

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

**APPLICATION OF BC OPERATING, INC. FOR A NON-STANDARD SPACING AND
PRORATION UNIT, APPROVAL OF AN UNORTHODOX WELL LOCATION, AND
COMPULSORY POOLING, EDDY COUNTY, NEW MEXICO.**

CASE NOS. 15529 & 15530

AFFIDAVIT

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

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



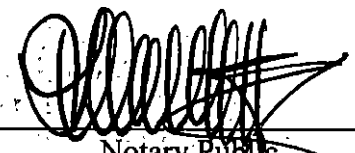
Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 14rd day of September 2016 by Michael

H. Feldewert.



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. 12
Submitted by:
BC OPERATING, INC.
Hearing Date: September 15, 2016



July 29, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: AFFECTED PARTIES

Re: Application of BC Operating, Inc. for a non-standard spacing and proration unit, unorthodox well location, and compulsory pooling, Eddy County, New Mexico.
Red Light 27-34 State Com No. 1H Well

Dear Sir or Madam:

This letter is to advise you that BC Operating, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. *You interests are not being pooled under this application. You are receiving notice of this application because of the request for the proposed unorthodox well location and/or the creation of a non-standard spacing and proration unit.*

This application has been set for hearing before a Division Examiner at 8:15 AM on August 18, 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 by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses, the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Harmon Murphy, at (432) 684-9696 or hmurphy@bcoperating.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR BC OPERATING, INC.



Jordan L. Kessler
Associate

Phone (505) 988-4421

Fax (505) 983-6043

JL.Kessler@hollandhart.com

July 29, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

Re: Application of BC Operating, Inc. for a non-standard spacing and proration unit, unorthodox well location, and compulsory pooling, Eddy County, New Mexico.
Red Light 27-34 State Com No. 1H Well

Ladies & Gentlemen:

This letter is to advise you that BC Operating, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on August 18, 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 by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Harmon Murphy, at (432) 684-9696 or hmurphy@bcoperating.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR BC OPERATING, 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. ☐



July 29, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED**TO: AFFECTED PARTIES****Re: Application of BC Operating, Inc. for a non-standard spacing and proration unit, unorthodox well location, and compulsory pooling, Eddy County, New Mexico.****Red Light 27-34 State Com No. 2H Well**

Dear Sir or Madam:

This letter is to advise you that BC Operating, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. *You interests are not being pooled under this application. You are receiving notice of this application because of the request for the proposed unorthodox well location and/or the creation of a non-standard spacing and proration unit.*

This application has been set for hearing before a Division Examiner at 8:15 AM on August 18, 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 by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Harmon Murphy, at (432) 684-9696 or hmurphy@bcoperating.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR BC OPERATING, INC.



July 29, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED**TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS****Re: Application of BC Operating, Inc. for a non-standard spacing and proration unit, unorthodox well location, and compulsory pooling, Eddy County, New Mexico.****Red Light 27-34 State Com No. 2H Well**

Ladies & Gentlemen:

This letter is to advise you that BC Operating, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on August 18, 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 by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Harmon Murphy, at (432) 684-9696 or hmurphy@bcoperating.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR BC OPERATING, INC.

**BC OPERATING INC.
RED LIGHT 1H & 2H WELLS**

CL&F Resources LP
4 Greenspoint Place, Suite 1500
16945 Northchase Drive
Houston, TX 77060

LOGO Energy, LLC
c/o Lefrak Organization
1301 McKinney, Suite 3150
Houston, TX 77010

ROGO LOGO, LLC
1301 McKinney St., Suite 3150
Houston, TX 77010

Ozark Exploration, Inc.
3838 Oak Lawn Ave, Suite 1525
Dallas, TX 75219

J.Cleo Thompson & James
Cleo Thompson, Jr., LP
325 North St. Paul, Suite 4300
Dallas, TX 75201-3993

Black Stone Natural Resources III-B, LP
1001 Fannin Street, Suite 2020
Houston, TX 77002

Black Stone Energy Company, LLC
1001 Fannin Street, Suite 2020
Houston, TX 77002

Eastland Resources, Inc.
P.O. Drawer 3488
Midland, Texas 79702

Richard Gillham
1650 SE Loop 338
Odessa, TX 79762-9705

Cactus Energy, Inc.
P.O. Box 2412
Midland, TX 79702-2412

Thomas Smith
1409 S. County Road 1130
Midland, TX 79702

Magnum Hunter Production, Inc.
c/o Cimarex Energy Co.
600 N. Marienfeld, Suite 600
Midland, TX 79701

Vanguard Permian, LLC
5847 San Felipe, Suite 3000
Houston, Texas 77057

Newfield Exploration Mid-
Continent, Inc.
110 W. 7th Street, Suite 1300
Tulsa, OK, 74119

Troporo Oil and Gas Company
511 West Ohio
Midland, TX 79701

Ruth S. Bell
206 Club Drive.
Midland, TX 79701

C. Kirk Greene
100 N Arlington Ave Apt 12
Reno, NV 89501

George D. Gould
140 Broadway
New York, New York 10005

AFFECTED PARTY

Landmark Gas Corporation
5080 Spectrum Dr., #805 W.
Dallas, TX 75248

Karen V. and William H.
Martin Energy, Ltd.
400 W. Illinois, Suite 1120,
Midland, TX 79701

Searls-Collier, Ltd.
P.O. Box 7018
Odessa, TX 79760

Searls Properties, LLC
P.O. Box 4023
Odessa, Texas 79760

Judson Operations, Ltd.
P.O. Box 3340,
Midland, TX 79702-3340

Permian Holdings, Inc.
608 N. Main,
Midland, TX 79701

Merit Management Partners I, L.P.
13727 Noel Road Ste 500
Dallas, TX 75240

Merit Management Partners II, L.P.
13727 Noel Road Ste 500
Dallas, TX 75240

**BC OPERATING INC.
RED LIGHT 1H & 2H WELLS**

Merit Management Partners III, L.P.
13727 Noel Road Ste 500
Dallas, TX 75240

Merit Energy Partners III, L.P.
13727 Noel Road Ste 500
Dallas, TX 75240

Merit Energy Partners E-III, L.P.
13727 Noel Road Ste 500
Dallas, TX 75240

Merit Energy Partners F-III, L.P.
13727 Noel Road Ste 500
Dallas, TX 75240

Chevron U.S.A., Inc.
P.O. Box 2100
Houston, TX 77252

Exxon Mobil
PO Box 4358
Houston, TX 77210

XTO Energy Inc.
C/O Angie Repka
810 Houston Street
Fort Worth, Texas 76102

Newfield Exploration Mid-
Continent Inc.
110 W. 7th Street, Suite 1300,
Tulsa, OK 74119

Nadel and Gussman Permian, LLC
15 East Fifth Street, Ste 3300
Tulsa, OK 74103

Crown Oil Partners V, LP
P.O. Box 50820
Midland, Texas 79710

Crump Energy Partners II, LLC
P.O. Box 50820
Midland, Texas 79710

Nearburg Exploration
Company, LLC
P.O. Box 823085
Dallas, Texas 75382

Timothy R. MacDonald
23 Graham Ln.
Lucas, TX 75002

Chevron U.S.A., Inc.
P.O. Box 2100
Houston, TX 77252

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

George Soros
888 Seventh Avenue, Suite
3300,
New York, New York 10106

Roy Niederhoffer
1700 Broadway, 39th Floor
New York, NY 10019

Susan Cole Niederhoffer
101 Merritt 7 Corporate Park,
Floor 6
New York, New York 06851

Gretchen B. Nearburg
1129 Challenger
Lakeway, TX 78734

Menpart Associates
c/o Palisades Hudson Financial Group,
2 Overhill Road, Suite 100,
Scarsdale, NY 10583

Holsum, Inc.
P.O. Box 2527
Roswell, New Mexico 88202

AAR Limited Partnership
8523 Thackery St, Unit 9301
Dallas, TX 75225

Gene Reischman, as his separate estate Marc
Reischman and Michael Reischman, Personal
Representatives of the Estate of Gene
Reischman
c/o Nearburg Exploration Company, LLC
P.O. Box 823085
Dallas TX 75382

LJR Resources Ltd. Co.
723 N. Main
Roswell, NM 88201

R-N Limited Partnership
3755 East Grand Plains Avenue
Roswell, NM 88201

Duane A. Davis
P.O. Box 823085
Dallas TX 75382

Timothy R. MacDonald
23 Graham Ln.
Lucas, TX 75002

**BC OPERATING INC.
RED LIGHT 1H & 2H WELLS**

Dean A. Horning
P.O. Box 823085
Dallas TX 75382

Dean A. Horning
3300 North A Street
Bldg. 2, Suite 120
Midland, Texas 79705

Maverick Oil & Gas Corp.
C/O: E. Scott Kimbrough
1004 N. Big Spring, Suite 508
Midland, Texas 79701

Wright Family Living Trust
Joe R. Wright - Trustee
320 Kearney Ave., Apt. 9,
Santa Fe, NM 87501-1942

JKS Resources, LLC
3012 Diamond A. Drive,
Roswell, NM 88201

JB III Partners L.P.
21 Lord William Penn Drive,
Morristown, NJ 07960-3214

Lucie Investments, L.P.
1590 S. E. Ballantrae Court,
Port St. Lucie, Florida 34952

LDH Holdings, LLC
P.O. Box 183 - Country Drive,
New Vernon, NJ 07976

LJS Resources, LLC
33 Eagle Nest Road,
Morristown, NJ 07960

CL&F Resources LP
4 Greenspoint Place, Suite 1500
16945 Northchase Drive
Houston, TX 77060

LOGO Energy, LLC
c/o Lefrak Organization
1301 McKinney, Suite 3150
Houston, TX 77010

ROGO LOGO, LLC
1301 McKinney St., Suite 3150
Houston, TX 77010

Ozark Exploration, Inc.
3838 Oak Lawn Ave, Suite
1525
Dallas, TX 75219

J.Cleo Thompson & James
Cleo Thompson, Jr., LP
325 North St. Paul, Suite 4300
Dallas, TX 75201-3993

Black Stone Natural Resources
III-B, LP
1001 Fannin Street, Suite 2020
Houston, TX 77002

Black Stone Energy Company, LLC
1001 Fannin Street, Suite 2020
Houston, TX 77002

Eastland Resources, Inc.
P.O. Drawer 3488
Midland, Texas 79702

Richard Gillham
1650 SE Loop 338
Odessa, TX 79762-9705

Cactus Energy, Inc.
P.O. Box 2412
Midland, TX 79702-2412

Thomas Smith
1409 S. County Road 1130
Midland, TX 79702

Magnum Hunter Production, Inc.
c/o Cimarex Energy Co.
600 N. Marienfeld, Suite 600
Midland, TX 79701

Vanguard Permian, LLC
5847 San Felipe, Suite 3000
Houston, Texas 77057

Newfield Exploration Mid-
Continent, Inc.
110 W. 7th Street, Suite 1300
Tulsa, OK, 74119

Troporo Oil and Gas Company
511 West Ohio
Midland, TX 79701

Ruth S. Bell
206 Club Drive.
Midland, TX 79701

C. Kirk Greene
100 N Arlington Ave Apt 12
Reno, NV 89501

George D. Gould
140 Broadway
New York, New York 10005

7015 3010 0001 8827 3707

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our **MHF/BC OPERATING**
OFFICE RED LIGHT 1H & 2-H

Certified Mail Fee

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$ 2.40

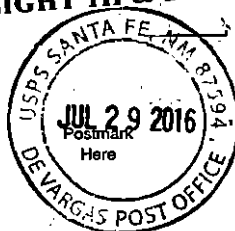
☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

CL&F Resources LP
4 Greenspoint Place, Suite 1500
16945 Northchase Drive
Houston, TX 77060



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

See Reverse for Instructions

7015 3010 0001 8827 3691

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our **MHF/BC OPERATING**
OFFICE RED LIGHT 1H & 2 H

Certified Mail Fee

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$ 2.40

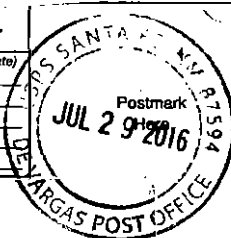
☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

LOGO Energy, LLC
c/o Lefrak Organization
1301 McKinney, Suite 3150
Houston, TX 77010



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:

CL&F Resources LP
4 Greenspoint Place, Suite 1500
16945 Northchase Drive
Houston, TX 77060

9590.9402-1505 5362 6084 94

2. Article Number (Transfer from service label)

7015 3010 0001 8827 3707

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

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

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

Domestic Return Receipt

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:

LOGO Energy, LLC
c/o Lefrak Organization
1301 McKinney, Suite 3150
Houston, TX 77010

9590.9402-1505 5362 6084 25

2. Article Number (Transfer from service label)

7015 3010 0001 8827 3691

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

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

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

Domestic Return Receipt

7015 3010 0001 8827 3684

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

For delivery information, visit **MHF/BC OPERATING RED LIGHT 1H & 2H**

OFFICE

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 \$

Postage \$

ROGO LOGO, LLC
 1301 McKinney St., Suite 3150
 Houston, TX 77010

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:

ROGO LOGO, LLC
 1301 McKinney St., Suite 3150
 Houston, TX 77010

9590 9402 1505 5362 6084 32

7015 3010 0001 8827 3684

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)

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

Domestic Return Receipt

7015 3010 0001 8827 3677

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

For delivery information, visit **MHF/BC OPERATING RED LIGHT 1H & 2H**

OFFICE

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 \$

Postage \$

Ozark Exploration, Inc.
 3838 Oak Lawn Ave, Suite 1525
 Dallas, TX 75219

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:

Ozark Exploration, Inc.
 3838 Oak Lawn Ave, Suite 1525
 Dallas, TX 75219

9590 9402 1505 5362 6084 49

7015 3010 0001 8827 3677

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Whitney Taylor

☐ Agent
☐ Addressee

B. Received by (Printed Name)

WHITNEY TAYLOR

C. Date of Delivery

8/3/14

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

Domestic Return Receipt

7015 3010 0001 8827 3660

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

Domestic Mail Only

For delivery information, visit

OFFICMHF/BC OPERATING
RED LIGHT 1H & 2 H

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

J.Cleo Thompson & James
Cleo Thompson, Jr., LP
325 North St. Paul, Suite 4300
Dallas, TX 75201-3993

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

See Reverse for Instructions



7015 3010 0001 8827 3653

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

Domestic Mail Only

For delivery information, visit

OFFICMHF/BC OPERATING
RED LIGHT 1H & 2 H

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

Black Stone Natural Resources III-B, LP
1001 Fannin Street, Suite 2020
Houston, TX 77002

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.Cleo Thompson & James
Cleo Thompson, Jr., LP
325 North St. Paul, Suite 4300
Dallas, TX 75201-3993

9590 9402 1505 5362 6084 56

2. Article Number (Transfer from service label)

7015 3010 0001 8827 3660

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Steve Cantrell

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Steve Cantrell

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

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

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:

Black Stone Natural Resources III-B, LP
1001 Fannin Street, Suite 2020
Houston, TX 77002

9590 9402 1505 5362 6081 66

2. Article Number (Transfer from service label)

7015 3010 0001 8827 3653

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

P. Kunchak

☐ Agent
☒ Addressee

B. Received by (Printed Name)

P. Kunchak

C. Date of Delivery

8/2/16

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

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

Restricted Delivery

Domestic Return Receipt

7015 3010 0001 8827 3646

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

For delivery information, visit **OFFICIAL** **MHF/BC OPERATING RED LIGHT 1H & 2 H**

Certified Mail Fee \$ 3.65

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

☒ Return Receipt (hardcopy) \$ 2.40

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Black Stone Energy Company, LLC
 1001 Fannin Street, Suite 2020
 Houston, TX 77002

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

7015 3010 0001 8827 3639

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

For delivery information, visit **OFFICIAL** **MHF/BC OPERATING RED LIGHT 1H & 2 H**

Certified Mail Fee \$ 3.65

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

☒ Return Receipt (hardcopy) \$ 2.40

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Eastland Resources, Inc.
 P.O. Drawer 3488
 Midland, Texas 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:

Black Stone Energy Company, LLC
 1001 Fannin Street, Suite 2020
 Houston, TX 77002

9590 9402 1505 5362 6081 73

2. Article Number (Transfer from service label)

7015 3010 0001 8827 3646

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Okunich ☐ Agent ☐ Addressee

B. Received by (Printed Name)

OK ☐ Yes ☐ No

C. Date of Delivery

8/2/16 ☐ Yes ☐ No

238

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

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:

Eastland Resources, Inc.
 P.O. Drawer 3488
 Midland, Texas 79702

9590 9402 1505 5362 6081 80

2. Article Number (Transfer from service label)

7015 3010 0001 8827 3639

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Viola Chavez ☐ Agent ☐ Addressee

B. Received by (Printed Name)

VIOLA CHAVEZ ☐ Yes ☐ No

C. Date of Delivery

8-2-16 ☐ Yes ☐ No

238

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 3010 0001 8827 3622

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only, MHF/BC OPERATING
For delivery information, RED LIGHT 1H & 2 H
OFFICE

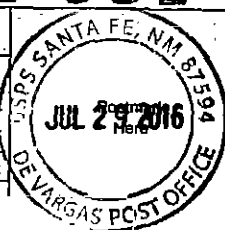
Certified Mail Fee

\$

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

- ☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 0.00
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

 Richard Gillham
 1650 SE Loop 338
 Odessa, TX 79762-9705


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

See Reverse for Instructions

7015 3010 0001 8827 3714

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only, MHF/BC OPERATING
For delivery information, RED LIGHT 1H & 2 H
OFFICE

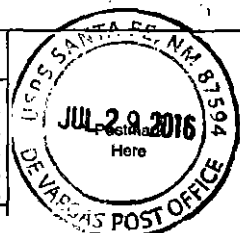
Certified Mail Fee

\$

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

- ☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 0.00
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

 Cactus Energy, Inc.
 P.O. Box 2412
 Midland, TX 79702-2412


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

See Reverse for Instructions

RETURNED

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:

 Cactus Energy, Inc.
 P.O. Box 2412
 Midland, TX 79702-2412

9590 9402 1505 5362 6082 03

2

7015 3010 0001 8827 3714

COMPLETE THIS SECTION ON DELIVERY
A. Signature

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Eric Koller

C. Date of Delivery

8-5-16

- 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

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

Domestic Return Receipt

7015 3010 0001 8828 0019

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

For delivery information, visit **OFFICIAL**

MHF/BC OPERATING
RED-LIGHT 1H & 2 H

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
 \$ To _____
 \$ By _____
 \$ Si _____
 \$ C _____

Thomas Smith
 1409 S. County Road 1130
 Midland, TX 79702

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

Returned

7015 3010 0001 8827 7507

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

For delivery information, visit **OFFICIAL**

MHF/BC OPERATING
RED-LIGHT 1H & 2 H

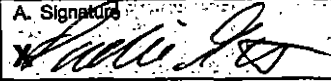
Certified Mail Fee
 \$ 3.45

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
 \$ To _____
 \$ By _____
 \$ Si _____
 \$ C _____

Magnum Hunter Production, Inc.
 c/o Cimarex Energy Co.
 600 N. Marienfeld, Suite 600
 Midland, TX 79701

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.		A. Signature  ☐ Agent ☐ Addressee	
1. Article Addressed to: Magnum Hunter Production, Inc. c/o Cimarex Energy Co. 600 N. Marienfeld, Suite 600 Midland, TX 79701		B. Received by (Printed Name) Adil Garcia C. Date of Delivery 8-4-16	
2. Article Number (Transfer from service label) 7015 3010 0001 8827 7507		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	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

7015 3010 0001 8827 7491

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

Domestic Mail Only

For delivery information, visit **OFFICIAL**MHF/BC OPERATING
RED LIGHT 1H & 2 H

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 \$ _____



Vanguard Permian, LLC
5847 San Felipe, Suite 3000
Houston, Texas 77057

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:

Vanguard Permian, LLC
5847 San Felipe, Suite 3000
Houston, Texas 77057

9590.9402.1505.5362.6084.87

2. Article Number (Transfer from service label)

7015 3010 0001 8827 7491

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☐ 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

7015 3010 0001 8827 7484

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

Domestic Mail Only

For delivery information, visit **OFFICIAL**MHF/BC OPERATING
RED LIGHT 1H & 2 H

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 \$ _____



Newfield Exploration Mid-Continent, Inc.
110 W. 7th Street, Suite 1300
Tulsa, OK, 74119

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:

Newfield Exploration Mid-Continent, Inc.
110 W. 7th Street, Suite 1300
Tulsa, OK, 74119

9590.9402.1505.5362.6083.57

2. Article Number (Transfer from service label)

7015 3010 0001 8827 7484

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☐ 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

7015 3010 0001 8827 7477

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

For delivery information, visit **MHF/BC OPERATING**
OFFICE **RED LIGHT 1H & 2 H**

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 \$ _____

Postage

\$ _____

To

\$ _____

Se

\$ _____

Str

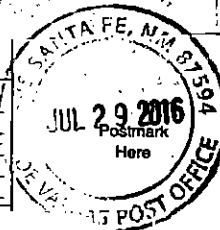
\$ _____

City

\$ _____

Troporo Oil and Gas Company
 511 West Ohio
 Midland, TX 79701

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



RETURNED

7015 3010 0001 8827 7460

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

For delivery information, visit **MHF/BC OPERATING**
OFFICE **RED LIGHT 1H & 2 H**

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 \$ _____

Post

\$ _____

To

\$ _____

Se

\$ _____

Str

\$ _____

City

\$ _____

Ruth S. Bell
 206 Club Drive
 Midland, TX 79701

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



7015 3010 0001 8827 7452

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

For delivery information, visit **OFFICE** **MHF/BC OPERATING RED LIGHT 1H & 2H**

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 \$

To: **C. Kirk Greene**
100 N Arlington Ave Apt 12
Reno, NV 89501

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

RETURNED

7015 3010 0001 8827 7446

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

For delivery information, visit **OFFICE** **MHF/BC OPERATING RED LIGHT 1H & 2H**

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 \$

To: **George D. Gould**
140 Broadway
New York, New York 10005

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

RETURNED

7015 3010 0001 8827 7434

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

For delivery information, visit **OFFICE**
MHF/BC OPERATING
RED LIGHT 1H & 2 H

Certified Mail Fee \$ 3.45
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.40
☐ Return Receipt (electronic) \$ _____
☐ Certified Mail Restricted Delivery \$ _____
☐ Adult Signature Required \$ _____
☐ Adult Signature Restricted Delivery \$ _____



Landmark Gas Corporation
 5080 Spectrum Dr., #805 W.
 Dallas, TX 75248

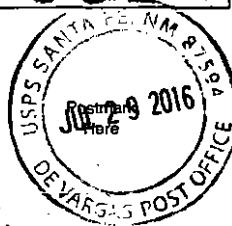
PS Form 3800, April 2015 PSN 7530-02-000-0047 See Reverse for Instructions

7015 3010 0001 8827 7422

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

For delivery information, visit **OFFICE**
MHF/BC OPERATING
RED LIGHT 1H & 2 H

Certified Mail Fee \$ 3.45
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.40
☐ Return Receipt (electronic) \$ _____
☐ Certified Mail Restricted Delivery \$ _____
☐ Adult Signature Required \$ _____
☐ Adult Signature Restricted Delivery \$ _____



Karen V. and William H.
 Martin Energy, Ltd.
 400 W. Illinois, Suite 1120,
 Midland, TX 79701

PS Form 3800, April 2015 PSN 7530-02-000-0047 See Reverse for Instructions

RETURNED

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: Karen V. and William H. Martin Energy, Ltd. 400 W. Illinois, Suite 1120, Midland, TX 79701 9590 9402 1505 5362 6084 18 2. A (Indicate from service label) 7015 3010 0001 8827 7422		A. Signature <u>[Signature]</u> ☐ Agent ☒ Addressee B. Received by (Printed Name) <u>[Signature]</u> C. Date of Delivery <u>8/13/16</u> 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 MailTM</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 ConfirmationTM</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table>		☐ Adult Signature	☐ Priority Mail Express [®]	☐ Adult Signature Restricted Delivery	☐ Registered Mail TM	☒ Certified Mail [®]	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☒ Signature Confirmation TM	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery
☐ Adult Signature	☐ Priority Mail Express [®]														
☐ Adult Signature Restricted Delivery	☐ Registered Mail TM														
☒ Certified Mail [®]	☐ Registered Mail Restricted Delivery														
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise														
☐ Collect on Delivery	☒ Signature Confirmation TM														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														

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

Domestic Return Receipt

7015 3010 0001 8827 7415

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

OFFICE

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$ 2.40

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

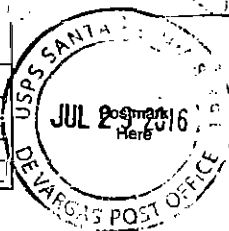
☐ Adult Signature Restricted Delivery \$

Postage

Searls-Collier, Ltd.
P.O. Box 7018
Odessa, TX 79760

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

MHF/BC OPERATING
RED LIGHT 1H & 2 H



7015 3010 0001 8827 7408

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

OFFICE

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$ 2.40

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

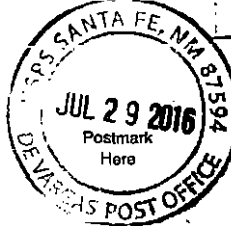
☐ Adult Signature Restricted Delivery \$

Postage

Searls Properties, LLC
P.O. Box 4023
Odessa, Texas 79760

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

MHF/BC OPERATING
RED LIGHT 1H & 2 H



RETURNED

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:

Searls Properties, LLC
P.O. Box 4023
Odessa, Texas 79760

2. (Transfer from service label)

7015 3010 0001 8827 7408

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ James Stevens

☐ Agent

☐ Addressee

B. Received by (Printed Name)

JAMES STEVENS

C. Date of Delivery

8-4-16

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

☐ Yes

☐ 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

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

Domestic Return Receipt

7015 3010 0001 8827 7392

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

For delivery information, visit **OFFIC**

Certified Mail Fee

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

Postmark

To

From

City

State

Zip

Country

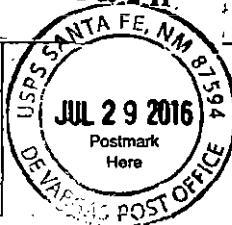
Postmark

Here

Judson Operations, Ltd.
 P.O. Box 3340,
 Midland, TX 79702-3340

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:

Judson Operations, Ltd.
 P.O. Box 3340,
 Midland, TX 79702-3340

9590 9402 1505 5362 6083 33

7015 3010 0001 8827 7392

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

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

Domestic Return Receipt

7015 3010 0001 8827 7385

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

For delivery information, visit **OFFIC**

Certified Mail Fee

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

Postmark

To

From

City

State

Zip

Country

Postmark

Here

Permian Holdings, Inc.
 608 N. Main,
 Midland, TX 79701

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:

Permian Holdings, Inc.
 608 N. Main,
 Midland, TX 79701

9590 9402 1505 5362 6083 40

7015 3010 0001 8827 7385

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
☐ Insured Mail

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

Domestic Return Receipt

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

For delivery information, visit **MHF/BC OPERATING OFFICE** RED LIGHT 1H & 2-H

Certified Mail Fee

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ _____

☐ Certified Mail Restricted Delivery \$ _____

☐ Adult Signature Required \$ _____

☐ Adult Signature Restricted Delivery \$ _____

Merit Management Partners I, L.P.
13727 Noel Road Ste 500
Dallas, TX 75240

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

See Reverse for Instructions

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

Domestic Mail Only

For delivery information, visit **MHF/BC OPERATING**
RED LIGHT 1H & 2H

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	\$	

Merit Management Partners II, L.P.
13727 Noel Road Ste 500
Dallas, TX 75240

PS Form 3800, April 2015 PSN 7530-02-000-9017

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:

Merit Management Partners I, L.P.
13727 Noel Road Ste 500
Dallas, TX 75240

9590 9402 1505 5362 6081.04

2. Article Number (Transfer from service label)

7015 3010 0001 8827 7378

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Carmella Womser ☒ Agent ☐ Addressee

B. Received by (Printed Name)

Darnelle Warner	8/1/16
-----------------	--------

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

3. Service Type

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

SE

THIS SECTION ON DELIVERY

A. Signature

X Annella Warner ☒ Agent ☐ Address

B. Received by (Printed Name)

Dannella Warner	8/1/16
-----------------	--------

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

3. Service Type

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

7361

2. Article Number (Transfer from service label)

2015 3010 0001 8827 7361

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

Domestic Return Receipt

7015 3010 0001 8827 7354

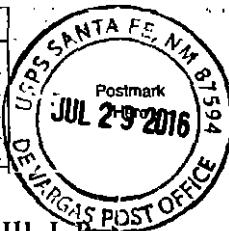
U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **MHF/BC OPERATING**
OFFICE RED LIGHT 1H & 2H

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	\$



Merit Management Partners III, L.P.
 13727 Noel Road Ste 500
 Dallas, TX 75240

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

See Reverse for Instructions

7015 3010 0001 8827 7347

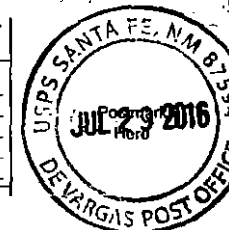
U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **MHF/BC OPERATING**
OFFICE RED LIGHT 1H & 2H

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	\$



Merit Energy Partners III, L.P.
 13727 Noel Road Ste 500
 Dallas, TX 75240

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

See Reverse for Instructions

SEI

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

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:

Merit Management Partners III, L.P.
 13727 Noel Road Ste 500
 Dallas, TX 75240

9590 9402 1505 5362 6081 28

2. Article Number (Transfer from service label)

7015 3010 0001 8827 7354

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

Domestic Return Receipt

A. Signature

Darnella Warner ☒ Agent ☐ Addressee

B. Received by (Printed Name)

Darnella Warner 8/1/16 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 |

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:

Merit Energy Partners III, L.P.
 13727 Noel Road Ste 500
 Dallas, TX 75240

9590 9402 1505 5362 6081 35

2. Article Number (Transfer from service label)

7015 3010 0001 8827 7347

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

Domestic Return Receipt

A. Signature

Darnella Warner ☒ Agent ☐ Addressee

B. Received by (Printed Name)

Darnella Warner 8/1/16 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 |

7015 3010 0001 8827 7330

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

For delivery information, visit **RED LIGHT 1H & 2H**
OFFICE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy)	\$ <u>2.40</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage \$

Merit Energy Partners E-III, L.P.
 13727 Noel Road Ste 500
 Dallas, TX 75240

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

7015 3010 0001 8827 7330

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

For delivery information, visit **RED LIGHT 1H & 2H**
OFFICE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy)	\$ <u>2.40</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage \$

Merit Energy Partners F-III, L.P.
 13727 Noel Road Ste 500
 Dallas, TX 75240

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

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.

1. Article Addressed to:

Merit Energy Partners E-III, L.P.
 13727 Noel Road Ste 500
 Dallas, TX 75240

9590 9402 1505 5362 6081 42

2. Article Number (Transfer from service label)
 7015 3010 0001 8827 7330

SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
Darnelle Warner

C. Date of Delivery
8/1/16

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

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

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.

1. Article Addressed to:

Merit Energy Partners F-III, L.P.
 13727 Noel Road Ste 500
 Dallas, TX 75240

9590 9402 1505 5362 6081 59

2. Article Number (Transfer from service label)
 7015 3010 0001 8827 7323

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
Darnelle Warner

C. Date of Delivery
8/3/16

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

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

7015 3010 0001 8827 7217

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

For delivery information, visit **MHF/BC OPERATING RED LIGHT 1H & 2H**

OFFICE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark: **SANTA FE, NM 87594 JUL 29 2016**

Chevron U.S.A., Inc.
P.O. Box 2100
Houston, TX 77252

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

7015 3010 0001 8827 7200

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

For delivery information, visit **MHF/BC OPERATING RED LIGHT 1H & 2H**

OFFICE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark: **SANTA FE, NM 87594 JUL 29 2016**

Exxon Mobil
PO Box 4358
Houston, TX 77210

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

SENDER: COMPLETE THIS SECTION

Complete Items 1, 2, and 3.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chevron U.S.A., Inc.
P.O. Box 2100
Houston, TX 77252

9590 9402 1505 5362 6082 10

2. Article Number (Transfer from service label)

7015 3010 0001 8827 7217

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Adult Signature

☐ 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

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

SENDER: COMPLETE THIS SECTION

Complete Items 1, 2, and 3.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Exxon Mobil
PO Box 4358
Houston, TX 77210

9590 9402 1505 5362 6082 27

2. Article Number (Transfer from service label)

7015 3010 0001 8827 7200

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Adult Signature

☐ 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

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

7015 3010 0001 8827 7194

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only **MHF/BC OPERATING**

For delivery information, visit **RED LIGHT 1H & 2H**

OFFICE

Certified Mail Fee

\$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.40

☐ Return Receipt (electronic) \$

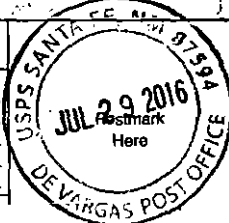
☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

XTO Energy Inc.
 C/O Angie Repka
 810 Houston Street
 Fort Worth, Texas 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:

XTO Energy Inc.
 C/O Angie Repka
 810 Houston Street
 Fort Worth, Texas 76102

9590 9402 1505 5362 6082 34

7015 3010 0001 8827 7194

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

AUG 01 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

☐ Mail Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☒ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

☐ Signature Confirmation Restricted Delivery

☐ Signature Confirmation Restricted Delivery

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 3010 0001 8827 7187

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only **MHF/BC OPERATING**

For delivery information, visit **RED LIGHT 1H & 2H**

OFFICE

Certified Mail Fee

\$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.40

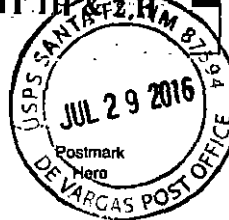
☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Newfield Exploration Mid-Continent Inc.
 110 W. 7th Street, Suite 1300,
 Tulsa, OK 74119



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:

Newfield Exploration Mid-Continent Inc.
 110 W. 7th Street, Suite 1300,
 Tulsa, OK 74119

9590 9402 1505 5362 6082 41

2. Article Number (Transfer from service label)

7015 3010 0001 8827 7187

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

AUG 01 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

☐ Mail Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☒ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

☐ Signature Confirmation Restricted Delivery

☐ Signature Confirmation Restricted Delivery

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 3010 0001 8827 7170

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit **MHF/BC OPERATING****OFFIC****RED LIGHT 1H & 2-H**

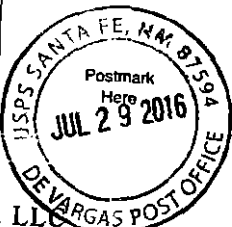
Certified Mail Fee

\$

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



Nadel and Gussman Permian, LLC
15 East Fifth Street, Ste 3300
Tulsa, OK 74103

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

See Reverse for Instructions

7015 3010 0001 8827 7163

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit **MHF/BC OPERATING****OFFIC****RED LIGHT 1H & 2-H**

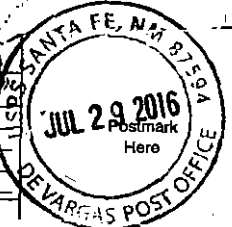
Certified Mail Fee

\$

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



Crown Oil Partners V, LP
P.O. Box 50820
Midland, Texas 79710

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:

Nadel and Gussman Permian, LLC
15 East Fifth Street, Ste 3300
Tulsa, OK 74103

9590 9402 1505 5362 6082 58

(Transfer from service label)

7015 3010 0001 8827 7170

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Plaskidmore☐ Agent☐ Addressee

B. Received by (Printed Name)

Plaskidmore

C. Date of Delivery

8-1-16D. 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☐ Restricted Delivery

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:

Crown Oil Partners V, LP
P.O. Box 50820
Midland, Texas 79710

9590 9402 1505 5362 6082 65

2. Article Number (Transfer from service label)

7015 3010 0001 8827 7163

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Bobin P☐ Agent☐ Addressee

B. Received by (Printed Name)

R. P

C. Date of Delivery

8-1-16D. 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☐ Restricted Delivery

Domestic Return Receipt

9512 715 8827 3010 0001 715

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

Domestic Mail Only

For delivery information, visit usps.com

**MHF/BC OPERATING
RED LIGHT 1H & 2H**

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 \$



Crump Energy Partners II, LLC
P.O. Box 50820
Midland, Texas 79710

PS Form 3800, April 2015 PSN 7530-02-000-8047

See Reverse for Instructions

9512 715 8827 3010 0001 714

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

Domestic Mail Only

For delivery information, visit usps.com

**MHF/BC OPERATING
RED LIGHT 1H & 2H**

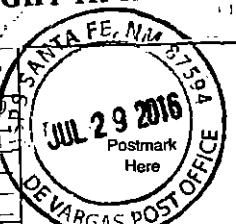
OFFICE

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 \$



Nearburg Exploration
Company, LLC
P.O. Box 823085
Dallas, Texas 75382

PS Form 3800, April 2015 PSN 7530-02-000-8047

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:

Crump Energy Partners II, LLC
P.O. Box 50820
Midland, Texas 79710

9590 9402 1505 5362 6082 72

2. Article Number (Transfer from service label)

7015 3010 0001 8827 715

PS Form 3811, July 2015 PSN 7530-02-000-8053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *K. Paul*

☐ Agent
☐ Addressee

B. Received by (Printed Name)

K. Paul

C. Date of Delivery

8-1-1

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
- ☐ Restricted Delivery

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Nearburg Exploration
Company, LLC
P.O. Box 823085
Dallas, Texas 75382

9590 9402 1505 5362 6082 89

2. Article Number (Transfer from service label)

7015 3010 0001 8827 714

PS Form 3811, July 2015 PSN 7530-02-000-8053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *V. Hogan*

☐ Agent
☐ Addressee

B. Received by (Printed Name)

V. Hogan

C. Date of Delivery

8-1-1

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
- ☐ Restricted Delivery

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

7015 3010 0001 8827 7125

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

For delivery information, visit **MHF/BC OPERATING RED LIGHT 1H & 2 H**

OFFIC

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark Here

SANTA FE, NM 87594
 JUL 23 2016
 DE VARGAS POST OFFICE

Timothy R. MacDonald
 23 Graham Ln.
 Lucas, TX 75002

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

7015 3010 0001 8827 7125

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

For delivery information, visit **MHF/BC OPERATING RED LIGHT 1H & 2 H**

OFFIC

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark Here

SANTA FE, NM 87594
 JUL 23 2016
 DE VARGAS POST OFFICE

Chevron U.S.A., Inc.
 P.O. Box 2100
 Houston, TX 77252

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

RETURNED

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Chevron U.S.A., Inc.
 P.O. Box 2100
 Houston, TX 77252

9590 9402 1505 5362 6083 02

7015 3010 0001 8827 7125

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) BARBARA JOHNSON C. Date of Delivery JUL 23 2016

D. Is delivery address different from the address on the label? ☐ Yes ☒ No
 If YES, enter delivery address:

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 7532 2917

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

For delivery information, visit

OFFICMHF/BC OPERATING
RED LIGHT 1H & 2 H

Certified Mail Fee

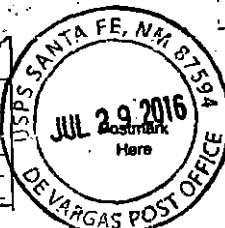
Extra Services & Fees (check box, add fee as appropriate)

- ☒ 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

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

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.

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

9590 9402 1505 5362 6080 05

2. Article Number (Transit)

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature X Alexandra Kirksey ☐ Agent ☒ Addressee
 B. Received by (Printed Name) Alexandra Kirksey C. Date of Delivery 8-3
 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™
☐ Signature Confirmation Restricted Delivery (over \$500)

Domestic Return Receipt

7015 0640 0001 7532 2924

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

For delivery information, visit

OFFICMHF/BC OPERATING
RED LIGHT 1H & 2 H

Certified Mail Fee

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

George Soros
 888 Seventh Avenue, Suite
 3300,
 New York, New York 10106

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.

George Soros
~~888 Seventh Avenue, Suite~~
~~3300,~~
 New York, New York 10106

9590 9402 1505 5362 6080 12

7015 0640 0001 7532 2924

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature X AS ☐ Agent ☐ Addressee
 B. Received by (Printed Name) George Soros C. Date of Delivery 8-3
 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™
☐ Signature Confirmation Restricted Delivery (over \$500)

Domestic Return Receipt

7015 0640 0001 7532 2931

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

For delivery information, visit **MHF/BC OPERATING OFFICE** RED LIGHT 1H & 2 H

Certified Mail Fee \$ 3.40

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ _____

☐ Certified Mail Restricted Delivery \$ _____

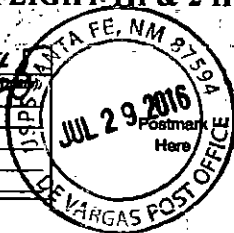
☐ Adult Signature Required \$ _____

☐ Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Roy Niederhoffer
 1700 Broadway, 39th Floor
 New York, NY 10019

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



7015 0640 0001 7532 2948

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

For delivery information, visit **MHF/BC OPERATING OFFICE** RED LIGHT 1H & 2 H

Certified Mail Fee \$ 3.40

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 \$ _____

Susan Cole Niederhoffer
 101 Merritt 7 Corporate Park,
 Floor 6
 New York, New York 06851

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



CERTIFIED MAIL®

SENDER: COMPLETE THIS SECTION BEFORE DELIVERY

PLACE STICKER AT TOP OF ENVELOPE, FOLD AT DOTTED LINE

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:

Roy Niederhoffer
 1700 Broadway, 39th Floor
 New York, NY 10019

9590 9402 1505 5362 6080 29

2. Article Number (Transfer from service label)
 7015 0640 0001 7532 2931

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

A. Signature B. Hyne ☐ Agent ☒ Addressee

B. Received by (Printed Name) B. Hyne C. Date of Delivery 8/1/16

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

3. Service Type

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

Domestic Return Receipt

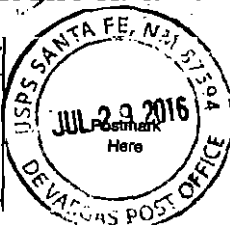
7015 0640 0001 7532 2955

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

For delivery information, visit **MHF/BC OPERATING**
OFFIC RED LIGHT 1H & 2 H

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 \$



Gretchen B. Nearburg
 1129 Challenger
 Lakeway, TX 78734

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

See Reverse for Instructions

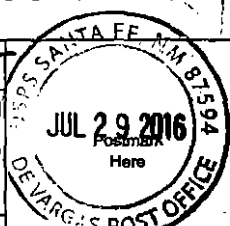
7015 0640 0001 7532 2962

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

For delivery information, visit **MHF/BC OPERATING**
OFFIC RED LIGHT 1H & 2 H

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

Menpart Associates
 c/o Palisades Hudson Financial Group,
 2 Overhill Road, Suite 100,
 Scarsdale, NY 10583

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:

Gretchen B. Nearburg
 1129 Challenger
 Lakeway, TX 78734

9590 9402 1505 5362 6080 43

2. Article Number (Transfer from service label)

7015 0640 0001 7532 2955

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

Domestic Return Receipt

THIS SECTION ON DELIVERY

A. Signature

X [Signature]

☐ Agent
☒ Addressee

B. Received by (Printed Name)

X [Signature]

C. Date of Delivery

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

☐ Yes
☒ No

3. Service Type

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

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

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:

Menpart Associates
 c/o Palisades Hudson Financial Group,
 2 Overhill Road, Suite 100,
 Scarsdale, NY 10583

9590 9402 1505 5362 6080 50

2. Article Number (Transfer from service label)

7015 0640 0001 7532 2962

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature]

☐ Agent
☒ Addressee

B. Received by (Printed Name)

X [Signature]

C. Date of Delivery

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

☐ Yes
☒ No

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ 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 2979

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

For delivery information, visit **OFFICE** **MFH/BC OPERATING RED LIGHT 1H & 2H**

Certified Mail Fee \$ 3.15

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 \$

Holsum, Inc.
 P.O. Box 2527
 Roswell, New Mexico 88202

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:

Holsum, Inc.
 P.O. Box 2527
 Roswell, New Mexico 88202

9590 9402 1505 5362 6080 67

2. Article Number (Transfer from service label)

7015 0640 0001 7532 2979

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Andrew Leon C. Date of Delivery 8/2/16

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

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

7015 0640 0001 7532 2986

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

For delivery information, visit **OFFICE** **MFH/BC OPERATING RED LIGHT 1H & 2H**

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 \$

AAR Limited Partnership
 8523 Thackery St, Unit 9301
 Dallas, TX 75225

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:

AAR Limited Partnership
 8523 Thackery St, Unit 9301
 Dallas, TX 75225

9590 9402 1505 5362 6080 74

2. Article Number (Transfer from service label)

7015 0640 0001 7532 2986

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Oneida Sparks C. Date of Delivery 8/3/16

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

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

7015 0640 0001 7532 2993

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

Domestic Mail Only

For delivery information, visit **MHF/BC OPERATING
RED LIGHT 1H & 2 H****OFFIC**

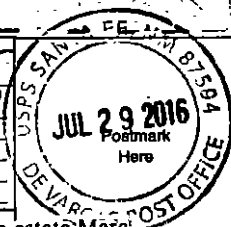
Certified Mail Fee

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

Gene Reischman, as his separate estate Marc
Reischman and Michael Reischman, Personal
Representatives of the Estate of Gene
Reischman
c/o Nearburg Exploration Company, LLC
P.O. Box 823085
Dallas TX 75382



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

See Reverse for Instructions

7015 0640 0001 7532 3006

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

Domestic Mail Only

For delivery information, visit **MHF/BC OPERATING
RED LIGHT 1H & 2 H****OFFIC**

Certified Mail Fee

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

LJR Resources Ltd. Co.
723 N. Main
Roswell, NM 88201



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:

Gene Reischman, as his separate estate Marc
Reischman and Michael Reischman, Personal
Representatives of the Estate of Gene
Reischman
c/o Nearburg Exploration Company, LLC
P.O. Box 823085
Dallas TX 75382

9590 9402 1505 5362 6080 81

2

7015 0640 0001 7532 2993

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Dennis

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Dennis

C. Date of Delivery

8/3/16

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

RETURNED

7015 0640 0001 7532 3013

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

For delivery information, visit **MHF/BC OPERATING RED LIGHT 1H & 2H**
OFFIC

Certified Mail Fee \$ 3.85
Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.80
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postmark
JUL 29 2016
DE VARGAS POST OFFICE

R-N Limited Partnership
3755 East Grand Plains Avenue
Roswell, NM 88201

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

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:
R-N Limited Partnership
3755 East Grand Plains Avenue
Roswell, NM 88201

9590 9402 1505 5362 6079 85

2. Article Number (from service label)
7015 0640 0001 7532 3013

SECTION ON DELIVERY

A. Signature
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Don Stevenson

C. Date of Delivery
8/2/16

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

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

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

7015 0640 0001 7532 3020

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

For delivery information, visit **MHF/BC OPERATING RED LIGHT 1H & 2H**
OFFIC

Certified Mail Fee \$ 3.85
Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.80
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postmark
JUL 29 2016
DE VARGAS POST OFFICE

Duane A. Davis
P.O. Box 823085
Dallas TX 75382

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

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:
Duane A. Davis
P.O. Box 823085
Dallas TX 75382

9590 9402 1505 5362 6079 61

2. Article Number (from service label)
7015 0640 0001 7532 3020

SECTION ON DELIVERY

A. Signature
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Duane A. Davis

C. Date of Delivery
8/3/16

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

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

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

7015 0640 0001 7532 3037

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

For delivery information, visit **OFFICE**

MHF/BC OPERATING
RED LIGHT 1H & 2 H

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark Here

Postage

Timothy R. MacDonald
 23 Graham Ln.
 Lucas, TX 75002

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

RETURNED

7015 0640 0001 7532 3044

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

For delivery information, visit **OFFICE**

MHF/BC OPERATING
RED LIGHT 1H & 2 H

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark Here

Postage

Dean A. Horning
 P.O. Box 823085
 Dallas TX 75382

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.		A. Signature <u>ccc 876</u> ☐ Agent ☒ Addressee X <u>D. Dennis</u>	
1. Article Addressed to: Dean A. Horning P.O. Box 823085 Dallas TX 75382		B. Received by (Printed Name) <u>D. Dennis</u> C. Date of Delivery <u>8/3/16</u>	
2. Article Addressed to: 9590 9402 1505 5362 6079 16		D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:	
3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery		☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☒ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	
4. Article Addressed to: 7015 0640 0001 7532 3044		☐ Insured Mail Restricted Delivery (over \$500)	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

7015 0640 0001 7532 3051

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

For delivery information, visit **OFFIC**

MHF/BC OPERATING
RED LIGHT 1H & 2 H

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	\$ _____



Dean A. Horning
3300 North A Street
Bldg. 2, Suite 120
Midland, Texas 79705

7015 0640 0001 7532 3068

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

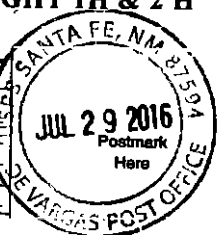
For delivery information, visit **OFFIC**

MHF/BC OPERATING
RED LIGHT 1H & 2 H

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	\$ _____



Maverick Oil & Gas Corp.
C/O: E. Scott Kimbrough
1004 N. Big Spring, Suite 508
Midland, Texas 79701

7015 0640 0001 7532 3075

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

For delivery information, visit

OFFIC

MHF/BC OPERATING
RED LIGHT 1H & 2H

Certified Mail Fee

\$

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

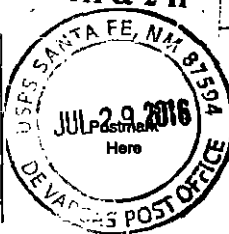
- ☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.10
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

Wright Family Living Trust
 Joe R. Wright - Trustee
 320 Kearney Ave., Apt. 9,
 Santa Fe, NM 87501-1942

PS Form 3800, April 2015 PSN 7530-02-000-9037

See Reverse for Instructions



7015 0640 0001 7532 3082

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

For delivery information, visit

OFFIC

MHF/BC OPERATING
RED LIGHT 1H & 2H

Certified Mail Fee

\$

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

- ☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.10
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

JKS Resources, LLC
 3012 Diamond A. Drive,
 Roswell, NM 88201

PS Form 3800, April 2015 PSN 7530-02-000-9037

See Reverse for Instructions



RETURNED

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:

JKS Resources, LLC
 3012 Diamond A. Drive,
 Roswell, NM 88201

2. Article Number (Transfer from carrier label)

7015 0640 0001 7532 3082

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)

STERN W. S. 8-3-16

C. Date of Delivery
 2016 8-3-16
 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 3099

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

For delivery information, visit **MHF/BC OPERATING**
OFFICE RED LIGHT 1H & 2H

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 \$



JB III Partners L.P.
21 Lord William Penn Drive,
Morristown, NJ 07960-3214

RETURNED

7015 0640 0001 7532 3105

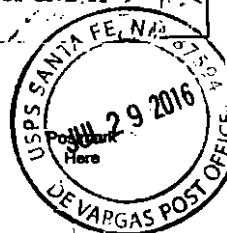
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

MHF/BC OPERATING

For delivery information, visit **RED LIGHT 1H & 2H****OFFICE**

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



Lucie Investments, L.P.
1590 S. E. Ballantrae Court,
Port St. Lucie, Florida 34952

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:

Lucie Investments, L.P.
1590 S. E. Ballantrae Court,
Port St. Lucie, Florida 34952

9590 9402 1505 5362 6079 92

2. Article Number (Transfer from service label)

7015 0640 0001 7532 3105

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Janet Scott* ☒ Agent
☐ Addressee

B. Received by (Printed Name)

Janet Scott C. Date of Delivery *8-4-16*

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 7532 3112

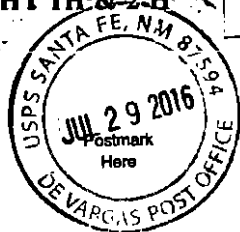
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

MHF/BC OPERATING

For delivery information, visit **RED LIGHT 1H & 2H****OFFICE**

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



LDH Holdings, LLC
P.O. Box 183 - Country Drive,
New Vernon, NJ 07976

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:

LDH Holdings, LLC
P.O. Box 183 - Country Drive,
New Vernon, NJ 07976

9590 9402 1505 5362 6078 17

7015 0640 0001 7532 3112

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *LDH* ☐ Agent
☐ Addressee

B. Received by (Printed Name)

LDH C. Date of Delivery *AUG 5 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 |

Domestic Return Receipt

7015 0640 0001 7532 3129

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

For delivery information, visit

MHF/BC OPERATING
 RED LIGHT 1H & 2H

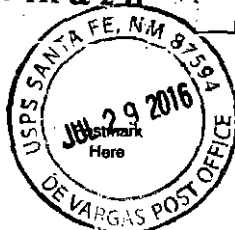
OFFICE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.10
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

LJS Resources, LLC
 33 Eagle Nest Road,
 Morristown, NJ 07960



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:

LJS Resources, LLC
 33 Eagle Nest Road,
 Morristown, NJ 07960

9590 9402 1505 5362 6078 24

7015 0640 0001 7532 3129

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)

C. Date of Delivery

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

3. Service Type

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

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☒ Signature Confirmation™☐ Signature Confirmation Restricted Delivery☐ Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

7015 0640 0001 7532 3136

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

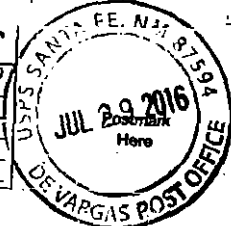
For delivery information, visit

MHF/BC OPERATING
 RED LIGHT 1H & 2H

OFFICE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.45
☐ Return Receipt (electronic) \$ 2.10
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$



CL&F Resources LP
 4 Greenspoint Place, Suite 1500
 16945 Northchase Drive
 Houston, TX 77060

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:

CL&F Resources LP
 4 Greenspoint Place, Suite 1500
 16945 Northchase Drive
 Houston, TX 77060

9590 9402 1505 5362 6078 31

2. Article Number (Transfer from service label)

7015 0640 0001 7532 3136

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)

C. Date of Delivery

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

3. Service Type

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

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☒ Signature Confirmation™☐ Signature Confirmation Restricted Delivery☐ Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

7015 0640 0001 7532 3143

U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT

Domestic Mail Only

For delivery information, visit

OFFICMHF/BC OPERATING
RED LIGHT 1H & 2 H

Certified Mail Fee

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$ 2.20

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

Total

Rate

Service

City

LOGO Energy, LLC
c/o Lefrak Organization
1301 McKinney, Suite 3150
Houston, TX 77010



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:

LOGO Energy, LLC
c/o Lefrak Organization
1301 McKinney, Suite 3150
Houston, TX 77010

9590 9402 1505 5362 6078 48

2. Article Number (Transfer from service label)

7015 0640 0001 7532 3143

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

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 MailTM

☒ Certified Mail[®] ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature ConfirmationTM

☐ Collect on Delivery Restricted Delivery ☐ 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:

ROGO LOGO, LLC
1301 McKinney St., Suite 3150
Houston, TX 77010

9590 9402 1505 5362 6078 55

2. Article Number (Transfer from service label)

7015 0640 0001 7532 3150

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

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 MailTM

☒ Certified Mail[®] ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature ConfirmationTM

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

05TE 2E52 7000 0640 0001 7532 3143

U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT

Domestic Mail Only

For delivery information, visit

OFFICMHF/BC OPERATING
RED LIGHT 1H & 2 H

Certified Mail Fee

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$ 2.20

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage



ROGO LOGO, LLC
1301 McKinney St., Suite 3150
Houston, TX 77010

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

See Reverse for Instructions

7015 0640 0001 7532 3167

U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT

Domestic Mail Only

For delivery information, visit

MHF/BC OPERATING
RED LIGHT 1H & 2H

OFFICE

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

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

Ozark Exploration, Inc.
3838 Oak Lawn Ave, Suite
1525
Dallas, TX 75219



U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT

Domestic Mail Only

For delivery information, visit

MHF/BC OPERATING
RED LIGHT 1H & 2H

OFFICE

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

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

\$

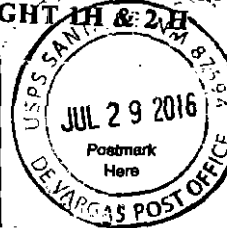
\$

\$

\$

\$

J.Cleo Thompson & James
Cleo Thompson, Jr., LP
325 North St. Paul, Suite 4300
Dallas, TX 75201-3993



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:

Ozark Exploration, Inc.
3838 Oak Lawn Ave, Suite
1525
Dallas, TX 75219

9590 9402 1505 5362 6078 62

2. Article Number (Transfer from service label)

7015 0640 0001 7532 3167

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Walter*☐ Agent☐ Addressee

B. Received by (Printed Name)

WALTER TAYLOR

C. Date of Delivery

8/3/16

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

☐ Yes☐ No

3. Service Type

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

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:

J.Cleo Thompson & James
Cleo Thompson, Jr., LP
325 North St. Paul, Suite 4300
Dallas, TX 75201-3993

9590 9402 1505 5362 6078 79

2. Article Number (Transfer from service label)

7015 0640 0001 7532 3174

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Steve Cantrell*☐ Agent☐ Addressee

B. Received by (Printed Name)

Steve Cantrell

C. Date of Delivery

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

☐ Yes☐ 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 3174

7015 0640 0001 7532 3181

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

For delivery information, visit **MHF/BC OPERATING OFFICE**
RED LIGHT 1H & 2H

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 \$

Black Stone Natural Resources
III-B, LP
1001 Fannin Street, Suite 2020
Houston, TX 77002

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:

Black Stone Natural Resources
III-B, LP
1001 Fannin Street, Suite 2020
Houston, TX 77002

9590 9402 1505 5362 6078 86

2. Article Number (Transfer from envelope label)

7015 0640 0001 7532 3181

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
X [Signature]

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 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
☐ Insured Mail (over \$500)	☐ Signature Confirmation™
☐ Insured Mail Restricted Delivery (over \$500)	☐ Signature Confirmation Restricted Delivery

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

7015 0640 0001 7532 3181

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

For delivery information, visit **MHF/BC OPERATING OFFICE**
RED LIGHT 1H & 2H

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 \$

Black Stone Energy Company, LLC
1001 Fannin Street, Suite 2020
Houston, TX 77002

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:

Black Stone Energy Company, LLC
1001 Fannin Street, Suite 2020
Houston, TX 77002

9590 9402 1505 5362 6078 93

2. Article Number (Transfer from envelope label)

7015 0640 0001 7532 3181

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
X [Signature]

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
 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 (over \$500)	☐ Signature Confirmation Restricted Delivery

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

7015 0640 0001 7532 3204

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

For delivery information, visit **MHF/BC OPERATING**
OFFICE RED LIGHT 1H & 2H

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 \$

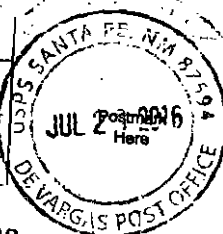
☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Eastland Resources, Inc.
 P.O. Drawer 3488
 Midland, Texas 79702

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9017 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:

Eastland Resources, Inc.
 P.O. Drawer 3488
 Midland, Texas 79702

9590 9402 1505 5362 6079 09

2. 7015 0640 0001 7532 3204

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Vivian Davidson ☐ Agent ☐ Addressee

B. Received by (Printed Name) Vivian Davidson C. Date of Delivery 8/8/16

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™
☐ Signature Confirmation Restricted Delivery (over \$500) ☐ Restricted Delivery

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

RETURNED

7015 0640 0001 7532 3204

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

For delivery information, visit **MHF/BC OPERATING**
OFFICE RED LIGHT 1H & 2H

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 \$

Richard Gillham
 1650 SE Loop 338
 Odessa, TX 79762-9705

PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions



7015 0640 0001 7532 3235

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

For delivery information, visit **MHF/BC OPERATING OFFICE** RED LIGHT 1H & 2 H

Certified Mail Fee \$ 3.85

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

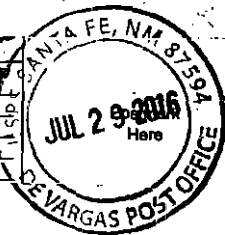
☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Thomas Smith
 1409 S. County Road 1130
 Midland, TX 79702

City, State, ZIP+4®

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



RETURNED

7015 0640 0001 7532 3228

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

For delivery information, visit **MHF/BC OPERATING OFFICE** RED LIGHT 1H & 2 H

Certified Mail Fee \$ 3.85

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

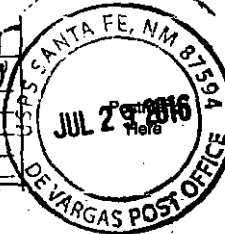
☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Cactus Energy, Inc.
 P.O. Box 2412
 Midland, TX 79702-2412

City, State, ZIP+4®

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.		A. Signature <u>[Signature]</u> ☐ Agent ☐ Addressee	
1. Article Addressed to: Cactus Energy, Inc. P.O. Box 2412 Midland, TX 79702-2412		B. Received by (Printed Name) <u>ERIC MORRIS</u> C. Date of Delivery <u>8-2-16</u>	
2. Article Number (Transfer from mailpiece) <u>7015 0640 0001 7532 3228</u>		D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:	
3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery		☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☒ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	
9590 9402 1505 5362 6077 94		(over \$500)	
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt			

7015 0640 0001 7532 3242

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

Domestic Mail Only

For delivery information, visit

OFFIC

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

Magnum Hunter Production, Inc.
c/o Cimarex Energy Co.
600 N. Marienfeld, Suite 600
Midland, TX 79701

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

See Reverse for Instructions

MHF/BC OPERATING
RED LIGHT 1H & 2H
**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit

OFFIC

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 \$

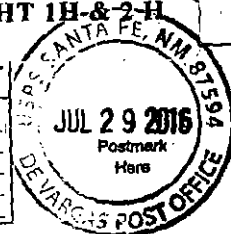
☐ Adult Signature Restricted Delivery \$

Postage

Vanguard Permian, LLC
5847 San Felipe, Suite 3000
Houston, Texas 77057

PS Form 3800, April 2015 PSN 7530-02-000-9037

See Reverse for Instructions

MHF/BC OPERATING
RED LIGHT 1H & 2H**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:

Magnum Hunter Production, Inc.
c/o Cimarex Energy Co.
600 N. Marienfeld, Suite 600
Midland, TX 79701

9590 9402 1505 5362 6077 01

Article Number (Transfer from service label)

7015 0640 0001 7532 3242

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)

S. J. Garcia

C. Date of Delivery

8-11-16

D. Is delivery address different from item 17? ☐ 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

Mail 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:

Vanguard Permian, LLC
5847 San Felipe, Suite 3000
Houston, Texas 77057

9590 9402 1505 5362 6077 18

7015 0640 0001 7532 3259

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)

S. J. Garcia

C. Date of Delivery

8-11-16

D. Is delivery address different from item 17? ☐ 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

Mail Restricted Delivery (over \$500)

Domestic Return Receipt

7015 0640 0001 7532 3266

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

For delivery information, visit **OFFIC**

MHF/BC OPERATING RED LIGHT 1H & 2-H

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 \$

DE VARGAS POST OFFICE
SANTA FE, NM 87594
JUL 29 2016
 Here

Newfield Exploration Mid-Continent, Inc.
 110 W. 7th Street, Suite 1300
 Tulsa, OK, 74119

PS Form 3800, April 2015 PSN 7530-02-000-6047 See Reverse for Instructions

7015 0640 0001 7532 3273

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

For delivery information, visit **OFFIC**

MHF/BC OPERATING RED LIGHT 1H & 2-H

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 \$

DE VARGAS POST OFFICE
SANTA FE, NM 87594
JUL 29 2016
 Postmark Here

Troporo Oil and Gas Company
 511 West Ohio
 Midland, TX 79701

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.		A. Signature <u>X</u> ☐ Agent ☐ Addressee	
B. Received by (Printed Name) <u>CAUG</u>		C. Date of Delivery <u>AUG 01 2015</u>	
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	
2. Article Number (Transfer from service label) <u>9590 9402 1505 5362 6077 25</u>		PS Form 3811, July 2015 PSN 7530-02-000-8053 Domestic Return Receipt	

RETURNED

7015 0640 0001 7532 3280

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

For delivery information, visit **MHF/BC OPERATING RED LIGHT 1H & 2H**

OFFIC

Certified Mail Fee \$ 345

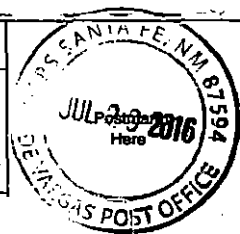
Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy)	\$ <u>280</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Ruth S. Bell
 206 Club Drive.
 Midland, TX 79701

City, State, ZIP+4

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



7015 0640 0001 7532 3297

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

For delivery information, visit **MHF/BC OPERATING RED LIGHT 1H & 2H**

OFFIC

Certified Mail Fee \$ 345

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

☒ Return Receipt (hardcopy)	\$ <u>280</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage \$

Total \$

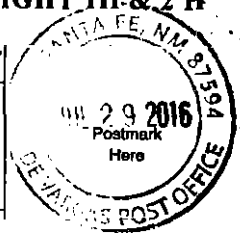
Ser. \$

Str. \$

City \$

C. Kirk Greene
 100 N Arlington Ave Apt 12
 Reno, NV 89501

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



RETURNED

7015 0640 0001 7532 3303

U.S. Postal Service TM	
CERTIFIED MAIL [®] RECEIPT	
Domestic Mail Only	
For delivery information, visit MHF/BC OPERATING RED LIGHT 1H & 2 H	
OFFICE	
Certified Mail Fee \$ <u>3.25</u>	
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	
JUL 29 2016	
USPS SANTA FE, NM 87594	
DEVARGAS POST OFFICE	
George D. Gould 140 Broadway New York, New York 10005	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

RETURNED



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

August 26, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

Re: Application of BC Operating, Inc. for a non-standard spacing and proration unit, unorthodox well location, and compulsory pooling, Eddy County, New Mexico.
Red Light 27-34 State Com No. 1H Well

Ladies & Gentlemen:

This letter is to advise you that BC Operating, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on September 15, 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 by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Harmon Murphy, at (432) 684-9696 or hmurphy@bcoperating.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR BC OPERATING, INC.



August 26, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

Re: Application of BC Operating, Inc. for a non-standard spacing and proration unit, unorthodox well location, and compulsory pooling, Eddy County, New Mexico.
Red Light 27-34 State Com No. 2H Well

Ladies & Gentlemen:

This letter is to advise you that BC Operating, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on September 15, 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 by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Harmon Murphy, at (432) 684-9696 or hmurphy@bcoperating.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR BC OPERATING, INC.

**BC OPERATING
RED LIGHT 1H & 2H WELL**

Wallace H. Scott Unified Credit
Trust, Dorothy Cecile Scott, Trustee
10205 River Plantation Drive
Austin, Texas 78747

Ellen R. Matson
5703 Fairlane
Austin, Texas 78757

Rowan Family Minerals, LLC
P.O. Box 109
Andrews, Texas 79714

Dorothy E. Berry
2007 Highland Oaks Street
Ft. Worth, Texas 76107-3645

Estate of Sam H. Berry
2007 Highland Oaks Street
Ft. Worth, Texas 76107-3645

Estate of Sam H. Berry
2208 Canterbury Dr.,
Fort Worth, Texas 76107

KWCL Properties
307 W. 7th St., Ste 1705
Fort Worth, Texas 76102

Marks & Crane Rigging Company
C/O Richard Gillham
1650 SE Loop 338
Odessa, Texas 79762

BK Exploration
10159 E 11th Street, Suite 401
Tulsa, Oklahoma 74128

Carlsbad Association for
Retarded Children, Inc.
P.O. Drawer 1808
Carlsbad, New Mexico 88221

Glenna Sue Sloan
36529 Gerig Drive SE
Albany, Oregon 97322

Donna Lynn Moore
1905 Runnels Street
Big Spring, Texas 79720

Morgan Moore
1905 Runnels Street
Big Spring, Texas 79720

Kevin Moore
1905 Runnels Street
Big Spring, Texas 79720

Arthena Jones
1905 Runnels Street
Big Spring, Texas 79720

7015 0640 0001 7531 8927

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

For delivery information, visit **MHF/BC OPER. OFFICE REDLIGHT 1H & 2H**

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.40

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark
 AUG 26 2016
 VARGAS POST OFFICE

Wallace H. Scott Unified Credit
 Trust, Dorothy Cecile Scott, Trustee
 10205 River Plantation Drive
 Austin, Texas 78747

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

RETURNED

7015 0640 0001 7531 8934

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

For delivery information, visit **MHF/BC OPER. OFFICE REDLIGHT 1H & 2H**

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.40

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark
 AUG 26 2016
 VARGAS POST OFFICE

Ellen R. Matson
 5703 Fairlane
 Austin, Texas 78757

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:
 Ellen R. Matson
 5703 Fairlane
 Austin, Texas 78757

2. Article Number (Transfer from service label)
 7015-0640-0001-7531-8934

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Ellen Matson ☐ Agent ☐ Addressee

B. Received by (Printed Name) Ellen Matson C. Date of Delivery 8/1/16

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

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

9590 9402 1838 6104 7690 27

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

7015 0640 0001 7531 8941

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

For delivery information, visit **OFFICE** **MHF/BC OPER. REDLIGHT 1H & 2H**

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark Here
 AUG 26 2016
 EVARGAS POST OFFICE

Rowan Family Minerals, LLC
 P.O. Box 109
 Andrews, Texas 79714

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:

Rowan Family Minerals, LLC
 P.O. Box 109
 Andrews, Texas 79714

9590 9402 1838 6104 7690 41

2. Article Number (Transfer from service label)
 7015 0640 0001 7531 8941

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 30 2016

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

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

7015 0640 0001 7531 8958

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

For delivery information, visit **OFFICE** **MHF/BC OPER. REDLIGHT 1H & 2H**

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark Here
 AUG 26 2016
 EVARGAS POST OFFICE

Dorothy E. Berry
 2007 Highland Oaks Street
 Ft. Worth, Texas 76107-3645

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:

Dorothy E. Berry
 2007 Highland Oaks Street
 Ft. Worth, Texas 76107-3645

9590 9402 1838 6104 7690 58

2. Article Number (Transfer from service label)
 7015 0640 0001 7531 8958

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 30 2016

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

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

7015 0640 0001 7531 8965

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit **MHF/BC OPER.****OFFICE** CREDLIGHT 1H & 2H

Certified Mail Fee

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

☒ Return Receipt (hardcopy) \$ 3.45

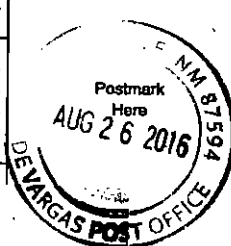
☐ Return Receipt (electronic) \$ 2.10

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage



Estate of Sam H. Berry
2007 Highland Oaks Street
Ft. Worth, Texas 76107-3645

PS Form 3800, April 2015 PSN 7530-02-000-0047

See Reverse for Instructions

7015 0640 0001 7531 8972

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit **MHF/BC OPER.****OFFICE** CREDLIGHT 1H & 2H

Certified Mail Fee

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

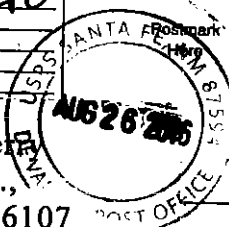
☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$ 2.10

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$



Estate of Sam H. Berry
2208 Canterbury Dr.,
Fort Worth, Texas 76107

PS Form 3800, April 2015 PSN 7530-02-000-0047

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:

Estate of Sam H. Berry
2007 Highland Oaks Street
Ft. Worth, Texas 76107-3645

9590 9402 1838 6104 7690 65

2. Article Number (Transfer from service label)

7015 0640 0001 7531 8965

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X D. Nixen☐ 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☐ 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 8989

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

For delivery information, visit **MHF/BC OPER.**
OFFICE CREDLIGHT 1H & 2H

Certified Mail Fee \$ 3.45
2.40

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	\$	

Postmark Here
 AUG 26 2016
 EL PASO POST OFFICE

KWCL Properties
 307 W. 7th St., Ste 1705
 Fort Worth, Texas 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:
 KWCL Properties
 307 W. 7th St., Ste 1705
 Fort Worth, Texas 76102

9590 9402 1838 6104 7690 89

2. Article Number (Transfer from service label)
 7015 0640 0001 7531 8989

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Barbara Dorman ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 Barbara Dorman

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

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

RETURNED

7015 0640 0001 7531 8996

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

For delivery information, visit **MHF/BC OPER.**
OFFICE REDLIGHT 1H & 2H

Certified Mail Fee \$ 3.45
2.40

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	\$	

Postmark Here
 AUG 26 2016
 EL PASO POST OFFICE

Marks & Crane Rigging Company
 C/O Richard Gillham
 1650 SE Loop 338
 Odessa, Texas 79762

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

7015 0640 0001 7531 9009

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit **MHF/BC OPER.****OFFIC REDLIGHT 1H & 2H**

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 \$



BK Exploration
10159 E 11th Street, Suite 401
Tulsa, Oklahoma 74128

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:

BK Exploration
10159 E 11th Street, Suite 401
Tulsa, Oklahoma 74128

9590 9402 1838 6104 7691 02

2. Article Number (Transfer from service label)

7015 0640 0001 7531 9009

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Bred Burks
☐ Agent
☐ Addressee

B. Received by (Printed Name)

Bred Burks

C. Date of Delivery

8/29/16D. Is delivery address different from item 1? ☐ YesIf 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 ☐ Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7531 9016

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit **MHF/BC OPER.****OFFIC REDLIGHT 1H & 2H**

Certified Mail Fee

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

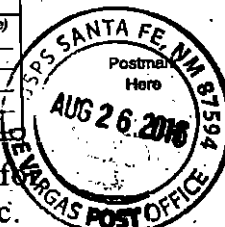
☒ Return Receipt (hardcopy) \$ 345

☐ Return Receipt (electronic) \$ 280

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$



Carlsbad Association for
Retarded Children, Inc.
P.O. Drawer 1808
Carlsbad, New Mexico 88221

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

See Reverse for Instructions

7015 0640 0001 7531 7685

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

For delivery information, visit **MHF/BC OPER.**
OFFICIAL REDLIGHT 1H & 2H

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 \$

Glenna Sue Sloan
 36529 Gerig Drive SE
 Albany, Oregon 97322

Postmark Here
 AUG 26 2016
 DE VARGAS POST OFFICE

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

7015 0640 0001 7531 7692

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

For delivery information, visit **MHF/BC OPER.**
OFFICIAL REDLIGHT 1H & 2H

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 \$

Donna Lynn Moore
 1905 Runnels Street
 Big Spring, Texas 79720

Postmark Here
 AUG 26 2016
 DE VARGAS POST OFFICE

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:
 Glenna Sue Sloan
 36529 Gerig Drive SE
 Albany, Oregon 97322

9590 9402 1838 6104 7685 49

2. Article Number (Transfer from service label)
 7015 0640 0001 7531 7685

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 * *Glenna Sloan* ☐ Agent ☒ Addressee

B. Received by (Printed Name)
 Glenna Sloan

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

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Donna Lynn Moore
 1905 Runnels Street
 Big Spring, Texas 79720

9590 9402 1838 6104 7685 56

2. Article Number (Transfer from service label)
 7015 0640 0001 7531 7692

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 * *Donna Lynn Moore* ☐ Agent ☒ Addressee

B. Received by (Printed Name)
 Donna Lynn Moore

C. Date of Delivery
 9-7-16

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

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

7015 0640 0001 7531 7708

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

For delivery information, visit our

MHF/BC OPER.

OFFICIAL REDLIGHT 1H & 2H

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.85
☐ Return Receipt (electronic) \$ 2.80
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$



Morgan Moore
 1905 Runnels Street
 Big Spring, Texas 79720

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

See Reverse for Instructions

7015 0640 0001 7531 7722

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

For delivery information, visit our

MHF/BC OPER.

OFFICIAL REDLIGHT 1H & 2H

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.85
☐ Return Receipt (electronic) \$ 2.80
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$



Kevin Moore
 1905 Runnels Street
 Big Spring, Texas 79720

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:

Kevin Moore
 1905 Runnels Street
 Big Spring, Texas 79720

2. Article Number (Transfer from service label)

7015 0640 0001 7531 7722

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
Kevin Moore
 B. Received by (Printed Name) C. Date of Delivery 8-7-16
 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 MailTM
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature ConfirmationTM
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0001 7531 7715

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

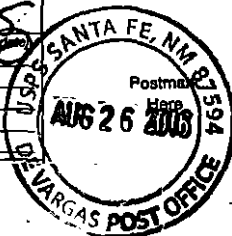
For delivery information, visit us **MHF/BC OPER.**
OFFICE REDLIGHT 1H & 2H

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



Arthena Jones
 1905 Runnels Street
 Big Spring, Texas 79720

PS Form 3800, April 2015 PSN 7530-02-000-9017

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:

Arthena Jones
 1905 Runnels Street
 Big Spring, Texas 79720

2. Article Number (Transfer from service label)

9590 9402 1838 6104 7690 10
 7015 0640 0001 7531 7715

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Arthena Jones ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

9-7-16

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
☐ Mail Restricted Delivery ☐ Restricted Delivery

Domestic Return Receipt