers are Attached**

[3] SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.

[4] CERTIFICATION: I hereby certify that the information submitted with this application for administrative approval is **accurate and complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

TAYLOR STILLMAN
 Print or Type Name

Taylor Stillman
 Signature

PRODUCTION ENGINEER
 Title

6/30/16
 Date

BEFORE THE OIL CONSERVATION DIVISION
 Santa Fe, New Mexico
 Exhibit No. 3
 Submitted by:
OXY USA, INC.
 Hearing Date: September 15, 2016

TAYLOR_STILLMAN@OXY.COM
 e-mail Address

District I
1625 N. French Drive, Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St Francis Dr, Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-107-B
Revised August 1, 2011

OIL CONSERVATION DIVISION
1220 S. St Francis Drive
Santa Fe, New Mexico 87505

Submit the original
application to the Santa Fe
office with one copy to the
appropriate District Office.

APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)

OPERATOR NAME: OXY USA INC

OPERATOR ADDRESS: PO BOX 4294 HOUSTON, TX 77210

APPLICATION TYPE:

☐ Pool Commingling ☐ Lease Commingling ☒ Pool and Lease Commingling ☐ Off-Lease Storage and Measurement (Only if not Surface Commingled)

LEASE TYPE: ☐ Fee ☐ State ☒ Federal

Is this an Amendment to existing Order? ☐ Yes ☒ No If "Yes", please include the appropriate Order No. _____

Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling
☒ Yes ☐ No

(A) POOL COMMINGLING

Please attach sheets with the following information

(1) Pool Names and Codes	Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production		Calculated Value of Commingled Production	Volumes
SEE ATTACHED					

(2) Are any wells producing at top allowables? ☒ Yes * ☐ No *Estimated Values

(3) Has all interest owners been notified by certified mail of the proposed commingling? ☒ Yes ☐ No

(4) Measurement type: ☐ Metering ☒ Other (Specify): ALLOCATION BY WELL TEST

(5) Will commingling decrease the value of production? ☐ Yes ☒ No If "yes", describe why commingling should be approved

(B) LEASE COMMINGLING

Please attach sheets with the following information

(1) Pool Name and Code.

(2) Is all production from same source of supply? ☐ Yes ☐ No

(3) Has all interest owners been notified by certified mail of the proposed commingling? ☐ Yes ☐ No

(4) Measurement type: ☐ Metering ☐ Other (Specify)

(C) POOL and LEASE COMMINGLING

Please attach sheets with the following information

(1) Complete Sections A and E.

(D) OFF-LEASE STORAGE and MEASUREMENT

Please attached sheets with the following information

(1) Is all production from same source of supply? ☐ Yes ☐ No

(2) Include proof of notice to all interest owners.

(E) ADDITIONAL INFORMATION (for all application types)

Please attach sheets with the following information

(1) A schematic diagram of facility, including legal location.

(2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved.

(3) Lease Names, Lease and Well Numbers, and API Numbers.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: Taylor Stillman TITLE: PRODUCTION ENGINEER

DATE: 6/30/16

TYPE OR PRINT NAME: TAYLOR STILLMAN TELEPHONE NO.: 713-366-5945

E-MAIL ADDRESS: Taylor_Stillman@oxy.com

**APPLICATION FOR POOL LEASE COMMINGLE, OFF-LEASE MEASUREMENT, SALES, & STORAGE,
Commingling proposal for Cedar Canyon 23-3H Satellite**

OXY USA INC is requesting approval for Pool Lease Commingle, and Off-lease Measurement, Storage & Sales for wells located on the attached spreadsheet. A map showing surface hole locations and laterals for each of the wells is also attached.

Oil & Gas metering:

Incoming wells will be routed to the 3 phase production separator at the satellite facility located at Cedar Canyon 23-3H well pad at 32.202503,-103.963914. The production separator will be equipped with a gas orifice meter (S/N*), oil turbine meter with prover loops (S/N*) and water turbine (S/N*) meters. There will also be a test separator at the satellite facility equipped with a gas orifice meter (S/N*), oil turbine meter with prover loops (S/N*) and water turbine (S/N*) meters.

Oxy proposes to allocate production by well test. The wells are located on multiple Federal leases and CA's that are all 12.5% royalty. There is diverse WI & ORRI amongst some of the wells as outlined on the attached ownership list spreadsheet. Notice will be provided to all affected parties as per attached notice list. Wells are expected to decline below their top allowable within the first 4 months of production. Furthermore, the estimated percent of decline after 6 months is between 54-65%.

Gas meter on production separator S/N* & on test separator S/N* located at the satellite facility will serve as custody transfer point (Facility Measurement Point) for the purposes of royalty payment. Gas production from the 23-3H satellite facility will then be routed to Enterprise sales meter (S/N: 68841), located at 32.222, -103.974.

Oil production from the 23-3H satellite facility will be further metered off-lease, through a Coriolis meter (S/N*), located at the Cedar Canyon 22 central satellite facility. This Coriolis meter will serve as custody transfer point (FMP) for the purposes of Federal royalty payment.

Water production will be routed to the Cedar Canyon 22 CTB and then sent to the Cedar Canyon Salt Water Disposal Distribution system, where it will flow to the nearest SWD which has capacity to accept water. Salt Water Disposals tied to this SWD include the Cedar Canyon 28 Federal 4 SWD, Cedar Canyon 15 SWD, Riverbend Federal 8 SWD, Harroun 15-3 SWD and Cedar Canyon 16-3.

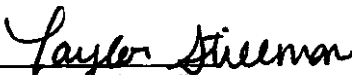
Meters will be proved and calibrated according to current API, NMOCD and BLM standards.

Process and Flow Descriptions:

The flow of production is shown in detail on the enclosed facility diagram. Also enclosed is a map detailing the lease boundaries, well surface hole locations and laterals. Commingling this production is the most effective means of producing the reserves and will not result in reduced royalty or improper measurement of production.

OXY USA INC understands the requested approval will not constitute the granting of any right-of-way or construction rights not granted by the lease instrument. These applications will be submitted separately for approval per NMOCD and BLM regulations.

The working interest, royalty interest and overriding royalty interest owners have been notified of this proposal by certified mail (see attached).

Signed: 
Printed Name: Taylor Stillman
Title: Production Engineer
Date: 06/30/2016

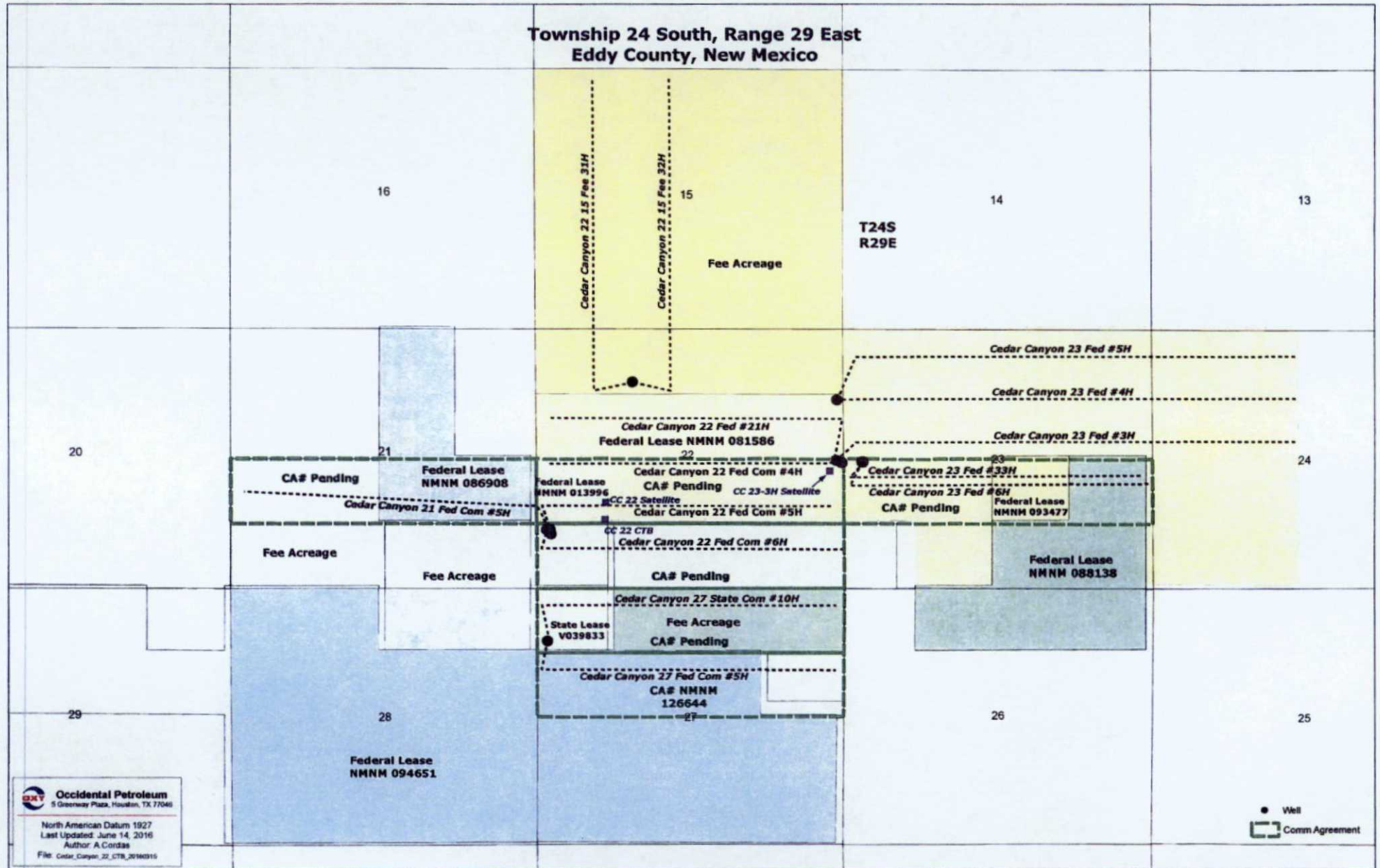
Cedar Canyon 23-3H Satellite Well List

All Federal wells have 12.5% royalty rate

Lease Number	CA #	Well Name	API	Surface Location	Pool	Oil (bpd)	Gravity	Gas (MSCFD)	BTU/cf	Water (bpd)
NMNM 081586		Cedar Canyon 22 Fed 21H	30-015-43642	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	1327*	41	1991*	1000	796*
NMNM 013996 NMNM081586	Pending	Cedar Canyon 22 Fed Com 4H	30-015-43708	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	1327*	41	1991*	1000	796*
NMNM 013996 NMNM081586	Pending	Cedar Canyon 22 Fed Com 5H	30-015-43758	Sec 22, T 24S, R 29 E	Corral Draw Bone Spring	1327*	41	1991*	1000	796*
NMNM 081586		Cedar Canyon 23 Fed 3H	30-015-43290	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	1503*	41	2792*	1000	902*
NMNM 081586		Cedar Canyon 23 Fed 4H	30-015-43281	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	762	42.2	1898	1000	875
NMNM 081586		Cedar Canyon 23 Fed 5H	30-015-43282	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	664	43.3	1555	1000	728
NMNM 081586 NMNM093477 NMNM 088138	Pending	Cedar Canyon 23 Fed Com 6H	Not yet filed	Sec 23, T 24S, R 29 E	Pierce Crossing; Bone Spring E	1503*	41	2792*	1000	902*
NMNM 081586 NMNM093477 NMNM 088138	Pending	Cedar Canyon 23 Fed Com 33H	Not yet filed	Sec 23, T 24S, R 29 E	Pierce Crossing; Bone Spring E	807*	46.5	1776*	1000	2422*

*Represents wells not yet drilled, values are esimated

**Township 24 South, Range 29 East
Eddy County, New Mexico**



Cedar Canyon 23-3H Satellite Ownership

All Federal wells have 12.5% royalty rate

Lease Number	CA #	Well Name	API	Surface Location	Pool	Oil (bpd)	Gravity	Gas (MSCFD)	BTU/cf	Water (bpd)	Ownership
NMNM 081586		Cedar Canyon 22 Fed 21H	30-015-43642	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	1327*	41	1991*	1000	796*	Identical
NMNM 013996 NMNM081586	Pending	Cedar Canyon 22 Fed Com 4H	30-015-43708	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	1327*	41	1991*	1000	796*	Identical
NMNM 013996 NMNM081586	Pending	Cedar Canyon 22 Fed Com 5H	30-015-43758	Sec 22, T 24S, R 29 E	Corral Draw Bone Spring	1327*	41	1991*	1000	796*	
NMNM 081586		Cedar Canyon 23 Fed 3H	30-015-43290	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	1503*	41	2792*	1000	902*	Identical
NMNM 081586		Cedar Canyon 23 Fed 4H	30-015-43281	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	762	42.2	1898	1000	875	
NMNM 081586		Cedar Canyon 23 Fed 5H	30-015-43282	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	664	43.3	1555	1000	728	
NMNM 081586 NMNM093477 NMNM 088138	Pending	Cedar Canyon 23 Fed Com 6H	Not yet filed	Sec 23, T 24S, R 29 E	Pierce Crossing; Bone Spring E	1503*	41	2792*	1000	902*	Identical
NMNM 081586 NMNM093477 NMNM 088138	Pending	Cedar Canyon 23 Fed Com 33H	Not yet filed	Sec 23, T 24S, R 29 E	Pierce Crossing; Bone Spring E	807*	46.5	1776*	1000	2422*	

*Represents wells not yet drilled, values are esimated



Jeremy D. Murphrey, CPL
Land Negotiator Sr.

OXY USA Inc.
Box 27570, Houston, TX 77227-7570

Phone (713) 350-4816
Fax (713) 983-4942
Jeremy_Murphrey@oxy.com

June 27, 2016

RE: Commingle Application for:
Cedar Canyon 22 CTB

To Whom It May Concern:

OXY USA Inc., as Operator, will be filing applications with the New Mexico Oil Conservation Division and the Bureau of Land Management for approval of the above mentioned commingle project.

This letter serves as notice that the operator and interest owners are identical for the wells listed below in the North Half of the South Half of Section 22, Township 24 South, Range 29 East, Eddy County, New Mexico:

Cedar Canyon 22 Fed Com #4H
Cedar Canyon 22 Fed Com #5H

Best Regards

OXY USA Inc.

A handwritten signature in black ink, appearing to be "J. Murphrey", written over the printed name.

Jeremy Murphrey, CPL
Land Negotiator Sr.



OXY USA Inc.
Box 27870, Houston, TX 77227-7570

Jeremy D. Murphrey, CPL
Land Negotiator Sr.

Phone (713) 350-4816
Fax (713) 983-4942
Jeremy_Murphrey@oxy.com

June 27, 2016

RE: Commingle Application for:
Cedar Canyon 22 CTB

To Whom It May Concern:

OXY USA Inc., as Operator, will be filing applications with the New Mexico Oil Conservation Division and the Bureau of Land Management for approval of the above mentioned commingle project.

This letter serves as notice that the operator and interest owners are identical for the wells listed below in the North Half of Section 23 and the Northwest Quarter of Section 24, Township 24 South, Range 29 East, Eddy County, New Mexico:

Cedar Canyon 23 Fed #3H
Cedar Canyon 23 Fed #4H
Cedar Canyon 23 Fed #5H

Best Regards

OXY USA Inc.

A handwritten signature in black ink, appearing to read "J. Murphrey", is positioned above the printed name.

Jeremy Murphrey, CPL
Land Negotiator Sr.



OXY USA Inc.
Box 27570, Houston, TX 77227-7570

Jeremy D. Murphrey, CPL
Land Negotiator Sr.

Phone (713) 350-4816
Fax (713) 985-4942
Jeremy_Murphrey@oxy.com

June 27, 2016

RE: Commingle Application for:
Cedar Canyon 22 CTB

To Whom It May Concern:

OXY USA Inc., as Operator, will be filing applications with the New Mexico Oil Conservation Division and the Bureau of Land Management for approval of the above mentioned commingle project.

This letter serves as notice that the operator and interest owners are identical for the wells listed below in the North Half of the South Half Section 23 and the North Half of the Southwest Quarter of Section 24, Township 24 South, Range 29 East, Eddy County, New Mexico:

Cedar Canyon 23 Fed Com #6H
Cedar Canyon 23 Fed Com #33H

Best Regards

OXY USA Inc.

A handwritten signature in black ink, appearing to read "J. Murphrey", is written over the printed name.

Jeremy Murphrey, CPL
Land Negotiator Sr.



OXY USA WTP Limited Partnership / OXY USA INC /
OCCIDENTAL PERMIAN LP
A subsidiary of Occidental Petroleum Corporation

5 Greenway Plaza, Suite 110, Houston, Texas 77046
P.O. Box 4294, Houston, Texas 77210-4294
Direct: 713.366.5945 Cell: 832.744.1256
Taylor_Stillman@oxy.com

June 30, 2016

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Re: Request for Pool Lease Commingling and Off-lease Oil Measurement, Sales & Storage for the following wells and leases:

Lease Number	Well Name
NMNM 081586	Cedar Canyon 22 Fed 21H
NMNM 013996, NMNM081586	Cedar Canyon 22 Fed Com 4H
NMNM 013996, NMNM081586	Cedar Canyon 22 Fed Com 5H
NMNM 081586	Cedar Canyon 23 Fed 3H
NMNM 081586	Cedar Canyon 23 Fed 4H
NMNM 081586	Cedar Canyon 23 Fed 5H
NMNM 081586, NMNM093477, NMNM 088138	Cedar Canyon 23 Fed Com 6H
NMNM 081586, NMNM093477, NMNM 088138	Cedar Canyon 23 Fed Com 33H

To Whom It May Concern:

This is to advise you that OXY USA INC is filing an application with the Bureau of Land Management (BLM) and New Mexico Oil Conservation Division (NMOCD) seeking approval for Pool Lease Commingling and Off-lease Oil Measurement, Sales & Storage for the above mentioned wells.

A copy of the application submitted to the Division is attached.

Any objections or requests for a hearing regarding this application must be submitted to the New Mexico Oil Conservation Division Santa Fe Office within 20 Days from the date of this letter.

Respectfully,

OXY USA INC
Taylor Stillman
Production Engineer

Certified Mail Tracking No.

Entity Name	Address	CITY	STATE	ZIP	Tracking No
Mobil Producing	PO BOX 951027	DALLAS	TX	77252	70141820000007150066
GD McKinney INVESTMENTS LP	300 N MARIENFELD SUITE 1100	MIDLAND	TX	79701	70141820000007323008
Wayne/Linda Newkumet	PO BOX 11330	MIDLAND	TX	79702	70141820000007323015
B. Jack Reed	506 CHARISMATIC	MIDLAND	TX	79705	70141820000007323022
Gerald A. Hancock	4200 FAIRWOOD	MIDLAND	TX	79707	70141820000007323039
DRW Energy, LLC	4107 TANFORAN	MIDLAND	TX	79707	70141820000007323046
Beryl Oil & Gas, LP	6707 PEBBLE COURT	MIDLAND	TX	79707	70141820000007323053
M'Lissa L. McKinney Schoening	300 N MARIENFELD SUITE 1100	MIDLAND	TX	79701	70141820000007323060
Sharbro Oil Ltd. Co.	PO BOX 840	ARTESIA	NM	88211	70141820000007323077
Rutter Wilbanks Corp.	PO BOX 3186	MIDLAND	TX	79701	70141820000007323084
Fina Oil and Chemical Company	PO BOX 301105	DALLAS	TX	75303	70141820000007323091
Curtis A. Anderson & Edna I. Anderson	9314 CHERRY BROOK LANE	FRISCO	TX	75033	70141820000007323107
John S. Tittl	7304 VALENCIA GROVE COURT	FORT WORTH	TX	76132	70141820000007323121
Michael A. Kulenguski	279 JONES MT ROAD	MADISON	VA	22727	70141820000007323114
MAP000+NET	P.O. BOX 268946	OKLAHOMA CITY	OK	73126	70141820000007323138
The Roach Foundation	777 TAYLOR ST PII-J	FORT WORTH	TX	76102	70141820000007323145
Kimbell Art Foundation	301 COMMERCE ST SUITE 2300	FORT WORTH	TX	76102	70141820000007323152
Bill Burton*	301 COMMERCE ST SUITE 2900	FORT WORTH	TX	76102	70141820000007323169
Ben J. Fortson, III, Children's Trust	P O BOX 29	FORT WORTH	TX	76101	70141820000007323176
Robert C. Grable	201 MAIN STREET	FORT WORTH	TX	76102	70141820000007323183
MWB 1998 Trust	301 COMMERCE ST STE 2900	FORT WORTH	TX	76102	70141820000007323190
CCB 1998 Trust	301 COMMERCE STREET	FORT WORTH	TX	76102	70141820000007323206
DCB 1998 Trust	301 COMMERCE STREET	FORT WORTH	TX	76102	70141820000007323213
Sundance Minerals I	P O BOX 17744	FORT WORTH	TX	76102	70141820000007323220
BOYT, ERIC D	P O BOX 2602	MIDLAND	TX	79702	70141820000007323237
HANTTULA, JUDITH GENE	3704 SAN GABRIEL AVENUE	FRISCO	TX	75033	70141820000007323244
HARROUN IRREV TRUST, DOROTHY S	P O BOX 3480	OMAHA	NE	68103	70141820000007323251
HARROUN REV TRUST, D STUART	515 TRES LAGUNAS LANE NE	ALBUQUERQUE	NM	87113	70141820000007321578
J M MINERAL & LAND CO INC	P O BOX 1015	MIDLAND	TX	79702	70141820000007321585
KEENE, TARA L	18700 COLLINS STREET	TARZANA	CA	91356	70141820000007321592
MAGNOLIA ROYALTY COMPANY INC	P O BOX 10703	MIDLAND	TX	79702	70141820000007321608
NEAL, JEFFREY CASWELL	1311 DOEPP DRIVE	CARLSBAD	NM	88220	70141820000007321615
NELMS, PIPER L	18706 COLLIN ST	TARZANA	CA	91356	70141820000007321622
SOFTSEARCH INVESTMENT LP	P O BOX 89	ABILENE	TX	79604	70141820000007321639
SOFTVEST MANAGEMENT LP	P O BOX 89	ABILENE	TX	79604	70141820000007321646

Certified Mail Tracking No.

VOGT TRUST,ANDREW AND JANET	13404 PIEDRA GRANDE PLACE NE	ALBUQUERQUE	NM	87111	70141820000007321653
WALKER III,HERMAN CLIFFORD	P O BOX 10135	MIDLAND	TX	79702	70141820000007321660
ANDERSON AND,CURTIS A	9314 CHERRY BROOK LANE	FRISCO	TX	75033	70141820000007321677
BURTON,WILLIAM K	301 COMMERCE ST SUITE 2900	FORT WORTH	TX	76102	70141820000007321684
FORTSON III CHILDRENS TRUST,BEN J	P O BOX 29	FORT WORTH	TX	76101	70141820000007321691
GRABLE,ROBERT C	201 MAIN STREET	FORT WORTH	TX	76102	70141820000007321707
MAP00-NET TX GENERAL PARTNERSH	P.O. BOX 268946	OKLAHOMA CITY	OK	73126	70141820000007321714
PENROC OIL CORPORATION	P O BOX 2769	HOBBS	NM	88241	70141820000007321721
ROACH FOUNDATION INC	777 TAYLOR ST PII-J	FORT WORTH	TX	76102	70141820000007321738
RUTTER & WILBANKS CORPORATION	BOX 3186	MIDLAND	TX	79701	70141820000007321745
BERYL OIL AND GAS LP	6707 PEBBLE COURT	MIDLAND	TX	79707	70141820000007321752
DRW ENERGY LLC	4107 TANFORAN	MIDLAND	TX	79707	70141820000007321769
LEOPARD PETROLEUM LP	4200 FAIRWOOD PL	MIDLAND	TX	79707	70141820000007321776
MOBIL PRODUCING TEXAS &	4500 DACOMA ST. CORP-BH3-212	HOUSTON	TX	77092	70141820000007321783
NEWKUMET,WAYNE & LINDA	PO BOX 11330	MIDLAND	TX	79702	70141820000007321790
REED,B JACK	506 CHARISMATIC	MIDLAND	TX	79705	70141820000007321806
SCHOENING,M'LISSA M	300 N MARIENFELD STE 1100	MIDLAND	TX	79701	70141820000007321813

Cedar Canyon 23-3H Satellite Production Data

CEDAR CANYON 23 FEDERAL #004H (API 30-015-43281)

Month	Oil (bbls)	Gas (MCF)	Water (bbls)
Jan	5020	0	0
Feb	49414	50169	53306
Mar	35454	55485	53073
Apr	20333	29356	40604

CEDAR CANYON 23 FEDERAL #005H (API 30-015-43282)

Month	Oil (bbls)	Gas (MCF)	Water (bbls)
Jan	4312	0	0
Feb	41602	45713	50533
Mar	38433	60660	63727
Apr	22926	36089	50855

State of New Mexico
 Energy, Minerals & Natural Resources Department
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-102
 Revised August 1, 2011
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 District Office

☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

APT Number 70-05-43642	Pool Code 96743	Pool Name Pierce Crossing Bone Spring, East
Property Code 315242	Property Name CEDAR CANYON "22" FEDERAL	Well Number 21H
OCRD No. 16694	Operator Name OXY USA INC.	Direction 2988.4'

Surface Location

U.L. or lot no.	Section	Township	Range	Lot No.	Feet from the	North-South line	Feet from the	East-West line	County
1	22	24 SOUTH	29 EAST, N.M.P.M.		2540'	SOUTH	230'	EAST	EDDY

Bottom Hole Location If Different From Surface

U.L. or lot no.	Section	Township	Range	Lot No.	Feet from the	North-South line	Feet from the	East-West line	County
E	22	24 SOUTH	29 EAST, N.M.P.M.		1830'	NORTH	180'	WEST	EDDY

Dedicated Acres No	Job or Well 160	Consolidation Code	Order No.
------------------------------	---------------------------	--------------------	-----------

No allowance will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

			OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that the information was obtained from a reliable source or sources. Signature: <i>David Stuart</i> 12/15/15 Name: David Stuart Title: David Stuart Company: David Stuart
BOTTOM HOLE LOCATION NEW MEXICO EAST NAD 1983 LAT: N 31.285134E LONG: W 103.875307 BOTTOM POINT NEW MEXICO EAST NAD 1983 LAT: N 31.285134E LONG: W 103.875307 TOP POINT NEW MEXICO EAST NAD 1983 LAT: N 31.285134E LONG: W 103.875307 SURFACE LOCATION NEW MEXICO EAST NAD 1983 LAT: N 31.285134E LONG: W 103.875307			SURVEYOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that the information was obtained from a reliable source or sources. Signature: <i>James J. Lasa</i> 12/15/245 Name: James J. Lasa Title: James J. Lasa Company: James J. Lasa

State of New Mexico
 Energy, Minerals & Natural Resources Department
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

State of New Mexico
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OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

APN Number 3005-	Pool Code 96473	Pool Name Pierce Crossing, Bone Spring, East
Property Code	Property Name CEDAR CANYON "22" FEDERAL COM	Well Number 4H
OGRID No. 16696	Operator Name OXY USA INC.	Elevation 2958.4'

Surface Location

UL or lot no.	Section	Township	Range	Lot No.	Feet from the	North-South line	Feet from the	East-West line	County
1	22	24 SOUTH	29 EAST, N.M.P.M.		2540'	SOUTH	260'	EAST	EDDY

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot No.	Feet from the	North-South line	Feet from the	East-West line	County
L	22	24 SOUTH	29 EAST, N.M.P.M.		2570'	SOUTH	80'	WEST	EDDY

Dedicated Acres 160	Joint or Unit Y	Classification Code	Order No. NSL-7389 NSL to be filed November 2/23/16
-------------------------------	---------------------------	---------------------	---

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and correct to the best of my knowledge and belief, and that the information was obtained from a reliable source or sources and is not a copy of information obtained from another source. <i>[Signature]</i> 12/31/15 David Stewart, Sr., N.M. david.stewart@oxy.com Title			
SURVEYOR CERTIFICATION I hereby certify that the information contained herein is true and correct to the best of my knowledge and belief, and that the information was obtained from a reliable source or sources and is not a copy of information obtained from another source. <i>[Signature]</i> 12/31/15 Title			

PRODUCTION AREA

PROJECT AREA

SURFACE LOCATION
 NEW MEXICO EAST
 160 ACRES
 LAT: N 21° 00' 00" E
 LONG: W 101° 00' 00" W

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-6770
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87418
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name
Property Code	Property Name	Well Number
	CEDAR CANYON "22" FEDERAL COM	5H
OGRID No.	Operator Name	Elevation
	OXY USA INC.	2939.7'

Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	22	24 SOUTH	29 EAST, N.M.P.M.		1120'	SOUTH	207'	WEST	EDDY

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	22	24 SOUTH	29 EAST, N.M.P.M.		1690'	SOUTH	250'	EAST	EDDY
Dedicated Acres	Joint or Infill	Consolidation Code	Order No.						

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature _____ Date _____

Printed Name _____

E-mail Address _____

SURVEYOR CERTIFICATION

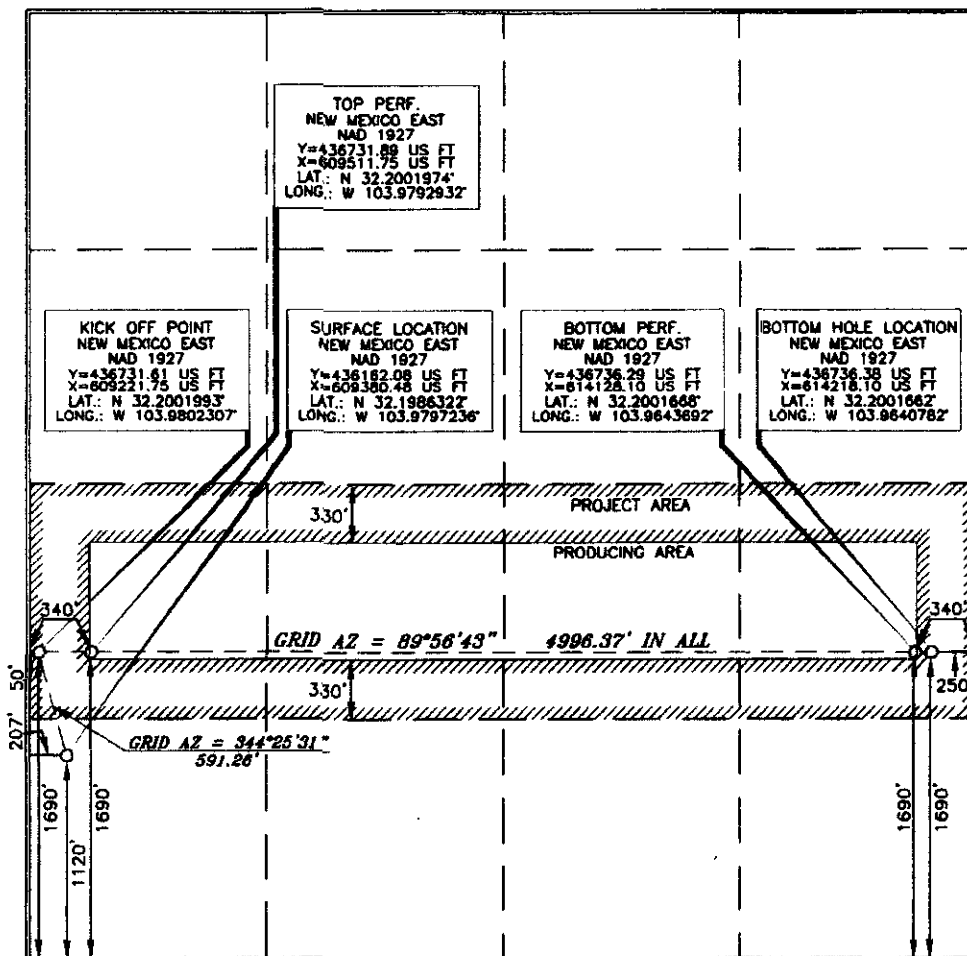
I hereby certify that the well location shown on this plat was plotted from the field notes of a survey made by me or under my supervision and that the same is true and correct to the best of my belief.

Date of Survey _____

Signature and Seal of Professional Surveyor _____

Tommy J. Paul 2/16/2016
Certificate Number 15079

WO# 151109WL-a (Rev. B) (KA)



District I
 1220 S. Francis Dr., Santa Fe, NM 87505
 Phone: (505) 259-4100 Fax: (505) 259-0720
 District II
 1117 E. Main St., Arroyo, NM 87006
 Phone: (505) 748-1283 Fax: (505) 748-0720
 District III
 1000 N. Monroe Road, Alamo, NM 87006
 Phone: (505) 334-6170 Fax: (505) 334-6170
 District IV
 1220 S. E. Francis Dr., Santa Fe, NM 87505
 Phone: (505) 436-3400 Fax: (505) 436-0402

State of New Mexico
 Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-43290	Pool Code 96473	Pool Name Pierce Crossing Bone Spring, E.
Property Code 315098	Property Name CEDAR CANYON "23" FEDERAL	Well Number 3H
OGRIID No. 16696	Operator Name OXY USA INC.	Elevation 2957.1'

Surface Location

UL or lot no.	Section	Township	Range	Lot 1/4	Feet from the	North/South line	Feet from the	East/West line	County
1	22	24 SOUTH	29 EAST, N.M.P.M.		2540'	SOUTH	200'	EAST	EDDY

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot 1/4	Feet from the	North/South line	Feet from the	East/West line	County
K	24	24 SOUTH	29 EAST, N.M.P.M.		2260'	SOUTH	2480'	WEST	EDDY

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
240	Y		

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

				OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or mineral interest interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order. _____ Signature Date: 11/4/14 David Stewart Sr. Eng. Adv. david.stewart@oxy.com Email Address
SURVEYOR CERTIFICATION I hereby certify that the information contained on this plat was prepared by me or under my direct supervision and that I am a duly licensed Professional Surveyor in the State of New Mexico. _____ Signature Date of Survey: DECEMBER 11, 2013 Professional Surveyor License No. 15078 _____ Signature Date: 8/11/2014 115078				WQF 131211ML-a (Rev. A) (NOV)

State of New Mexico
 Energy, Minerals & Natural Resources Department
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals & Natural Resources Department
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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 District Office

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WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-015-	Pool Code 96473	Pool Name Pierce Crossing Bone Spring, E.
Property Code 39439	Property Name CEDAR CANYON "29" FEDERAL	Well Number 4H
OGRIID No. 16694	Operator Name OXY USA INC.	Elevation 2941.7'

Surface Location

UL or lot no.	Section	Township	Range	Lot No.	Feet from the	North/South line	Feet from the	East/West line	County
H	22	24 SOUTH	29 EAST, N.M.P.M.		1415'	NORTH	155'	EAST	EDDY

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot No.	Feet from the	North/South line	Feet from the	East/West line	County
F	24	24 SOUTH	29 EAST, N.M.P.M.		1700'	NORTH	2480'	WEST	EDDY

Dedicated Acres 240	Joint or Infill Y	Consolidation Code	Order No.
------------------------	----------------------	--------------------	-----------

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

				OPERATOR CERTIFICATION I hereby certify that the information furnished herein is true and complete to the best of my knowledge and belief, and that the organization either owns a working interest or undivided interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order hereafter entered by the Division. <i>[Signature]</i> 11/4/11 David Stewart Sr. Pres. Ado. david_stewart@oxy.com
SURVEYOR CERTIFICATION I hereby certify that I am a duly licensed surveyor and that the plat was prepared by me or under my direct supervision and that the same is a true and correct copy of the original survey. 15079 Date of Survey Signature and Title Professional Surveyor <i>[Signature]</i> 8/1/2011 15079				

Form C-102
 State of New Mexico
 Energy, Minerals & Natural Resources Department
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
 Phone: (505) 253-4141 Fax: (505) 253-4178
 TTY: (505) 253-4141 Fax: (505) 253-4178
 Email: ocd@state.nm.us
 Website: www.oilconservation.state.nm.us

State of New Mexico
 Energy, Minerals & Natural Resources Department
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

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 District Office

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WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-05-	Pool Code 96473	Pool Name Piece Crossing Bone Spring, E.
Property Code 39439	Property Name CEDAR CANYON "23" FEDERAL	
OCRD No. 16696	Operator Name OXY USA INC.	
	Well Number 5H	Elevation 2941.5'

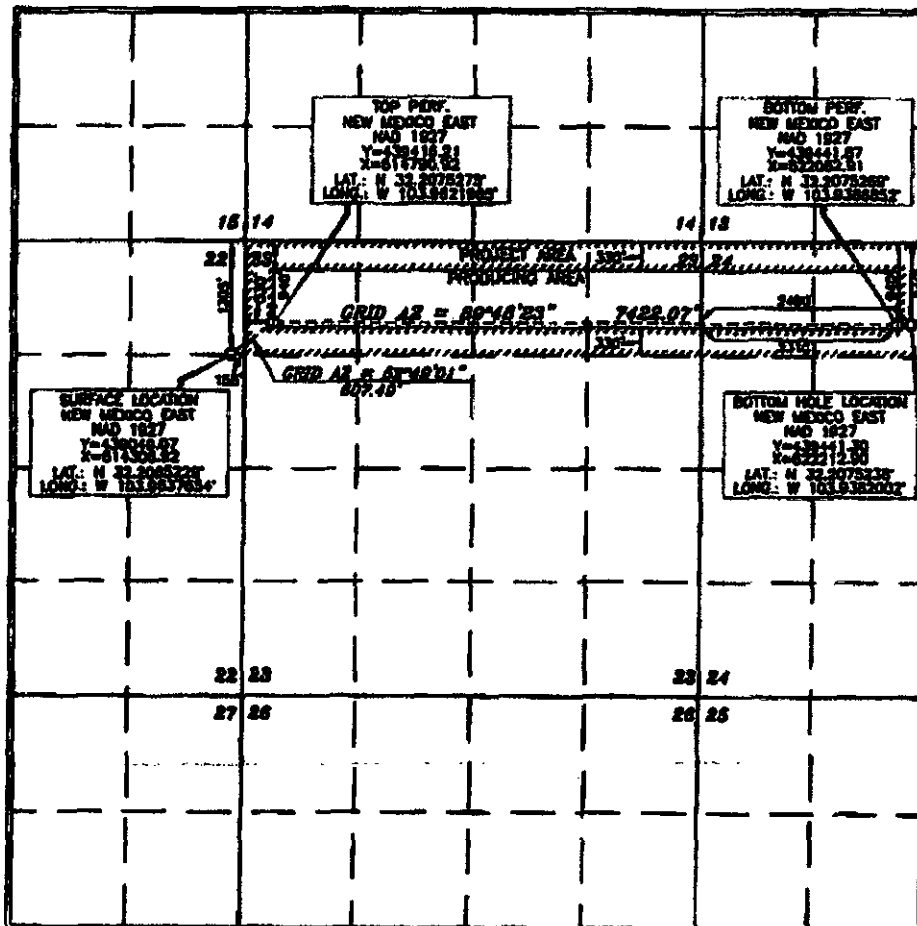
Surface Location

UL or lot no.	Section	Township	Range	Lot No.	Feet from the	North/South line	Feet from the	East/West line	County
A	22	24 SOUTH	29 EAST, N.M.P.M.		1305'	NORTH	155'	EAST	EDDY

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot No.	Feet from the	North/South line	Feet from the	East/West line	County
C	24	24 SOUTH	29 EAST, N.M.P.M.		940'	NORTH	2460'	WEST	EDDY
Dedicated Acres 240		Joint or Infill N	Consolidation Code	Order No.					

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and
 complete to the best of my knowledge and belief, and that this
 organization either owns a working interest or retained interest
 in the land including the proposed bottom hole location or
 has a right to drill this well at the location pursuant to a contract
 with an owner of such a working interest, or to a
 voluntary pooling agreement or a compulsory pooling order
 heretofore entered by the Division.

Signature: *[Signature]* 11/4/14
 David Stewart Sr. Reg. Adv.
 Email: David.Stewart@oxy.com

SURVEYOR CERTIFICATION

I hereby certify that the information contained herein is true and
 complete to the best of my knowledge and belief, and that this
 organization either owns a working interest or retained interest
 in the land including the proposed bottom hole location or
 has a right to drill this well at the location pursuant to a contract
 with an owner of such a working interest, or to a
 voluntary pooling agreement or a compulsory pooling order
 heretofore entered by the Division.

Date of Survey: **11/11/2014**
 Signature: *[Signature]*
 Professional Surveyor

Signature: *[Signature]* 11/11/2014
 Certificate No. **15079**

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 E. Main St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1600 Rio Grande Road, Artesia, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
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Santa Fe, NM 87505

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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number		Pool Code	Pool Name
Property Code	Property Name CEDAR CANYON "23" FEDERAL COM		Well Number 6H
OGRID No.	Operator Name OXY USA INC.		Elevation 2948.7'

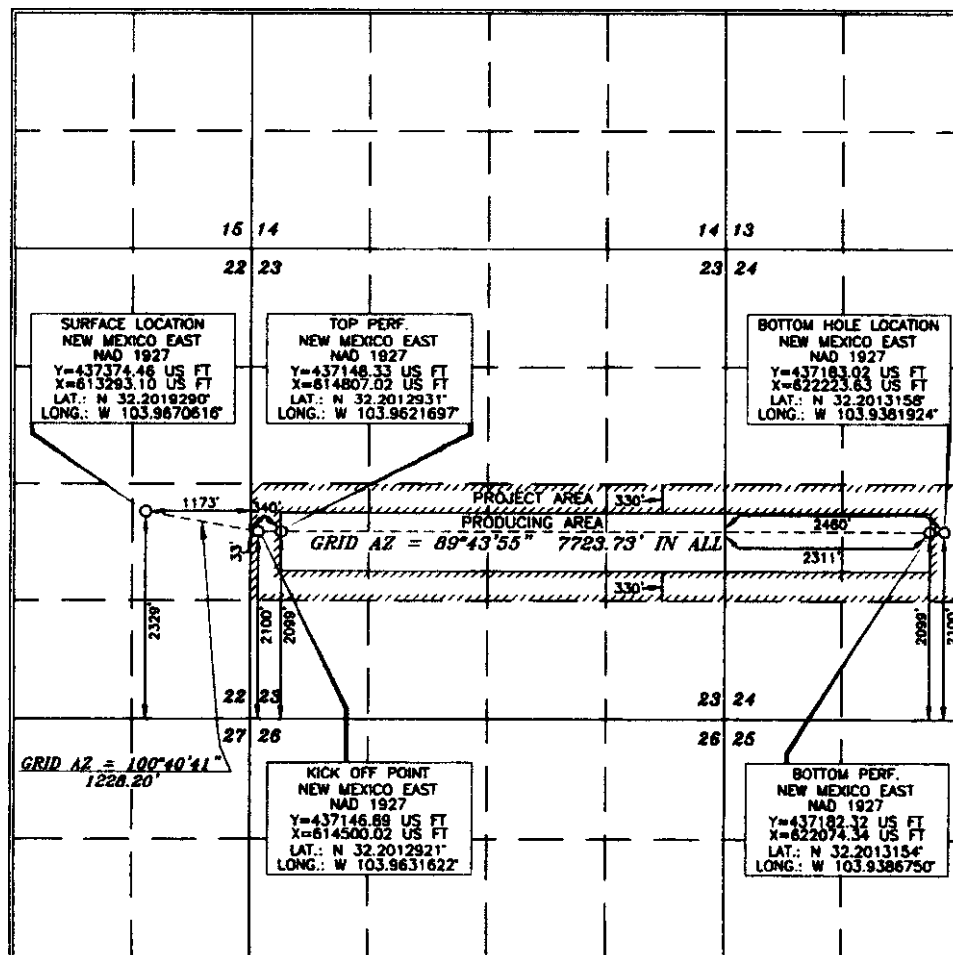
Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	22	24 SOUTH	29 EAST, N.M.P.M.		2329'	SOUTH	1173'	EAST	EDDY

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
K	24	24 SOUTH	29 EAST, N.M.P.M.		2100'	SOUTH	2460'	WEST	EDDY
Dedicated Acres	Joint or Infill	Consolidation Code	Order No.						

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature _____ Date _____

Printed Name _____

E-mail Address _____

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Date of Survey _____

Signature and Seal of Professional Surveyor _____

Tom J. Anderson 3/15/2016
Certificate Number 15079

WO# 160223WL-a (NA)

Division I
1425 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-4161 Fax: (575) 393-0720
Division II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
Division III
1000 Rio Blanco Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
Division IV
1230 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name
Property Code	Property Name CEDAR CANYON "23" FEDERAL COM	Well Number 33H
OGRID No.	Operator Name OXY USA INC.	Elevation 2947.9'

Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	22	24 SOUTH	29 EAST, N.M.P.M.		2344'	SOUTH	1199'	EAST	EDDY

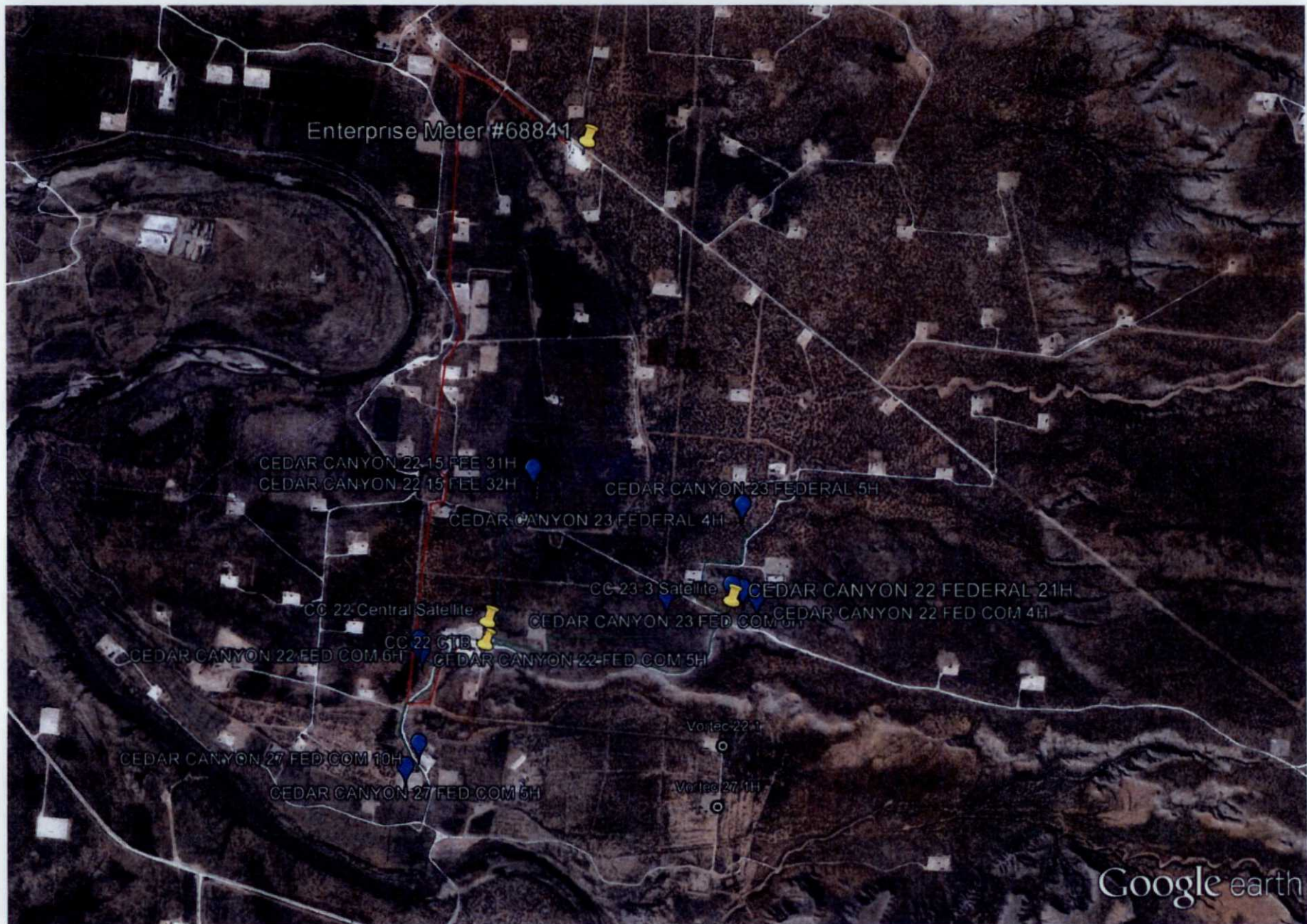
Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
K	24	24 SOUTH	29 EAST, N.M.P.M.		2270'	SOUTH	2460'	WEST	EDDY
Dedicated Acres		Joint or Infill	Consolidation Code	Order No.					

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

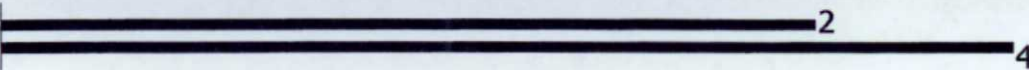
						OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. Signature _____ Date _____ Printed Name _____ E-mail Address _____	
SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from reliable copies of actual surveys made by me or under my supervision, and that the same is right and correct to the best of my belief. Date of Survey FEBRUARY 23, 2016 Signature and Seal of Professional Surveyor <i>Tom J. O'Leary</i> 3/15/2016 Certificate Number 15079 WOL 160223WL-b (N4)						PROFESSIONAL LAND SURVEYOR 15079	

GAS SALES & FLOWLINE MAP



Google Earth Pro

miles
km



Ownership by Lease

<u>Well</u>	<u>Lease</u>	<u>Working Interest</u>	<u>Overriding Royalty Interest</u>
Cedar Canyon 22 Fed Com 4H Cedar Canyon 22 Fed Com 5H	NMNM 013996 NMNM 081586	OXY USA Inc. - 95.4941% Mobile Producing: 2.0834% GD McKinney: 0.8019% Wayne/Linda Newkumet: 0.7873% B. Jack Reed: 0.1667% Leopard Petroleum LP: 0.1667% DRW Energy, LLC: 0.1667% Beryl Oil & Gas, LP: 0.1667% M'Lissa L. McKinney Schoening: 0.1667%	NM 13996 Sharbro Oil Ltd. Co. - 5.00% Rutter Wilbanks Corp. - 0.932050% Fina Oil and Chemical Company- 0.220930% NM 81586 Curtis A. Anderson & Edna I. Anderson- 1.5% John S. Tittle- 1.125% Michael A. Kulenguski- 0.5625% MAP000+NET-0.610714% The Roach Foundation- 0.344654% Kimbell Art Foundation- 2.793939% Bill Burton- 0.042750% Ben J. Fortson, III, Children's Trust- 0.020358% Robert C. Grable- 0.020358% MWB 1998 Trust- 0.006107% CCB 1998 Trust- 0.006107% DCB 1998 Trust- 0.00617% Sundance Minerals I- 0.078594%

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 4
Submitted by:
OXY USA, INC.
Hearing Date: September 15, 2016



Ownership by Lease

<u>Well</u>	<u>Lease</u>	<u>Working Interest</u>	<u>Overriding Royalty Interest</u>
Cedar Canyon 23 Federal #4H Cedar Canyon 23 Federal #5H Cedar Canyon 23 Federal 3H	NMNM 081586	OXY USA Inc. - 100%	NM 81586 Curtis A. Anderson & Edna I. Anderson- 1.5% John S. Tittle- 1.125% Michael A. Kulenguski- 0.5625% MAP000+NET-0.610714% The Roach Foundation- 0.344654% Kimbell Art Foundation- 2.793939% Bill Burton- 0.042750% Ben J. Fortson, III, Children's Trust- 0.020358% Robert C. Grable- 0.020358% MWB 1998 Trust- 0.006107% CCB 1998 Trust- 0.006107% DCB 1998 Trust- 0.00617% Sundance Minerals I- 0.078594%

Ownership by Lease

<u>Well</u>	<u>Lease</u>	<u>Working Interest</u>	<u>Overriding Royalty Interest</u>
Cedar Canyon 22 Federal 21H	NMNM 081586	OXY USA Inc.- 95.4941% Mobile Producing- 2.0834% GD McKinney- 0.8019% Wayne/Linda Newkumet- 0.7873% B. Jack Reed- 0.1667% Gerald A. Hancock- 0.1667% DRW Energy, LLC- 0.1667% Beryl Oil & Gas, LP- 0.1667% M'Lissa L. McKinney Schoening- 0.1667%	NM 81586 Curtis A. Anderson & Edna I. Anderson- 1.5% John S. Tittle- 1.125% Michael A. Kulenguski- 0.5625% MAP000+NE T- 0.610714% The Roach Foundation- 0.344654% Kimbell Art Foundation- 2.793939% Bill Burton- 0.042750% Ben J. Fortson, III, Children's Trust- 0.020358% Robert C. Grable- 0.020358% MWB 1998 Trust- 0.006107% CCB 1998 Trust- 0.006107% DCB 1998 Trust- 0.00617% Sundance Minerals I- 0.078594%

Ownership by Lease

<u>Well</u>	<u>Lease</u>	<u>Working Interest</u>	<u>Overriding Royalty Interest</u>	<u>Additional Overriding Royalty Interest</u>
Cedar Canyon 23 Fed Com #33H Cedar Canyon 23 Fed Com #6H	NMNM 081586 NMNM 093477 NMNM 088138	OXY USA Inc. - 100.00%	<u>NM 81586</u> Curtis A. Anderson & Edna I. Anderson- 1.5% John S. Tittle- 1.125% Michael A. Kulenguski- 0.5625% MAP000+NET-0.610714% The Roach Foundation- 0.344654% Kimbell Art Foundation- 2.793939% Bill Burton- 0.042750% Ben J. Fortson, III, Children's Trust- 0.020358% Robert C. Grable- 0.020358% MWB 1998 Trust- 0.006107% CCB 1998 Trust- 0.006107% DCB 1998 Trust- 0.00617% Sundance Minerals I- 0.078594% <u>NM 093477</u> Curtis A. Anderson & Edna I. Anderson- 0.153% Collins & Ware, Inc. - 0.51%	<u>NM 088138</u> Curtis A. Anderson & Edna I. Anderson- 1.5% C. Mark Wheeler- 0.019531% John Thoma- 0.023438% Sandra Thoma- 0.023438% Paul R. Barwis- 0.039062% Jareed Partners, Ltd. - 0.039062% Penwell Employee Royalty Pool- 0.011719% MAP000+NET-0.160266% The Roach Foundation- 0.090446% Kimbell Art Foundation- 0.733201% Bill Burton- 0.011219% Ben J. Fortson, III, Children's Trust- 0.005342% Robert C. Grable- 0.0005342% MWB 1998 Trust- 0.006103% CCB 1998 Trust- 0.006103% DCB 1998 Trust- 0.006103% Sundance Minerals I- 0.020625%

Well List

Lease Number	CA #	Well Name	API	Surface Location	Pool	Oil (bpd)	Gravity	Gas (MSCFD)	BTU/cf	Water (bpd)
NMNM 081586	N/A	Cedar Canyon 22 Fed 21H	30-015-43642	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E					
NMNM 013996 NMNM081586	Pending	Cedar Canyon 22 Fed Com 4H	30-015-43708	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E					
NMNM 013996 NMNM081586	Pending	Cedar Canyon 22 Fed Com 5H	30-015-43758	Sec 22, T 24S, R 29 E	Corral Draw Bone Spring					
NMNM 081586	N/A	Cedar Canyon 23 Fed 3H	30-015-43290	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E					
NMNM 081586	N/A	Cedar Canyon 23 Fed 4H	30-015-43281	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	522	42.2	1898	1000	875
NMNM 081586	N/A	Cedar Canyon 23 Fed 5H	30-015-43282	Sec 22, T 24S, R 29 E	Pierce Crossing; Bone Spring E	471	43.3	1555	1000	728
NMNM 081586 NMNM093477 NMNM 088138	Pending	Cedar Canyon 23 Fed Com 6H	Not yet filed	Sec 23, T 24S, R 29 E	Pierce Crossing; Bone Spring E					
NMNM 081586 NMNM093477 NMNM 088138	Pending	Cedar Canyon 23 Fed Com 33H	Not yet filed	Sec 23, T 24S, R 29 E	Pierce Crossing; Bone Spring E					

* Represents wells not yet drilled, values are estimated

BEFORE THE OIL CONSERVATION DIVISION
 Santa Fe, New Mexico
 Exhibit No. 5
 Submitted by:
OXY USA, INC.
 Hearing Date: September 15, 2016



**APPLICATION OF OXY USA INC. FOR APPROVAL OF SURFACE POOL-LEASE
COMMINGLING, OFF-LEASE STORAGE, AND OFF-LEASE MEASUREMENT,
EDDY COUNTY, NEW MEXICO.**

AFFIDAVIT

Jordan L. Kessler, attorney in fact and authorized representative of OXY USA Inc., the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application was provided under the notice letter attached hereto.


Jordan L. Kessler

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



Notary Public

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 6
Submitted by:
OXY USA, INC.
Hearing Date: September 15, 2016



Jordan L. Kessler
Phone (505) 988-4421
Fax (505) 983-6043

JLKessler@hollandhart.com

August 26, 2016

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: AFFECTED PARTIES

**Re: Application OXY USA Inc. For Approval of Surface Pool-Lease
Commingling, Off-Lease Storage, and Off-Lease Measurement, Eddy
County, New Mexico.**

This letter is to advise you that OXY USA Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. This application has been set for hearing before a Division Examiner at 8:15 a.m. on September 16, 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.

Parties appearing in cases are required to file a Pre-hearing Statement four business 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.

Questions concerning this application should be directed to Yolanda Perez at OXY USA Inc. (713) 497-2069 or Yolanda_perez@oxy.com.

Sincerely,

A handwritten signature in black ink, appearing to read 'JL Kessler'.

Jordan L. Kessler
ATTORNEY FOR OXY USA INC.

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. ☐

**OXY USA INC
CEDAR CANYON 23 FEDERAL NO. 3H WELL**

MOBIL PRODUCING
PO BOX 951027
DALLAS, TX 77252

GD MCKINNEY
INVESTMENTS LP
300 N MARIENFELD,
SUITE 1100
MIDLAND, TX 79701

WAYNE/LINDA
NEWKUMET
PO BOX 11330
MIDLAND, TX 79702

B. JACK REED
506 CHARISMATIC
MIDLAND, TX 79705

GERALD A. HANCOCK
4200 FAIRWOOD
MIDLAND, TX 79707

DRW ENERGY, LLC
4107 TANFORAN
MIDLAND, TX 79707

BERYL OIL & GAS, LP
6707 PEBBLE COURT
MIDLAND, TX 79707

M'LISSA L .MCKINNEY
SCHOENING
300 N MARIENFELD,
SUITE 1100
MIDLAND, TX 79701

SHARBRO OIL LTD. CO.
PO BOX840
ARTESIA, NM 88211

RUTTER WILBANKS CORP.
PO BOX 3186
MIDLAND, TX 79701

FINA OIL AND CHEMICAL
COMPANY
PO BOX 301105
DALLAS, TX 75303

CURTIS A .ANDERSON &
EDNA I .ANDERSON
9314 CHERRY BROOK LANE
FRISCO, TX 75033

JOHN S .TITTL
7304 VALENCIA GROVE COURT
FORT WORTH, TX 76132

MICHAEL A. KULENGUSKI
279 JONES MT ROAD
MADISON, VA 22727

MAPOOO+NET
P.O. BOX 268946
OKLAHOMA CITY, OK 73126

THE ROACH FOUNDATION
777 TAYLOR ST PII-J
FORT WORTH, TX 76102

KIMBELL ART FOUNDATION
301 COMMERCE ST
SUITE 2300
FORT WORTH, TX 76102

BILL BURTON
301 COMMERCE ST
SUITE 2900
FORT WORTH, TX 76102

BEN J. FORTSON, III,
CHILDREN'S TRUST
P O BOX 29
FORT WORTH, TX 76101

ROBERT C .GRABLE
201 MAIN STREET
FORT WORTH, TX 76102

MWB 1998 TRUST
301 COMMERCE ST
STE 2900
FORT WORTH, TX 76102

CCB 1998 TRUST
301 COMMERCE STREET
FORT WORTH, TX 76102

DCB 1998 TRUST
301 COMMERCE STREET
FORT WORTH, TX 76102

SUNDANCE MINERALS I
PO BOX 17744
FORT WORTH, TX 76102

BOYT,ERIC D
PO BOX 2602
MIDLAND, TX 79702

HANTIULA,JUDITH GENE
3704 SAN GABRIEL
AVENUE
FRISCO, TX 75033

HARROUN IRREV TRUST,
DOROTHY S
PO BOX 3480
OMAHA, NE 68103

**OXY USA INC
CEDAR CANYON 23 FEDERAL NO. 3H WELL**

HARROUN REV TRUST,D STUART
515 TRES LAGUNAS LANE NE
ALBUQUERQUE, NM 87113

J M MINERAL & LAND CO INC
PO BOX1015
MIDLAND, TX 79702

KEENE, TARA L
18700 COLLINS STREET
TARZANA, CA 91356

MAGNOLIA ROYALTY
COMPANY INC
PO BOX10703
MIDLAND, TX 79702

NEAL,JEFFREY CASWELL
1311 DOEPP DRIVE
CARLSBAD, NM 88220

NELMS,PIPER L
18706 COLLIN ST
TARZANA, CA 91356

SOFTSEARCH INVESTMENT LP
PO BOX89
ABILENE, TX 79604

SOFTVEST MANAGEMENT LP
PO BOX 89
ABILENE, TX 79604

VOGT TRUST, ANDREW AND JANET
13404 PIEDRA GRANDE PLACE NE
ALBUQUERQUE, NM 87111

WALKER III, HERMAN CLIFFORD
PO BOX 10135
MIDLAND, TX 79702

ANDERSON AND, CURTIS A
9314 CHERRY BROOK LANE
FRISCO TX 75033

BURTON, WILLIAM K
301 COMMERCE ST,
SUITE 2900
FORT WORTH, TX 76102

FORTSON III CHILDRENS
TRUST, BEN J
P O BOX 29
FORT WORTH, TX 76101

GRABLE, ROBERT C
201 MAIN STREET
FORT WORTH, TX 76102

MAPOO-NET TX GENERAL
PARTNERSHIP
P.O. BOX 268946
OKLAHOMA CITY, OK 73126

PENROC OIL CORPORATION
PO BOX 2769
HOBBS, NM 88241

ROACH FOUNDATION INC
777 TAYLOR ST PII-J
FORT WORTH, TX 76102

RUTTER & WILBANKS
CORPORATION
BOX 3186
MIDLAND, TX 79701

BERYL OIL AND GAS LP
6707 PEBBLE COURT
MIDLAND, TX 79707

DRW ENERGY LLC
4107 TANFORAN
MIDLAND, TX 79707

LEOPARD PETROLEUM LP
4200 FAIRWOOD PL
MIDLAND, TX 79707

MOBIL PRODUCING TEXAS &
4500 DACOMA ST. CORP-BH3-212
HOUSTON, TX 77092

NEWKUMET, WAYNE & LINDA
PO BOX 11330
MIDLAND, TX 79702

REED, BJACK
506 CHARISMATIC
MIDLAND, TX 79705

SCHOENING, M'LISSA M
300 N MARIENFELD,
STE 1100
MIDLAND, TX 79701

7015 0640 0001 7532 3907

U.S. Postal Service™
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For delivery information, visit **OFFICIAL** **MHF/OXY CEDAR CANYON**

Certified Mail Fee \$ 3.45

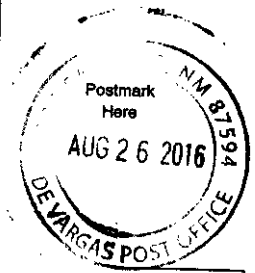
Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$ <u>2.80</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage

MOBIL PRODUCING
PO BOX 951027
DALLAS, TX 77252

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

MOBIL PRODUCING
PO BOX 951027
DALLAS, TX 77252

9590 9402 1203 5246 0682 10

2. Article Number (Transfer from service label)
7015 0640 0001 7532 3907

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X Albert A. Trevino

B. Received by (Printed Name) **Albert A. Trevino** C. Date of Delivery **AUG 30 2016**

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

7015 0640 0001 7532 3891

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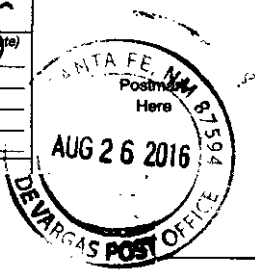
Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$ <u>2.80</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage

GD MCKINNEY INVESTMENTS LP
300 N MARIENFELD, SUITE 1100
MIDLAND, TX 79701

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



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 ■ 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:

GD MCKINNEY INVESTMENTS LP
300 N MARIENFELD, SUITE 1100
MIDLAND, TX 79701

9590 9402 1203 5246 0682 27

2. Article Number (Transfer from service label)
7015 0640 0001 7532 3891

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X [Signature]

B. Received by (Printed Name) **[Name]** C. Date of Delivery **8/29**

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

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OFFICE

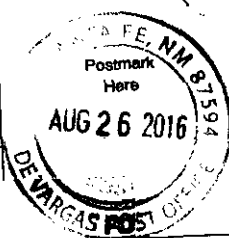
MHF/OXY
 CEDAR CANYON

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.80
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

WAYNE/LINDA
 NEWKUMET
 PO BOX 11330
 MIDLAND, TX 79702



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

See Reverse for Instructions

7015 0640 0001 7532 3877

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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For delivery information, visit

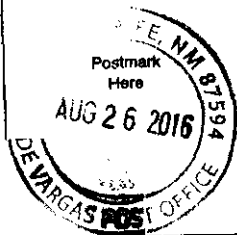
OFFICE

MHF/OXY
 CEDAR CANYON

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.80
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

B. JACK REED
 506 CHARISMATIC
 MIDLAND, TX 79705



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

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1. Article Addressed to:

B. JACK REED
 506 CHARISMATIC
 MIDLAND, TX 79705

9590 9402 1203 5246 0682 41

2. Article Number (Transfer from service label)

7015 0640 0001 7532 3877

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

B. Jack Reed

☐ Agent
☐ Addressee

B. Received by (Printed Name)

B. JACK REED

C. Date of Delivery

8-30-16

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7532 3860

U.S. Postal ServiceTM
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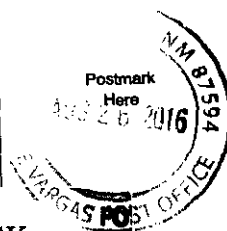
For delivery information, visit our

MHF/OXY
OFFICE
 CEDAR CANYON

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

GERALD A. HANCOCK
 4200 FAIRWOOD
 MIDLAND, TX 79707



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

See Reverse for Instructions

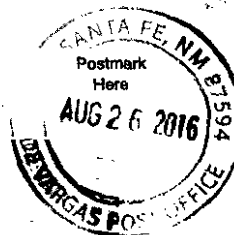
U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our

MHF/OXY
OFFICE
 CEDAR CANYON

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 \$

DRW ENERGY, LLC
 4107 TANFORAN
 MIDLAND, TX 79707



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

See Reverse for Instructions

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- 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:

GERALD A. HANCOCK
 4200 FAIRWOOD
 MIDLAND, TX 79707

9590 9402 1203 5246 0682 58

2. Article Number (Transfer from service label)

7015 0640 0001 7532 3860

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Melinda Hancock

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Melinda Hancock

C. Date of Delivery

8-31-16

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail Restricted Delivery

☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

(over 500)

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:

DRW ENERGY, LLC
 4107 TANFORAN
 MIDLAND, TX 79707

9590 9402 1203 5246 0682 65

2. Article Number (Transfer from service label)

7015 0640 0001 7532 3853

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x J Coursey

☐ Agent
☐ Addressee

B. Received by (Printed Name)

J Coursey

C. Date of Delivery

8-30-16

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

948E 2552 7532 3846

7015 0640 0000 0490 5102

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MHF/OXY
CEDAR CANYON

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 \$

Postmark
 AUG 26 2016
 EVANGAS POST OFFICE

BERYL OIL & GAS, LP
6707 PEBBLE COURT
MIDLAND, TX 79707

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

689E 2552 7532 3839

7015 0640 0001 7532 3839

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For delivery information, visit our **OFFICIAL** website at **usps.com**

MHF/OXY
CEDAR CANYON

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 \$

Postmark
 AUG 26 2016
 EVANGAS POST OFFICE

M'LISSA L. MCKINNEY
SCHOENING
300 N MARIENFELD,
SUITE 1100
MIDLAND, TX 79701

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

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 ■ 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:
M'LISSA L. MCKINNEY
SCHOENING
300 N MARIENFELD,
SUITE 1100
MIDLAND, TX 79701

2. Article Number (Transfer from service label)
7015 0640 0001 7532 3839

3. Service Type
☐ Adult Signature
☒ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

9590 9402 1203 5246 0682 89

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name)
C. Date of Delivery
8/29

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

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

7015 0640 0001 7532 3815

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For delivery information, visit our **OFFICIAL** **MHF/OXY CEDAR CANYON**

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy)	\$ <u>2.80</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here

SHARBRO OIL LTD. CO.
PO BOX840
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:

SHARBRO OIL LTD. CO.
PO BOX840
ARTESIA, NM 88211

9590 9402 1203 5246 0683 02

2. Article Number (Transfer from service label)

7015 0640 0001 7532 3815

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Calvin Hunter C. Date of Delivery 8-30-16

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	
☐ Mail Restricted Delivery	

Domestic Return Receipt

7015 0640 0001 7532 4300

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

For delivery information, visit our **OFFICIAL** **MHF/OXY CEDAR CANYON**

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy)	\$ <u>2.80</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here

RUTTER WILBANKS CORP
PO BOX 3186
MIDLAND, TX 79701

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

7015 0640 0001 7532 3822

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

For delivery information, visit usps.com

OFFICE

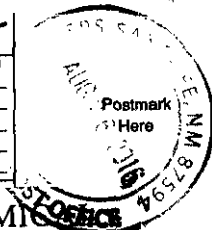
MHF/OXY
CEDAR CANYON

Certified Mail Fee

\$ 3.95
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$ 2.80
☐ Return Receipt (electronic) \$ 0.00
☐ Certified Mail Restricted Delivery \$ 0.00
☐ Adult Signature Required \$ 0.00
☐ Adult Signature Restricted Delivery \$ 0.00

Postmark

FINA OIL AND CHEMICAL
 COMPANY
 PO BOX 301105
 DALLAS, TX 75303



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:

FINA OIL AND CHEMICAL
 COMPANY
 PO BOX 301105
 DALLAS, TX 75303

9590 9402 1203 5246 0682 96

2. Article Number (Transfer from service label)

7015 0640 0001 7532 3822

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Heim

☐ 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

SEP 01 2016

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7532 4294

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

For delivery information, visit usps.com

OFFICE

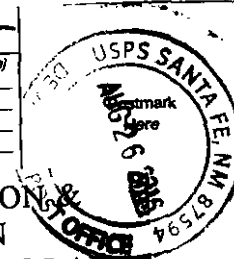
MHF/OXY
CEDAR CANYON

Certified Mail Fee

\$ 3.95
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$ 2.80
☐ Return Receipt (electronic) \$ 0.00
☐ Certified Mail Restricted Delivery \$ 0.00
☐ Adult Signature Required \$ 0.00
☐ Adult Signature Restricted Delivery \$ 0.00

Postmark

CURTIS A. ANDERSON &
 EDNA I. ANDERSON
 9314 CHERRY BROOK LANE
 FRISCO, TX 75033



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:

CURTIS A. ANDERSON &
 EDNA I. ANDERSON
 9314 CHERRY BROOK LANE
 FRISCO, TX 75033

9590 9402 1838 6104 7683 10

2. Article Number (Transfer from service label)

7015 0640 0001 7532 4294

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Anderson

☐ 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

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7532 4267

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFIC**MHF/OXY
CEDAR CANYON

Certified Mail Fee

345
280

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

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$



JOHN S. TITTL
 7304 VALENCIA GROVE COURT
 FORT WORTH, TX 76132

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

See Reverse for Instructions

SENDER:

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

1. Article Addressed to:

JOHN S. TITTL
 7304 VALENCIA GROVE COURT
 FORT WORTH, TX 76132

9590 9402 1838 6104 7683 03

2. Article Number (Transfer from service label)

7015 0640 0001 7532 4267

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

Domestic Return Receipt

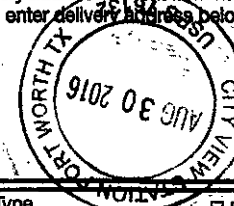
☒ Agent
☐ Addressee

B. Received by (Printed Name) John S. Tittl C. Date of Delivery Aug 26 2016

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail[®]
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express[®]
- ☐ Registered MailTM
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☒ Signature ConfirmationTM
- ☐ Signature Confirmation Restricted Delivery



7015 0640 0001 7532 4270

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFIC**MHF/OXY
CEDAR CANYON

Certified Mail Fee

345
280

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

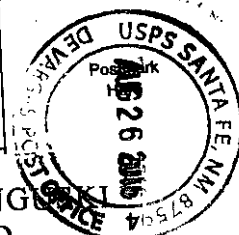
☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$



MICHAEL A. KULENGUSKI
 279 JONES MT ROAD
 MADISON, VA 22727

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:

MICHAEL A. KULENGUSKI
 279 JONES MT ROAD
 MADISON, VA 22727

9590 9402 1838 6104 7682 97

2. Article Number (Transfer from service label)

7015 0640 0001 7532 4270

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Michael A. Kulenguski ☐ Agent ☐ Addressee

B. Received by (Printed Name) Michael A. Kulenguski C. Date of Delivery Aug 26 2016

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail[®]
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express[®]
- ☐ Registered MailTM
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☒ Signature ConfirmationTM
- ☐ Signature Confirmation Restricted Delivery

7015 0640 0001 7532 4263

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

For delivery information, visit

OFFIC

**MHF/OXY
CEDAR CANYON**

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

**MAPOOO+NET
P.O. BOX 268946
OKLAHOMA CITY, OK 73126**



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:

**MAPOOO+NET
P.O. BOX 268946
OKLAHOMA CITY, OK 73126**

9590 9402 1838 6104 7682 80

2. Article Number (Transfer from service label)

7015 0640 0001 7532 4263

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

ED JONES

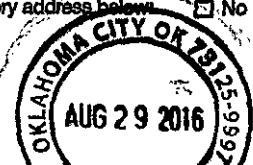
☐ Agent

☐ 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

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ All Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☒ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

7015 0640 0001 7532 4256

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

For delivery information, visit

OFFIC

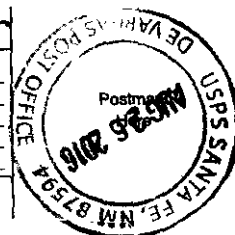
**MHF/OXY
CEDAR CANYON**

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

**THE ROACH FOUNDATION
777 TAYLOR ST PII-J
FORT WORTH, TX 76102**



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 ROACH FOUNDATION
777 TAYLOR ST PII-J
FORT WORTH, TX 76102**

9590 9402 1838 6104 7682 73

2. Article Number (Transfer from service label)

7015 0640 0001 7532 4256

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

S. Fakman

☐ 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

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ All Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☒ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7532 4249

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

For delivery information, visit our **OFFICIAL** website at **usps.com**

MHF/OXY CEDAR CANYON

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 \$ _____

KIMBELL ART FOUNDATION
301 COMMERCE ST
SUITE 2300
FORT WORTH, TX 76102

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

7015 0640 0001 7532 4232

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

For delivery information, visit our **OFFICIAL** website at **usps.com**

MHF/OXY CEDAR CANYON

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 \$ _____

BILL BURTON
301 COMMERCE ST
SUITE 2900
FORT WORTH, TX 76102

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

CERTIFIED MAIL
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT NOTCHED LINE.

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

Article Addressed to:
KIMBELL ART FOUNDATION
301 COMMERCE ST
SUITE 2300
FORT WORTH, TX 76102

9590 9402 1838 6104 7682 66

2. Article Number (Transfer from service label)
7015 0640 0001 7532 4249

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Mark R... ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Mark R...

C. Date of Delivery
AUG 31 2016

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
☐ Insured Mail ☐ Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

Article Addressed to:
BILL BURTON
301 COMMERCE ST
SUITE 2900
FORT WORTH, TX 76102

9590 9402 1838 6104 7682 59

2. Article Number (Transfer from service label)
7015 0640 0001 7532 4232

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Suzanne Dunbar ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Suzanne Dunbar

C. Date of Delivery
8/29

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
☐ Insured Mail ☐ Restricted Delivery

7015 0640 0001 7532 4225

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

For delivery information, visit **MHF/OXY CEDAR CANYON OFFIC**

Certified Mail Fee \$ 3.45

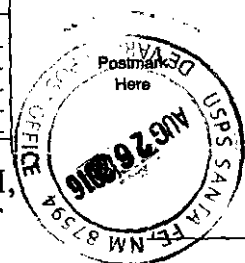
Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy)	\$ <u>2.80</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here

**BEN J. FORTSON, III,
 CHILDREN'S TRUST
 P O BOX 29
 FORT WORTH, TX 76101**

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



7015 0640 0001 7532 4225

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

For delivery information, visit **MHF/OXY CEDAR CANYON OFFIC**

Certified Mail Fee \$ 3.45

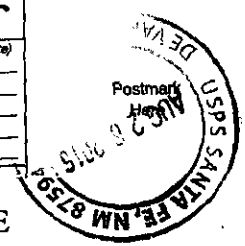
Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy)	\$ <u>2.80</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here

**ROBERT C. GRABLE
 201 MAIN STREET
 FORT WORTH, TX 76102**

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:
**BEN J. FORTSON, III,
 CHILDREN'S TRUST
 P O BOX 29
 FORT WORTH, TX 76101**

9590 9402 1838 6104 7682 42

2. Article Number (Transfer from service label)
7015 0640 0001 7532 4225

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x Abigail Niehaus ☐ Agent ☐ Addressee

B. Received by (Printed Name) Abigail Niehaus C. Date of Delivery AUG 31 2016

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
☐ Mail Restricted Delivery	

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

8832 7532 1000 0640 7531 7838

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

For delivery information, visit **OFFIC**

MHF/OXY
 CEDAR CANYON

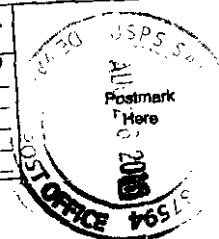
Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$ 345
☐ Return Receipt (electronic) \$ 280
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

MWB 1998 TRUST
 301 COMMERCE ST
 STE 2900
 FORT WORTH, TX 76102

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

See Reverse for Instructions



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

For delivery information, visit **OFFIC**

MHF/OXY
 CEDAR CANYON

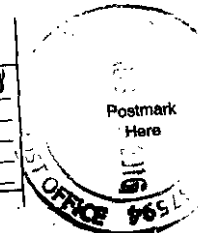
Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$ 345
☐ Return Receipt (electronic) \$ 280
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

CCB 1998 TRUST
 301 COMMERCE STREET
 FORT WORTH, TX 76102

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:

MWB 1998 TRUST
 301 COMMERCE ST
 STE 2900
 FORT WORTH, TX 76102

9590 9402 1838 6104 7683 41

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7838

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Suzanne Duncan

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Suzanne Duncan

C. Date of Delivery

8/29

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

3. Service Type

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

(over \$500)

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:

CCB 1998 TRUST
 301 COMMERCE STREET
 FORT WORTH, TX 76102

9590 9402 1838 6104 7683 58

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7845

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Suzanne Duncan

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Suzanne Duncan

C. Date of Delivery

8/29

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

3. Service Type

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

(over \$500)

Domestic Return Receipt

5482 7532 1000 0640 7845

7015 0640 0001 7531 7821

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

For delivery information, visit **MHF/OXY**
OFFIC CEDAR CANYON

Certified Mail Fee \$ 3.45

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

DCB 1998 TRUST
 301 COMMERCE STREET
 FORT WORTH, TX 76102

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:

DCB 1998 TRUST
 301 COMMERCE STREET
 FORT WORTH, TX 76102

9590 9402 1838 6104 7683 65

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7821

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Suzanne Duncan
☐ Agent
☐ Addressee

B. Received by (Printed Name)

Suzanne Duncan

C. Date of Delivery

8/25

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Insured Mail
☐ Mail Restricted Delivery (over \$500)

Domestic Return Receipt

7015 0640 0001 7531 7814

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

For delivery information, visit **MHF/OXY**
OFFIC CEDAR CANYON

Certified Mail Fee \$ 3.45

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

SUNDANCE MINERALS
 PO BOX 17744
 FORT WORTH, TX 76102

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:

SUNDANCE MINERALS I
 PO BOX 17744
 FORT WORTH, TX 76102

9590 9402 1838 6104 7683 72

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7814

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Linda Parker
☐ Agent
☐ Addressee

B. Received by (Printed Name)

LINDA PARKER

C. Date of Delivery

8/29/2016

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Mail Restricted Delivery (over \$500)

Domestic Return Receipt

7015 0640 0001 7531 7807

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

For delivery information, visit **OFFIC** **MHF/OXY**
CEDAR CANYON

Certified Mail Fee \$ 3.45
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$ 2.80
☐ Return Receipt (electronic) \$ 0.00
☐ Certified Mail Restricted Delivery \$ 0.00
☐ Adult Signature Required \$ 0.00
☐ Adult Signature Restricted Delivery \$ 0.00

Postmark Here
 AUG 22 2016
 OFFICE 75594

BOYT, ERIC D
 PO BOX 2602
 MIDLAND, TX 79702

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:

BOYT, ERIC D
 PO BOX 2602
 MIDLAND, TX 79702

9590 9402 1838 6104 7683 89

2. Article Number (Transfer from card)

7015 0640 0001 7531 7807

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent ☐ Addressee
- B. Received by (Printed Name) DMiles C. Date of Delivery 9/2/16
- 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 Restricted Delivery (over \$500) | |

Domestic Return Receipt

7015 0640 0001 7531 7791

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

For delivery information, visit **OFFIC** **MHF/OXY**
CEDAR CANYON

Certified Mail Fee \$ 3.45
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$ 2.80
☐ Return Receipt (electronic) \$ 0.00
☐ Certified Mail Restricted Delivery \$ 0.00
☐ Adult Signature Required \$ 0.00
☐ Adult Signature Restricted Delivery \$ 0.00

Postmark Here
 AUG 26 2016
 OFFICE 75594

HANTIULA, JUDITH GENE
 3704 SAN GABRIEL AVENUE
 FRISCO, TX 75033

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:

HANTIULA, JUDITH GENE
 3704 SAN GABRIEL AVENUE
 FRISCO, TX 75033

9590 9402 1838 6104 7683 96

2. Article Number (Transfer from card)

7015 0640 0001 7531 7791

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Judith Gene Hantula ☐ Agent ☐ Addressee
- B. Received by (Printed Name) Judith G. Hantula C. Date of Delivery 8/30/16
- 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 Restricted Delivery (over \$500) | |

Domestic Return Receipt

7015 0640 0001 7531 7784

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit

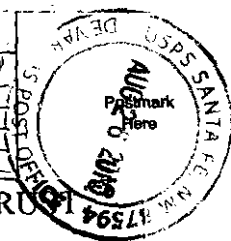
OFFICMHF/OXY
CEDAR CANYON

Certified Mail Fee

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

- ☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.80
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

HARROUN IRREV TRUST
DOROTHY S
PO BOX 3480
OMAHA, NE 68103



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:

HARROUN IRREV TRUST,
DOROTHY S
PO BOX 3480
OMAHA, NE 68103

9590 9402 1838 6104 7693 93

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7784

PS Form 3811, July 2016 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

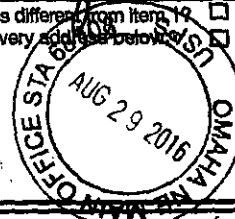
X

☐ 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

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

Domestic Return Receipt

7015 0640 0001 7531 7777

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit

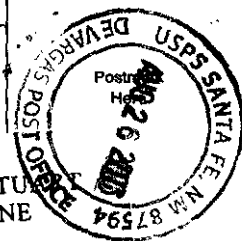
OFFICMHF/OXY
CEDAR CANYON

Certified Mail Fee

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

- ☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.80
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

HARROUN REV TRUST, D STUART
515 TRES LAGUNAS LANE NE
ALBUQUERQUE, NM 87113



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:

HARROUN REV TRUST, D STUART
515 TRES LAGUNAS LANE NE
ALBUQUERQUE, NM 87113

9590 9402 1838 6104 7694 09

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7777

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

STUART HARROUN 9/2/16

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

3. Service Type

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

Domestic Return Receipt

7015 0640 0001 7531 7760

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit **OFFICIAL**MHF/OXY
CEDAR CANYON

Certified Mail Fee

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

- ☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.70
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$



J M MINERAL & LAND CO INC
PO BOX 1015
MIDLAND, TX 79702

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:

J M MINERAL & LAND CO INC
PO BOX 1015
MIDLAND, TX 79702

9590 9402 1838 6104 7694 16

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7760

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

D. MILES

C. Date of Delivery

8/31/16

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7531 7753

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**

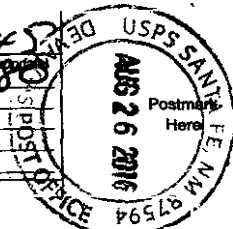
Domestic Mail Only

For delivery information, visit **OFFICIAL**MHF/OXY
CEDAR CANYON

Certified Mail Fee

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

- ☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.70
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$



KEENE, TARA L
18700 COLLINS STREET
TARZANA, CA 91356

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:

KEENE, TARA L
18700 COLLINS STREET
TARZANA, CA 91356

9590 9402 1838 6104 7691 26

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7753

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

T. MILES

C. Date of Delivery

8-30-16

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7647 7531 0001 0640 2015

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

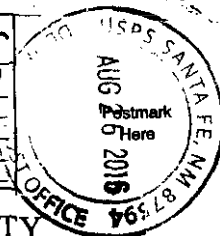
For delivery information, visit usps.com

OFFICE

MHF/OXY
 CEDAR CANYON

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.88
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$



MAGNOLIA ROYALTY
 COMPANY INC
 PO BOX10703
 MIDLAND, TX 79702

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

See Reverse for Instructions

7630 7531 0001 0640 2015

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

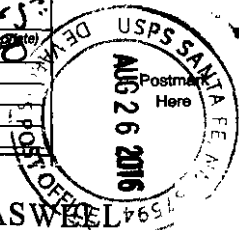
For delivery information, visit usps.com

OFFICE

MHF/OXY
 CEDAR CANYON

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.88
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$



NEAL, JEFFREY CASWELL
 1311 DOEPP DRIVE
 CARLSBAD, NM 88220

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:

MAGNOLIA ROYALTY
 COMPANY INC
 PO BOX10703
 MIDLAND, TX 79702

9590 9402 1838 6104 7694 4/

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7647

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent
☐ Addressee

B. Received by (Printed Name)

DMiles

C. Date of Delivery

9/8/16

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
☐ Insured Mail ☐ Mail Restricted Delivery

(30)

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:

NEAL, JEFFREY CASWELL
 1311 DOEPP DRIVE
 CARLSBAD, NM 88220

9590 9402 1838 6104 7694 3U

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7630

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

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

☐ 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 ☐ Mail Restricted Delivery

(30)

Domestic Return Receipt

7015 0640 0001 7531 7623

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

OFFICE

MHF/OXY
CEDAR CANYON

Certified Mail Fee

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$ 2.80

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

NELMS, PIPER L
18706 COLLIN ST
TARZANA, CA 91356

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:

NELMS, PIPER L
18706 COLLIN ST
TARZANA, CA 91356

9590 9402 1838 6104 7694 54

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7623

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Piper Nelms

☐ Agent
☒ Addressee

B. Received by (Printed Name)

Piper Nelms

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

Domestic Return Receipt

7015 0640 0001 7531 7616

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

OFFICE

MHF/OXY
CEDAR CANYON

Certified Mail Fee

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$ 2.80

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

SOFTSEARCH INVESTMENT LP
PO BOX 89
ABILENE, TX 79604

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:

SOFTSEARCH INVESTMENT LP
PO BOX 89
ABILENE, TX 79604

9590 9402 1838 6104 7694 61

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7616

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X C. Deform

☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Deform

C. Date of Delivery

8-29-16

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

Domestic Return Receipt

7015 0640 0001 7531 7609

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

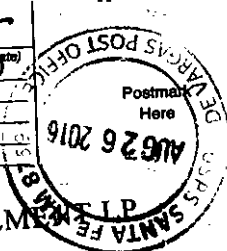
For delivery information, visit usps.com

OFFICE

MHF/OXY
CEDAR CANYON

Certified Mail Fee

\$ 345
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 280
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$



SOFTVEST MANAGEMENT LP
 PO BOX 89
 ABILENE, TX 79604

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:

SOFTVEST MANAGEMENT LP
 PO BOX 89
 ABILENE, TX 79604

9590 9402 1838 6104 7694 78

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7609

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Adrian M. Orlis

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Adrian M. Orlis

C. Date of Delivery

8-29-16

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Mail Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7531 7593

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

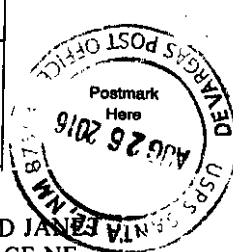
For delivery information, visit usps.com

OFFICE

MHF/OXY
CEDAR CANYON

Certified Mail Fee

\$ 345
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 280
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$



VOGT TRUST, ANDREW AND JANET
 13404 PIEDRA GRANDE PLACE NE
 ALBUQUERQUE, NM 87111

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:

VOGT TRUST, ANDREW AND JANET
 13404 PIEDRA GRANDE PLACE NE
 ALBUQUERQUE, NM 87111

9590 9402 1838 6104 7694 85

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7593

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Janet V. Orlis

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Janet V. Orlis

C. Date of Delivery

8/29/16

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Mail Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7531 7586

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

For delivery information, visit **MHF/OXY**
OFFIC CEDAR CANYON

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy)	\$ <u>2.70</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here
 AUG 26 2016
 SAN ANTONIO, TX 78201

WALKER III, HERMAN CLIFFORD
 PO BOX 10135
 MIDLAND, TX 79702

City, ZIP+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 0640 0001 7531 7586

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:

WALKER III, HERMAN CLIFFORD
 PO BOX 10135
 MIDLAND, TX 79702

9590 9402 1838 6104 7694 92

2. Article Number (Transfer from service label)
 7015 0640 0001 7531 7586

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) DMiles C. Date of Delivery 9/8/16

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

Domestic Return Receipt

7015 0640 0001 7531 7579

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

For delivery information, visit **MHF/OXY**
OFFIC CEDAR CANYON

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy)	\$ <u>2.70</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here
 AUG 26 2016
 SAN ANTONIO, TX 78201

ANDERSON AND, CURTIS A
 9314 CHERRY BROOK LANE
 FRISCO TX 75033

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

7015 0640 0001 7531 7579

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:

ANDERSON AND, CURTIS A
 9314 CHERRY BROOK LANE
 FRISCO TX 75033

9590 9402 1838 6104 7695 08

2. Article Number (Transfer from service label)
 7015 0640 0001 7531 7579

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

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

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

Domestic Return Receipt

7552 7531 0001 0640 7531 7562

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

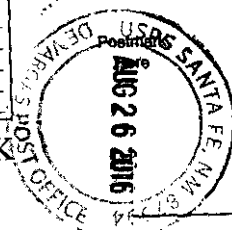
OFFICE

MHF/OXY
CEDAR CANYON

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 345
☐ Return Receipt (electronic) \$ 280
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

BURTON, WILLIAM K
 301 COMMERCE ST,
 SUITE 2900
 FORT WORTH, TX 76102



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

See Reverse for Instructions

7552 7531 0001 0640 7531 7555

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our

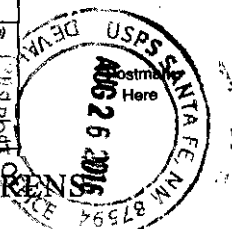
OFFICE

MHF/OXY
CEDAR CANYON

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 345
☐ Return Receipt (electronic) \$ 280
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

FORTSON III CHILDRENS
 TRUST, BEN J
 P O BOX 29
 FORT WORTH, TX 76101



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

See Reverse for Instructions

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:

BURTON, WILLIAM K
 301 COMMERCE ST,
 SUITE 2900
 FORT WORTH, TX 76102

9590 9402 1838 6104 7684 02

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7562

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Suzanne Duncan*

☐ Agent
☒ Addressee

B. Received by (Printed Name)

Suzanne Duncan

C. Date of Delivery

8/29

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Mail Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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:

FORTSON III CHILDRENS
 TRUST, BEN J
 P O BOX 29
 FORT WORTH, TX 76101

9590 9402 1838 6104 7684 19

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7555

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Abigail Nell*

☐ Agent
☒ Addressee

B. Received by (Printed Name)

Abigail Nell

AUG 29 Delivery

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Mail Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7531 7944

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

For delivery information, visit **OFFICIAL** **MHF/OXY CEDAR CANYON**

Certified Mail Fee \$ 345

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

☒ Return Receipt (hardcopy)	\$ <u>210</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here **AUG 26 2016**

GRABLE, ROBERT C
201 MAIN STREET
FORT WORTH, TX 76102

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

RETURNED

7015 0640 0001 7531 7937

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

For delivery information, visit **OFFICIAL** **MHF/OXY CEDAR CANYON**

Certified Mail Fee \$ 345

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

☒ Return Receipt (hardcopy)	\$ <u>210</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here **AUG 26 2016**

MAPOO-NET TX GENERAL PARTNERSHIP
P.O. BOX 268946
OKLAHOMA CITY, OK 73126

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
■ 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: MAPOO-NET TX GENERAL PARTNERSHIP P.O. BOX 268946 OKLAHOMA CITY, OK 73126 9590 9402 1838 6104 7685 U1 2. Article Number (Transfer from service label) 7015 0640 0001 7531 7937	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) 881015 C. Date of Delivery D. Is delivery address different from item 1? ☒ Yes ☐ No If YES, enter delivery address below: 3. Service Type <table border="0"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☒ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> <tr> <td>☐ Mail Restricted Delivery</td> <td></td> </tr> </table>	☐ 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		☐ Mail Restricted Delivery	
☐ 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																	
☐ Mail Restricted Delivery																	

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

7015 0640 0001 7531 7920

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

For delivery information, visit **OFFICIAL**

MHF/OXY
CEDAR CANYON

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy)	\$ <u>2.80</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here **AUG 26 2015**

PENROC OIL CORPORATION
PO BOX 2769
HOBBS, NM 88241

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:

PENROC OIL CORPORATION
PO BOX 2769
HOBBS, NM 88241

9590 9402 1838 6104 7684 95

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7920

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

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) **Agnes Olson** 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

Domestic Return Receipt

7015 0640 0001 7531 7913

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

For delivery information, visit **OFFICIAL**

MHF/OXY
CEDAR CANYON

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy)	\$ <u>2.80</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here **AUG 26 2015**

ROACH FOUNDATION INC
777 TAYLOR ST PII-J
FORT WORTH, TX 76102

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:

ROACH FOUNDATION INC
777 TAYLOR ST PII-J
FORT WORTH, TX 76102

9590 9402 1838 6104 7684 88

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7913

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

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) **S. Eakman** C. Date of Delivery **8/29**

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

Domestic Return Receipt

7015 0640 0001 7531 7906

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

OFFIC

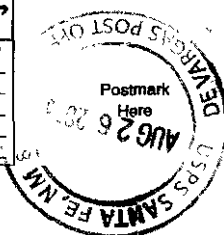
MHF/OXY
CEDAR CANYON

Certified Mail Fee

\$

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

- ☒ Return Receipt (hardcopy) \$ 345
☐ Return Receipt (electronic) \$ 280
☐ Certified Mail Restricted Delivery \$ _____
☐ Adult Signature Required \$ _____
☐ Adult Signature Restricted Delivery \$ _____



RUTTER & WILBANKS
CORPORATION
BOX 3186
MIDLAND, TX 79701

City, State, ZIP+4™

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

See Reverse for Instructions

7015 0640 0001 7531 7890

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

OFFIC

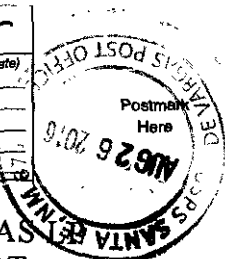
MHF/OXY
CEDAR CANYON

Certified Mail Fee

\$

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

- ☒ Return Receipt (hardcopy) \$ 345
☐ Return Receipt (electronic) \$ 280
☐ Certified Mail Restricted Delivery \$ _____
☐ Adult Signature Required \$ _____
☐ Adult Signature Restricted Delivery \$ _____



BERYL OIL AND GAS
6707 PEBBLE COURT
MIDLAND, TX 79707

City, State, ZIP+4™

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

See Reverse for Instructions

7015 0640 0001 7531 7887

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

For delivery information, visit

MHF/OXY
CEDAR CANYON

OFFICE

Certified Mail Fee

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

DRW ENERGY LLC
 4107 TANFORAN
 MIDLAND, TX 79707

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:

DRW ENERGY LLC
 4107 TANFORAN
 MIDLAND, TX 79707

9590 9402 1838 6104 7684 57

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7887

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *T. Coursey*
☐ Agent
☒ Addressee

B. Received by (Printed Name)

T. Coursey

C. Date of Delivery

8-30-16

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

(over 500)

Domestic Return Receipt

7015 0640 0001 7531 7876

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

For delivery information, visit

MHF/OXY
CEDAR CANYON

OFFICE

Certified Mail Fee

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

LEOPARD PETROLEUM LP
 4200 FAIRWOOD PL
 MIDLAND, TX 79707

City, State, ZIP+4

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:

LEOPARD PETROLEUM LP
 4200 FAIRWOOD PL
 MIDLAND, TX 79707

9590 9402 1838 6104 7684 40

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7876

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Melinda Hancock*
☐ Agent
☒ Addressee

B. Received by (Printed Name)

Melinda Hancock

C. Date of Delivery

8-31-16

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

(J)

Domestic Return Receipt

7015 0640 0001 7531 7869

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

For delivery information, visit **OFFIC**

MHF/OXY
CEDAR CANYON

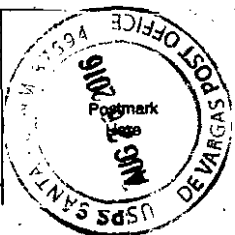
Certified Mail Fee \$ 345

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

☒ Return Receipt (hardcopy)	\$ <u>380</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

MOBIL PRODUCING TEXAS &
4500 DACOMA ST. CORP-BH3-212
HOUSTON, TX 77092

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



7015 0640 0001 7531 7852

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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MHF/OXY
CEDAR CANYON

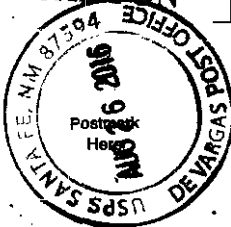
Certified Mail Fee \$ 345

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

☒ Return Receipt (hardcopy)	\$ <u>380</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

NEWKUMET, WAYNE & LINDA
PO BOX 11330
MIDLAND, TX 79702

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



SEND CERTIFIED MAIL

PLACE STICKER AT TOP OF ENVELOPE, FOLD AT DOTTED LINE

COMPLETE THIS SECTION ON DELIVERY

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

1. Article Addressed to:

MOBIL PRODUCING TEXAS &
4500 DACOMA ST. CORP-BH3-212
HOUSTON, TX 77092

9590 9402 1838 6104 7684 33

2. Article Number (Transfer from service label)
 7015 0640 0001 7531 7869

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	
☐ Mail Restricted Delivery	

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

B. Received by (Printed Name) **T. Dixon**

C. Date of Delivery **8/30/16**

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

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

7015 0640 0001 7531 7746

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OFFICE

MHF/OXY
CEDAR CANYON

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.00
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$



REED, BJACK
 506 CHARISMATIC
 MIDLAND, TX 79705

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:

REED, BJACK
 506 CHARISMATIC
 MIDLAND, TX 79705

9590 9402 1838 6104 7685 25

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7746

PS Form 3811, July 2015 PSN 7530-02-010-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☐ Agent
☐ Addressee

B. Received by (Printed Name)

B. JACK REED

C. Date of Delivery

8-30-16

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

3. Service Type

☒ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7531 7731

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT

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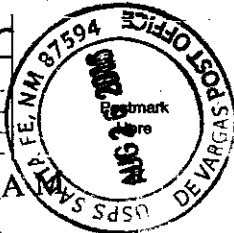
For delivery information, visit our

OFFICE

MHF/OXY
CEDAR CANYON

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.00
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$



SCHOENING, M'LISSA
 300 N MARIENFELD,
 STE 1100
 MIDLAND, TX 79701

City, State, ZIP+4®

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.

SCHOENING, M'LISSA M
 300 N MARIENFELD,
 STE 1100
 MIDLAND, TX 79701

9590 9402 1838 6104 7685 32

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7731

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

Affidavit of Publication

State of New Mexico,
County of Eddy, ss.

Danny Fletcher, being first duly
sworn, on oath says:

That he is the Publisher of the
Carlsbad Current-Argus, a
newspaper published daily at the
City of Carlsbad, in said county of
Eddy, state of New Mexico and of
general paid circulation in said
county; that the same is a duly
qualified newspaper under the laws
of the State wherein legal notices
and advertisements may be
published; that the printed notice
attached hereto was published in the
regular and entire edition of said
newspaper and not in supplement
thereof on the date as follows, to wit:

August 31 2016

That the cost of publication is
\$226.20 and that payment thereof
has been made and will be
assessed as court costs.

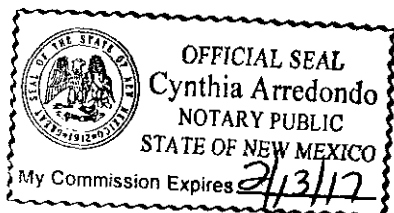
Subscribed and sworn to before me
this 31 day of August,
2016

Cynthia Arredondo

My commission Expires

2/13/17

Notary Public



August 31, 2016
STATE OF
NEW MEXICO
ENERGY, MINERALS
AND NATURAL
RESOURCES
DEPARTMENT
OIL CONSERVATION
DIVISION
SANTA FE,
NEW MEXICO

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on September 15, 2016, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appoint for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact Florene Davidson at 505-476-3458 or through the New Mexico Relay Network, 1-800-659-1779 by September 5, 2016. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

STATE OF
NEW MEXICO TO:
All named parties
and persons having
any right, title,
interest or claim in
the following cases
and notice to
the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian (whether or not so stated).)

To: Mobil Producing, GD McKinney Investments LP, Wanye and Linda Newkumet, their heirs and devisees, B. Jack Reed, his heirs and devisees, Gerald A. Hancock, his heirs and devisees, DRW Energy, LLC, Beryl Oil & Gas, LP, M'Lissa L. McKinney Schoening, her heirs and devisees, Sharbro Oil Ltd. Co., Rutter Wilbanks Corp., Fina Oil and Chemical Company, Curtis A. Anderson and Edna I. Anderson, their heirs and devisees, John S. Tittl, his heirs and devisees, Michael A. Kulenguski, his heirs

and devisees, 3H satellite facility, located at the Cedar Canyon 23 Federal No 3H well pad. This will be an off-lease location for all spacing units, excluding leases in the N/2 S/2 of Section 22. Oxy intends to allocate production to the spacing units using the well test method. Said area is approximately six miles east of Malaga, New Mexico.

MAPOOO+NET, The Roach Foundation, Kimbell Art Foundation, Bill Burton, his heirs and devisees, Ben J. Fortson, III, Children's Trust, Robert C. Grable, his heirs and devisees, MWB 1998 Trust, GCB 1998 Trust, DCB 1998 Trust, Sundance Minerals I, Eric D. Boyt, his heirs and devisees, Judith Gene Hantula, her heirs and devisees, Dorothy Harroun's Irrevocable Trust, Stuart D. Harroun's Revocable Trust, JM Mineral & Land Co. Inc., Tara L. Keene, her heirs and devisees, Magnolia Royalty Company, Inc., Jeffery Caswell Neal, his heirs and devisees, Piper L. Nelms, her heirs and devisees, Softsearch Investment LP, Softvest Management LP, Andrew and Janet Vogt Trust, Herman Clifford Walker III, his heirs and devisees, Curtis A. Anderson, his heirs and devisees, William K. Burton, his heirs and devisees, Ben J. Fortson III Childrens Trust, Robert C. Grable, his heirs and devisees, MAPOO-NET TX General Partnership, Penroc Oil Corporation, Roach Foundation, Inc., Rutter & Wilbanks Corporation, Beryl Oil and Gas, LP, DRW En-

ergy LLC, Leopard Petroleum LP, Mobil Producing Texas and New Mexico, Inc., Wayne and Linda Newkumet, their heirs and devisees, Jack B. Reed, his heirs and devisees, M'Lissa M. Schoening, her heirs and devisees.

CASE 15540: Application OXY USA Inc. For Approval of Surface Pool-Lease Commingling, Off-Lease Storage, and Off-Lease Measurement, Eddy County, New Mexico. Applicant seeks an order authorizing 1) pool-lease commingling from all existing and future wells drilled on leases and associated spacing units in Sections 22, 23, and 24 of Township 23 South, Range 29 East, N.M.P.M., Eddy County, New Mexico; 2) off-lease storage; and 3) off-lease measurement. OXY seeks to commingle production from the Pierce Crossing Bone Spring East Pool (96473) and the Corral Draw Bone Spring Pool (96238) from all existing and future wells and leases located in Sections 22, 23, and 24 at the Cedar Canyon 23-

BEFORE THE OIL CONSERVATION DIVISIC

Santa Fe, New Mexico

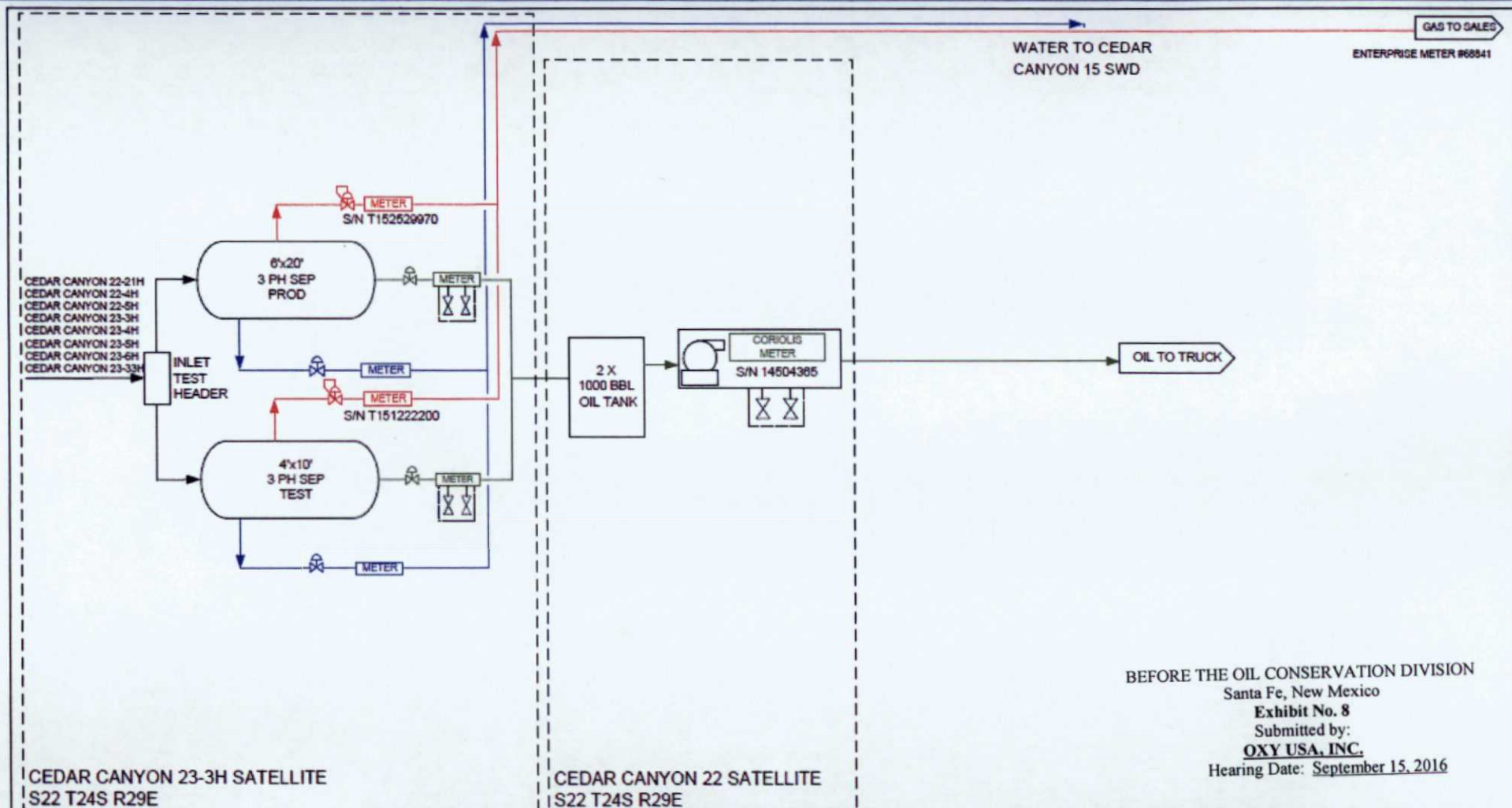
Exhibit No. 7

Submitted by:

OXY USA, INC.

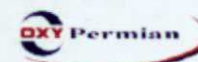
Hearing Date: September 15, 2016

Facility Diagram



BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 8
Submitted by:
OXY USA, INC.
Hearing Date: September 15, 2016

LEGEND		REVISION BLOCK						ENGINEERING RECORD		 PROCESS FLOW DIAGRAM CEDAR CANYON 23-3H SAT
	PRODUCTION MIX	NO.	DATE	DESCRIPTION	BY	CHK	APP	BY	DATE	
	OIL	1		PRELIMINARY DRAFT	JC			DRN: JC	9/8/16	
	GAS							DES:		
	WATER							CHK:		
	EQUIPMENT							APP:		
								AFE:		



PROCESS FLOW DIAGRAM
CEDAR CANYON 23-3H SAT

**APPLICATION FOR POOL LEASE COMMINGLE, OFF-LEASE MEASUREMENT, SALES, & STORAGE,
Commingling proposal for Cedar Canyon 23-3H Satellite**

OXY USA INC is requesting approval for Pool Lease Commingle, and Off-lease Measurement, Storage & Sales for wells located on the attached spreadsheet. A map showing surface hole locations and laterals for each of the wells is also attached.

Oil & Gas metering:

Incoming wells will be routed to the 3 phase production separator at the satellite facility located at Cedar Canyon 23-3H well pad at 32.202503,-103.963914. The production separator will be equipped with a gas orifice meter (S/N*), oil turbine meter with prover loops (S/N*) and water turbine (S/N*) meters. There will also be a test separator at the satellite facility equipped with a gas orifice meter (S/N*), oil turbine meter with prover loops (S/N*) and water turbine (S/N*) meters.

Oxy proposes to allocate production by well test. The wells are located on multiple Federal leases and CA's that are all 12.5% royalty. There is diverse WI & ORRI amongst some of the wells as outlined on the attached ownership list spreadsheet. Notice will be provided to all affected parties as per attached notice list. Wells are expected to decline below their top allowable within the first 4 months of production. Furthermore, the estimated percent of decline after 6 months is between 54-65%.

Gas meter on production separator S/N* & on test separator S/N* located at the satellite facility will serve as custody transfer point (Facility Measurement Point) for the purposes of royalty payment. Gas production from the 23-3H satellite facility will then be routed to Enterprise sales meter (S/N: 68841), located at 32.222, -103.974.

Oil production from the 23-3H satellite facility will be further metered off-lease, through a Coriolis meter (S/N*), located at the Cedar Canyon 22 central satellite facility. This Coriolis meter will serve as custody transfer point (FMP) for the purposes of Federal royalty payment.

Water production will be routed to the Cedar Canyon 22 CTB and then sent to the Cedar Canyon Salt Water Disposal Distribution system, where it will flow to the nearest SWD which has capacity to accept water. Salt Water Disposals tied to this SWD include the Cedar Canyon 28 Federal 4 SWD, Cedar Canyon 15 SWD. Riverbend Federal 8 SWD, Harroun 15-3 SWD and Cedar Canyon 16-3.

Meters will be proved and calibrated according to current API, NMOCD and BLM standards.

Process and Flow Descriptions:

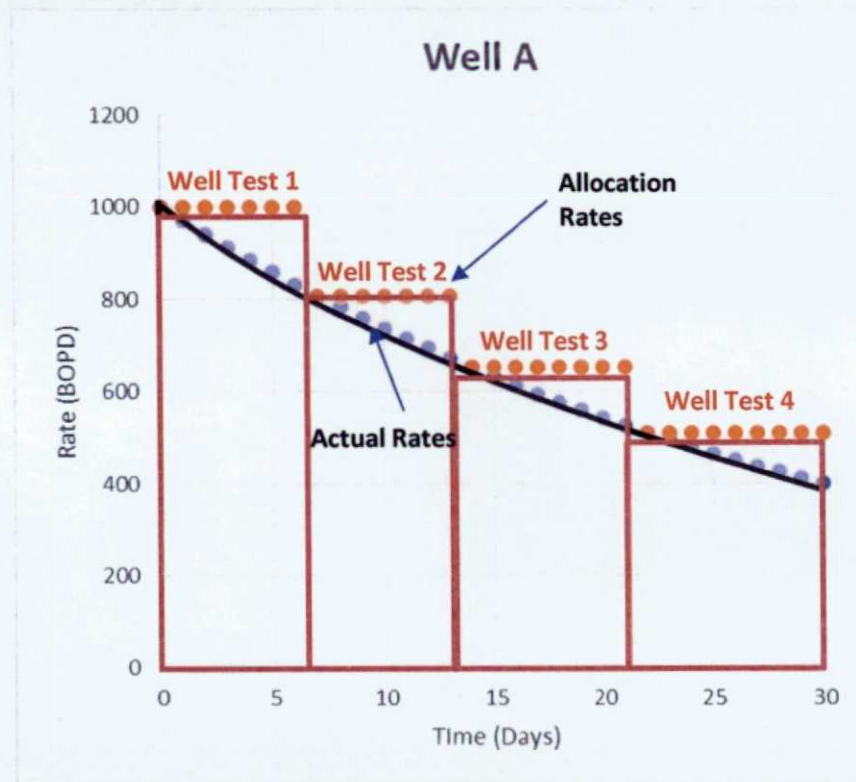
The flow of production is shown in detail on the enclosed facility diagram. Also enclosed is a map detailing the lease boundaries, well surface hole locations and laterals. Commingling this production is the most effective means of producing the reserves and will not result in reduced royalty or improper measurement of production.

OXY USA INC understands the requested approval will not constitute the granting of any right-of-way or construction rights not granted by the lease instrument. These applications will be submitted separately for approval per NMOCD and BLM regulations.

The working interest, royalty interest and overriding royalty interest owners have been notified of this proposal by certified mail (see attached).

Signed: Taylor Stillman
Printed Name: Taylor Stillman
Title: Production Engineer
Date: 06/30/2016

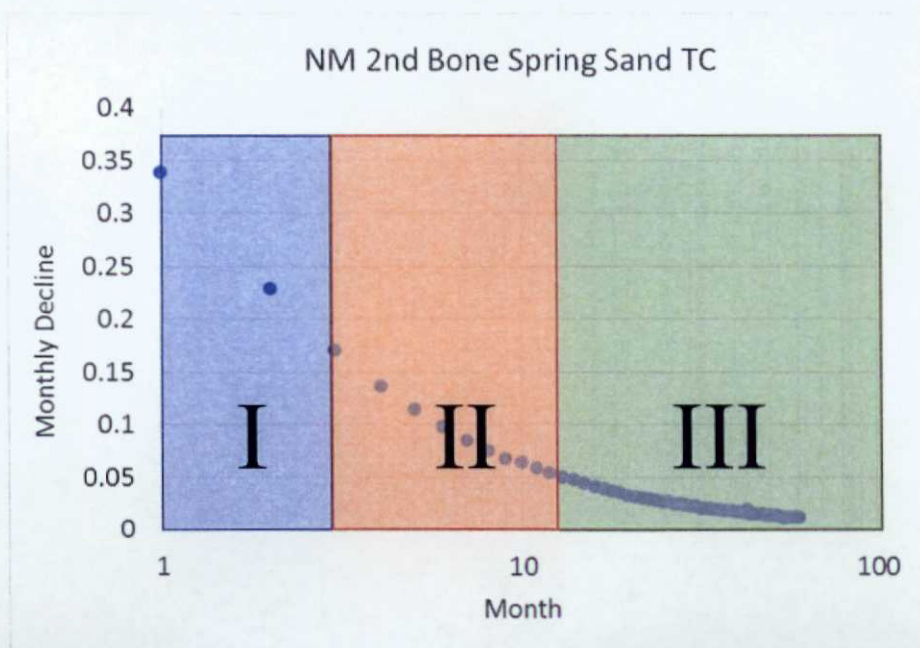
How Production Is Allocated



- Well allocated according to most recent test
- Results in 'step function' of well tests
- One mid month test would give accurate allocation assuming perfect test and approximately linear monthly decline

Proposed Testing Plan

- Base testing requirements off of typecurve
- Use type curve to assign testing requirements based on monthly declines
- Example: Cedar Canyon 2nd Bone Spring Sand
- Assumes evenly spaced out tests
- Assumes accurate well tests



- Flowback / Pre-Peak
- Range I – 0 to 2 months after peak production
 - Decline range: 30% to 20%
- Range II – 3 to 12 months after peak production
 - Decline range: 20% to 5%
- Range III – 12 months after peak production
 - Decline range: < 5%



Production Data - Wells on Production

CEDAR CANYON 23 FEDERAL #004H (API 30-015-43281)

Month	Oil (bbls)	Average Daily Volume (bbls)	Daily Top Allowable (bbls)	Gas (MCF)	Water (bbls)
Jan	5020	162	1650	0	0
Feb	49414	1704		50169	53306
Mar	35454	1144		55485	53073
Apr	20333	678		29356	40604
May	19318	623		22341	44316
Jun	19084	636		46313	49936

CEDAR CANYON 23 FEDERAL #005H (API 30-015-43282)

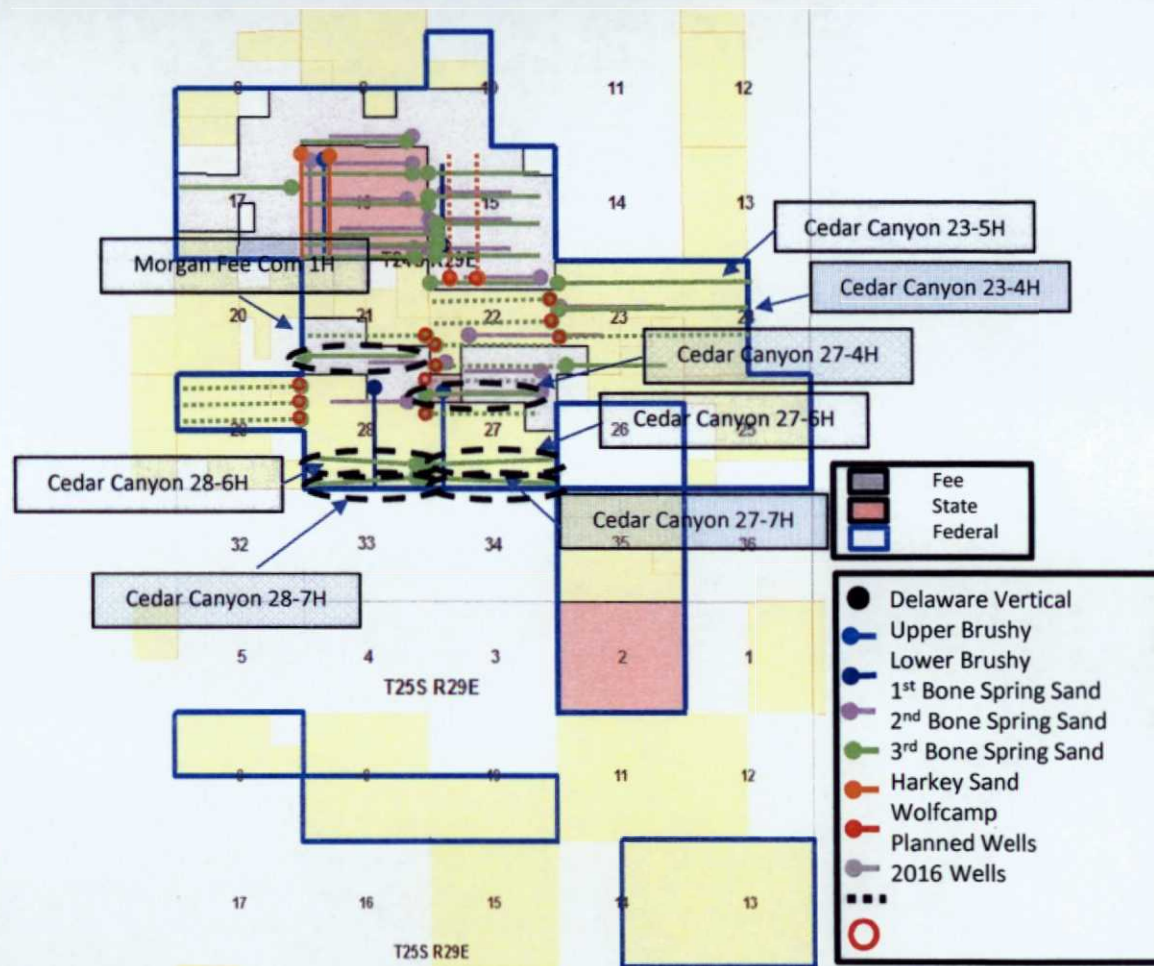
Month	Oil (bbls)	Average Daily Volume (bbls)	Daily Top Allowable (bbls)	Gas (MCF)	Water (bbls)
Jan	4312	139	1650	0	0
Feb	41602	1435		45713	50533
Mar	38433	1240		60660	63727
Apr	22926	764		36089	50855
May	19446	627		24363	40049
Jun	16726	558		37680	44038

BEFORE THE OIL CONSERVATION DIVISION
 Santa Fe, New Mexico
 Exhibit No. 12
 Submitted by:
OXY USA, INC.
 Hearing Date: September 15, 2016

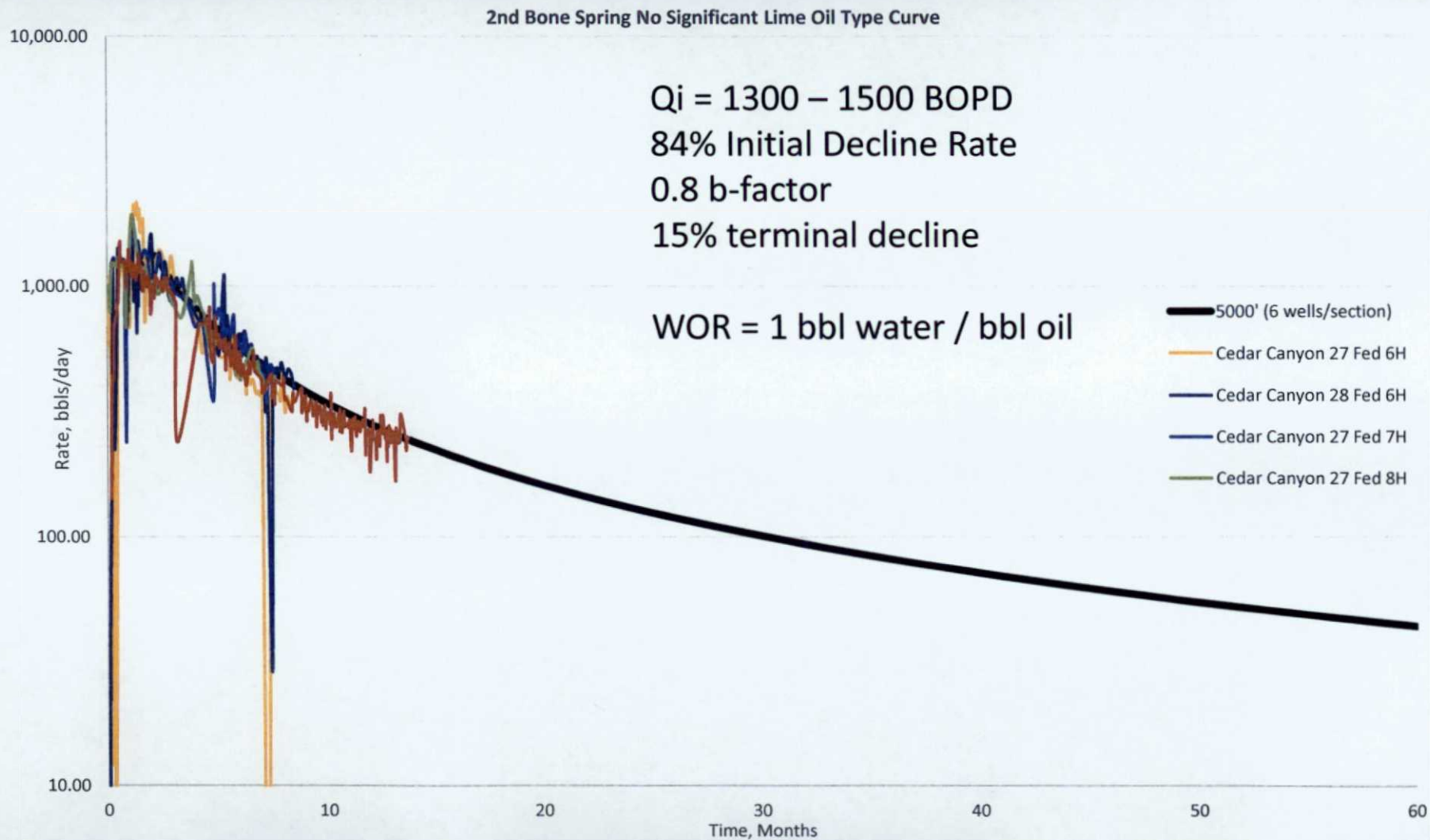


2nd Bone Spring Type Curves

- Type curve based on RTA simulation, volumetric analysis of oil in place, and DCA of offset producing wells
 - Cedar Canyon 5000' 2nd Bone Spring no lime type curve based on production from following wells:
 - Cedar Canyon 27 Fed 6H
 - Cedar Canyon 27 Fed 7H
 - Cedar Canyon 28 Fed 6H
 - Cedar Canyon 28 Fed 7H
 - Production Profile based on Cedar Canyon 27 State Com #4H
 - Cedar Canyon 7500' 2nd Bone Spring Lime Type Curve Based on production from
 - Cedar Canyon 23 Fed #4H
 - Cedar Canyon 23 Fed #5H

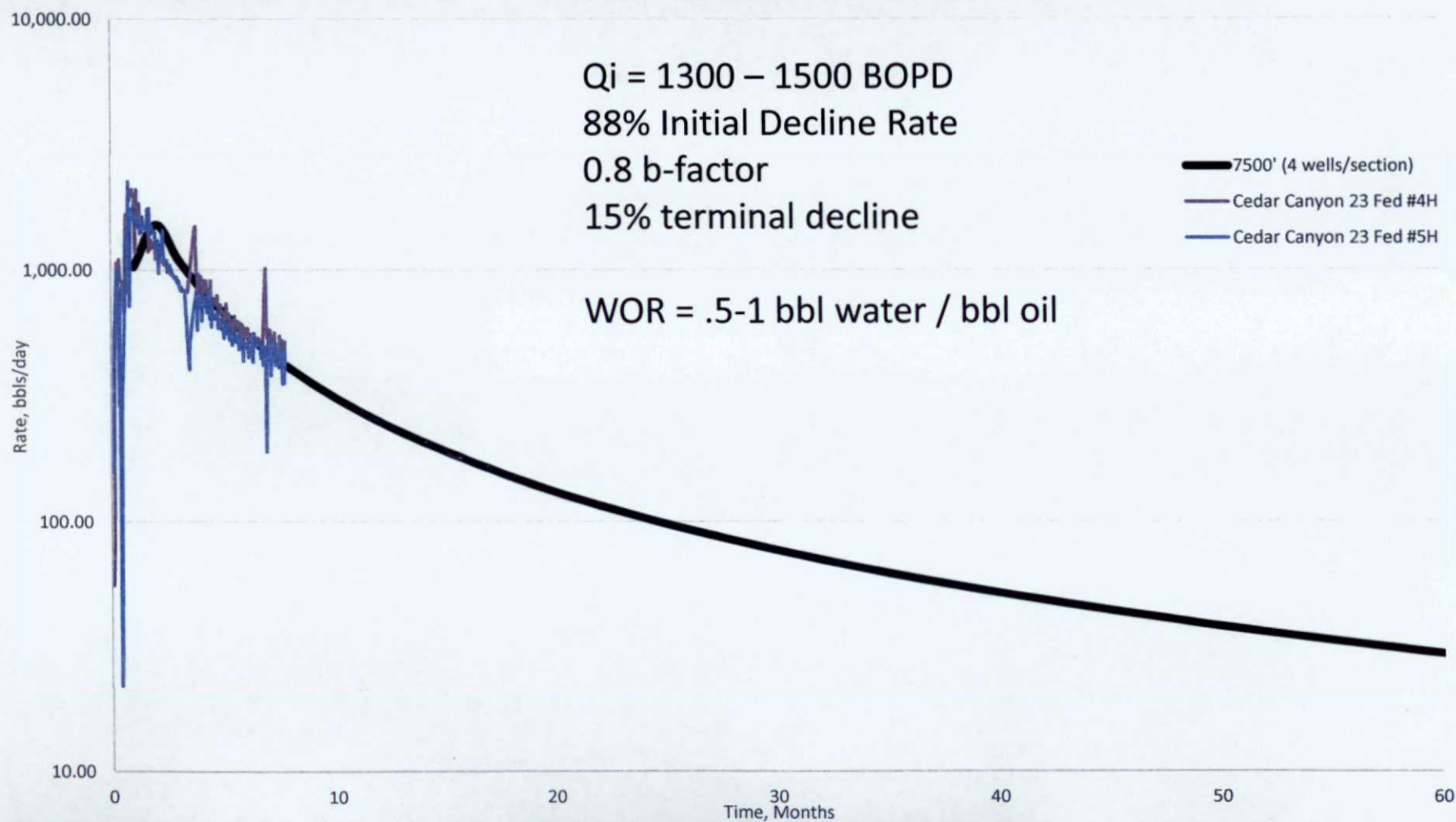


Cedar Canyon 2nd Bone Spring – 5000' No Lime - Oil



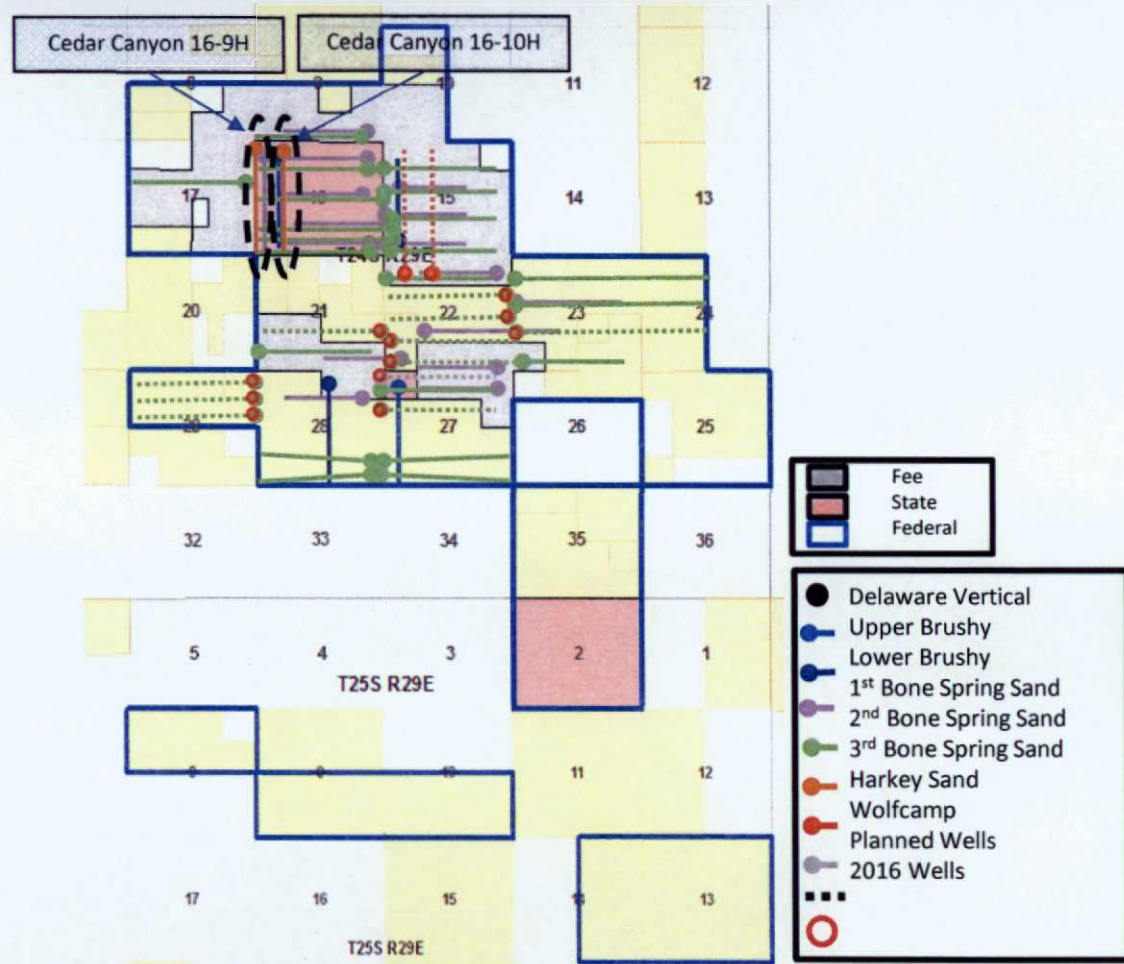
Cedar Canyon 7500' 2nd Bone Spring Lime Type Curve – Oil

2nd Bone Spring No Significant Lime Oil Type Curve



Cedar Canyon 3rd Bone Spring 5000' Type Curves

- Type curve based on RTA simulation, volumetric analysis of oil in place, and DCA of offset producing wells
 - Cedar Canyon 5000' 3rd Bone Spring based on the following wells:
 - Cedar Canyon 16 State #9H
 - Cedar Canyon 16 State #10H



Cedar Canyon 3rd Bone Spring 5000' Type Curve

3rd BSS Oil Rate Profile

