

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe New Mexico  
**Exhibit No 7**  
Submitted by  
**COG OPERATING LLC** {  
Hearing Date April 13, 2017



WILLIAM F CARR

March 17 2017

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

**TO ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS**

**Re Amended Application of COG Operating LLC for a non-standard spacing and  
proration unit and compulsory pooling, Eddy County, New Mexico  
Populus Fed 2H Well**

Ladies and Gentlemen

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on April 13, 2017. 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 Prehearing Statement four business days in advance of a scheduled hearing, but no later than the Thursday preceding the 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 Vincent Cuccerre at (432) 685-2589 or [vcuccerre@concho.com](mailto:vcuccerre@concho.com).

Sincerely,

William F. Carr  
Senior Counsel  
COG Operating LLC

**CORPORATE ADDRESS**

ONE CONCHO CENTER | 600 WEST ILLINOIS AVENUE | MIDLAND, TEXAS 79701  
P 432 683 7443 | F 432 683 7441

**SANTA FE OFFICE**

1048 PASEO DE PERALTA | SANTA FE, NEW MEXICO 87501  
P 505 780 8000 | F 505 428 0485



WILLIAM F CARR

March 17 2017

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

**TO AFFECTED PARTIES, OFFSETTING LESSEES, AND OPERATORS**

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Populus Fed 2H Well**

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Sincerely

A handwritten signature in black ink, appearing to read "William F. Carr", written over a horizontal line.

William F Carr  
Senior Counsel  
COG Operating LLC

**CORPORATE ADDRESS**

ONE CONCHO CENTER | 600 WEST ILLINOIS AVENUE | MIDLAND TEXAS 79701  
P 432 683 7443 | F 432 683 7441

**SANTA FE OFFICE**

1048 PASEO DE PERALTA | SANTA FE NEW MEXICO 87501  
P 505 780 8000 | F 505 428 0485

7015 0640 0006 1348 6157

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 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 \$

Postage \$

OXY Y 1 Company  
 P O Box 4294  
 Houston Texas 77210-4294  
 Attention Permian Land Manager



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

See Reverse for Instructions

**SENDER: COMPLETE**

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

1 Article Addressed to

OXY Y 1 Company  
 P O Box 4294  
 Houston Texas 77210-4294  
 Attention Permian Land Manager

9590 9402 1627 6053 9157 79

2 Article Number (Transfer from serial label)

7015 0640 0006 1348 6157

PS Form 3811 July 2015 PSN 7530 02-000 9053

**DELIVERY**

A. Signature

☒ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3 Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                               | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                               | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

Domestic Return Receipt

7015 0640 0006 1348 6133

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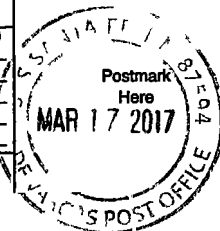
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**OFFICIAL MAIL**

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 \$

Postage \$

EOG A Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Janet Richardson



See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

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 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Janet Richardson

9590 9402 1627 6053 9157 93

7015 0640 0006 1348 6133

PS Form 3811 July 2015 PSN 7530 02-000 9053

**DELIVERY**

A. Signature

☒ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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 If YES enter delivery address below ☐ No

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- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                               | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                               | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |   |

Domestic Return Receipt

7015 0640 0006 1348 6140

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**OFFICIAL**

Certified Mail Fee

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

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage



EOG M Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840

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

7016 1370 0000 0397 0624

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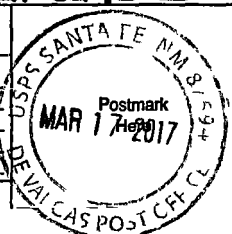
**OFFICIAL**

Certified Mail Fee

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

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage



EOG M Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Hannah Palomin

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

**SENDER: COMPLETE THIS SECTION**

- Complete items 1 2 and 3
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1 Article Addressed to

EOG M Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840

9590 9402 1627 6053 9157 86

7015 0640 0006 1348 6140

PS Form 3811 July 2015 PSN 7530 02-000 9053

**DELIVERY**

A. Signature

X Bna

☐ Agent  
☐ Addressee

B Received by (Printed Name)

Bna

C Date of Delivery

3/23/17

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

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1 Article Addressed to

EOG M Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Hannah Palomin

9590 9402 1627 6053 9157 24

Article Number (Transfer from service label)

7016 1370 0000 0397 0624

PS Form 3811 July 2015 PSN 7530 02-000 9053

**DELIVERY**

A. Signature

X Bna

☐ Agent  
☐ Addressee

B Received by (Printed Name)

Bna

C Date of Delivery

3/23/17

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

7016 1370 0000 0397 0631

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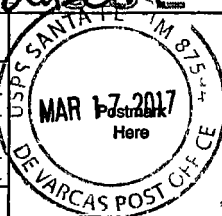
\$

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 \$

Postage

OXY Y 1 Company  
 P O Box 4294  
 Houston Texas 77210-4294  
 Attention Permian Land Manager



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

**SENDER: COMPLETE THIS SECTION**

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 P O Box 4294  
 Houston Texas 77210-4294  
 Attention Permian Land Manager

9590 9402 1627 6053 9157 17

7016 1370 0000 0397 0631

PS Form 3811 July 2015 PSN 7530 02 000 9053

**DELIVERY**

A. Signature

*[Signature]* ☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery  
 3/21/17

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™  
☐ Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

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Certified Mail Fee

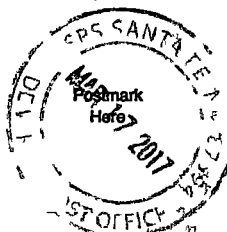
\$

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 \$

Postage

EOG A Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Janet Richardson



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EOG A Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Janet Richardson

9590 9402 1627 6053 9157 31

7016 1370 0000 0397 0617

PS Form 3811 July 2015 PSN 7530 02 000 9053

**DELIVERY**

A. Signature

*[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

3/23/17

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™  
☐ Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

7016 1370 0000 0397 0594

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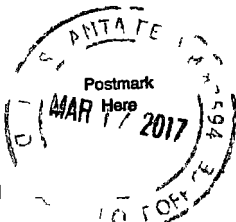
Certified Mail Fee

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 \$

Postage

Chevron USA Inc  
 6301 Deauville  
 Midland Texas 79706 2964



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**SENDER: COMPLETE THIS SECTION**

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1 Article Addressed to

Chevron USA Inc  
 6301 Deauville  
 Midland Texas 79706 2964

9590 9402 1627 6053 9157 55

7016 1370 0000 0397 0594

PS Form 3811 July 2015 PSN 7530 02 000 9053

Domestic Return Receipt

Signature

☒ Agent  
☐ Addressee

B Received by (Printed Name)

C Date of Delivery

3/20/17

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

3 Service Type

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☒ Agent  
☐ Addressee

B Received by (Printed Name)

C Date of Delivery

BONNIE KESSAI 3/20/17

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

3 Service Type

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

(over \$500)

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1 Article Addressed to

Cimarex Energy Corp  
 600 North Marienfeld  
 Midland Texas 79701  
 Attention Hilary Knight

9590 9402 1627 6053 9157 48

7016 1370 0000 0397 0600

PS Form 3811 July 2015 PSN 7530 02 000 9053

Domestic Return Receipt

7016 1370 0000 0397 0600

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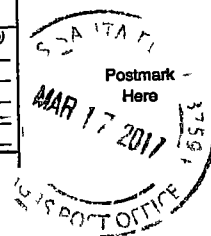
Certified Mail Fee

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 \$

Postage

Cimarex Energy Corp  
 600 North Marienfeld  
 Midland Texas 79701  
 Attention Hilary Knight



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

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Certified Mail Fee

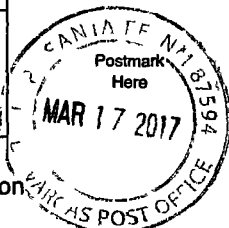
\$

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

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☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

Chevron North America Exploration  
 and Production Company  
 1400 Smith Street  
 Houston Texas 77002  
 Attention Amber Tarr Delach



PS Form 3800, April 2015 PSN 7530 02 000 9047

See Reverse for Instructions

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Chevron North America Exploration  
 and Production Company  
 1400 Smith Street  
 Houston Texas 77002  
 Attention Amber Tarr Delach

9590 9402 1627 6053 9157 62

2 Article Number (Transfer from service label)

7015 0640 0006 1340 0004

**COMPLETE THIS SECTION ON DELIVERY**

A Signature

X

- ☐ Agent  
☐ Addressee

B Received by (Printed Name)

Date of Delivery:

D Is delivery address different from item 1?  
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- ☐ Yes  
☐ No

3 Service Type

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☐ Adult Signature Restricted Delivery  
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☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
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Domestic Return Receipt



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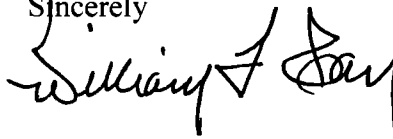
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Senior Counsel  
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Senior Counsel  
COG Operating LLC

CORPORATE ADDRESS

ONE CONCHO CENTER | 600 WEST ILLINOIS AVENUE | MIDLAND TEXAS 79701  
P 432 683 7443 | F 432 683 7441

SANTA FE OFFICE

1048 PASEO DE PERALTA | SANTA FE NEW MEXICO 87501  
P 505 780 8000 | F 505 428 0485

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- ☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
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☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

EOG M Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Hannah Palomin



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

See Reverse for Instructions

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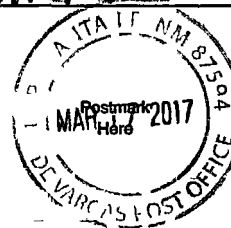
\$

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 \$

Postage

EOG A Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Janet Richardson



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

EOG M Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Hannah Palomin

9590 9402 1627 6053 9156 70

2 Article Number (Transfer from service label)

7016 1370 0000 0397 0662

PS Form 3811 July 2015 PSN 7530 02 000 9053

**DELIVERY**

A. Signature

X *[Signature]*

- ☐ Agent  
☐ Addressee

B Received by (Printed Name)

*[Signature]*

C Date of Delivery

3/23/17

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

Mail

Mail 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

EOG A Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Janet Richardson

9590 9402 1627 6053 9156 94

2 Article Number (Transfer from service label)

7016 1370 0000 0397 0655

PS Form 3811 July 2015 PSN 7530 02 000 9053

**DELIVERY**

A. Signature

X *[Signature]*

- ☐ Agent  
☐ Addressee

B Received by (Printed Name)

*[Signature]*

C Date of Delivery

3/23/17

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

Mail

Mail Restricted Delivery

Domestic Return Receipt

7016 1370 0000 0397 0648

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**OFFICIAL USE**

Certified Mail Fee \$

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

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

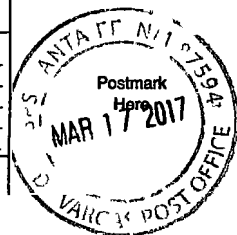
☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

OXY Y 1 Company  
 P O Box 4294  
 Houston Texas 77210-4294  
 Attention Permian Land Manager

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



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**OFFICIAL USE**

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 \$

Postage \$

OXY Y 1 Company  
 P O Box 4294  
 Houston Texas 77210-4294  
 Attention Permian Land Manager

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

OXY Y 1 Company  
 P O Box 4294  
 Houston Texas 77210-4294  
 Attention Permian Land Manager

9590 9402 1627 6053 9157 00

2. Article Number (Transfer from service label)

7016 1370 0000 0397 0648

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *[Signature]* 21 2017

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

7016 1370 0000 0397 0754

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**OFFICIAL USE**

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 \$

Postage \$

Oxy USA Inc  
 5 Greenway Plaza No 110  
 Houston Texas 77046 0521

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



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**OFFICIAL USE**

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 \$

Postage \$

Oxy USA Inc  
 5 Greenway Plaza No 110  
 Houston Texas 77046 0521

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

Oxy USA Inc  
 5 Greenway Plaza No 110  
 Houston Texas 77046 0521

9590 9402 1627 6053 9155 95

2. Article Number (Transfer from service label)

7016 1370 0000 0397 0754

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *[Signature]* 21 2017

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

7016 1370 0000 0397 0761

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**OFFICIAL HOUSE**

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 \$

Postage

OXY Y 1 Company  
 P O Box 4294  
 Houston Texas 77210-4294  
 Attention Permian Land Manager



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

7016 1370 0000 0397 0776

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**OFFICIAL HOUSE**

Certified Mail Fee

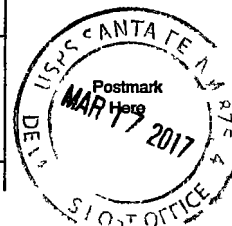
\$

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 \$

Postage

Talus Inc  
 Post Office Box 1210  
 Graham Texas 76450



PS Form 3811, 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

OXY Y 1 Company  
 P O Box 4294  
 Houston Texas 77210-4294  
 Attention Permian Land Manager

9590 9402 1627 6053 9158 16

Article Number (Transfer from service label)

7016 1370 0000 0397 0761

PS Form 3811 July 2015 PSN 7530 02-000 9053

VERY

A Signature

X *[Signature]* ☐ Agent ☐ Addressee

B Received by (Printed Name)

C Date of Delivery

*[Signature]* MAR 21 2017

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

all 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

Talus Inc  
 Post Office Box 1210  
 Graham Texas 76450

9590 9402 1627 6053 9158 09

Article Number (Transfer from service label)

7016 1370 0000 0397 0776

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

*[Signature]* MAR 21 2017

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

(over \$500)

Domestic Return Receipt

7016 1370 0000 0397 0723

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Certified Mail Fee

\$

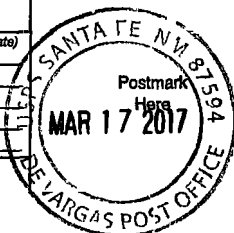
Extra Services & Fees (check box, add fee as appropriate)

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

Postage

\$

EOG A Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Janet Richardson



PS Form 3811, 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

EOG A Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840  
 Attention Janet Richardson

9590 9402 1627 6053 9156 25

2 Article Number (Transfer from service label)

7016 1370 0000 0397 0723

PS Form 3811 July 2015 PSN 7530 02 000 9053

**COMPLETE THIS SECTION ON DELIVERY**

A Signature

*Bra*

- ☐ Agent  
☐ Addressee

B Received by (Printed Name)

*Bra*

C Date of Delivery

*3/23/17*

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

☐ Restricted Delivery

Domestic Return Receipt

7016 1370 0000 0397 0730

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Certified Mail Fee

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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 \$

Postage

\$

EOG M Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840



PS Form 3811, 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

EOG M Resources Inc  
 105 South Fourth Street  
 Artesia New Mexico 88211 0840

9590 9402 1627 6053 9156 18

2 Article Number (Transfer from service label)

7016 1370 0000 0397 0730

PS Form 3811 July 2015 PSN 7530 02 000 9053

**DELIVERY**

A Signature

*Bra*

- ☐ Agent  
☐ Addressee

B Received by (Printed Name)

*Bra*

C Date of Delivery

*3/23/17*

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

3 Service Type

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

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

(over \$500)

Domestic Return Receipt

7016 1370 0000 0397 0747

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**OFFICIAL USE**

Certified Mail Fee

\$

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

- ☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Add It Signature Required \$  
☐ Add It Signature Restricted Delivery \$

Postage

\$

Latigo Petroleum Inc  
 15 West 6th Street No 1100  
 Tulsa Oklahoma 74119

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



7016 1370 0000 0397 0693

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Certified Mail Fee

\$

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

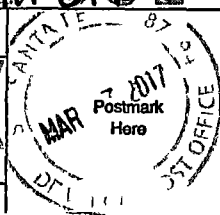
- ☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Add It Signature Required \$  
☐ Add It Signature Restricted Delivery \$

Postage

\$

Chevron Midcontinent LP  
 Chevron USA Inc  
 6301 Deauville  
 Midland Texas 79706 2964

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 Midcontinent LP  
 Chevron USA Inc  
 6301 Deauville  
 Midland Texas 79706 2964

2 Article Number (Transfer from service label)

7016 1370 0000 0397 0693

PS Form 3811 July 2015 PSN 7530 02 000 9053

**DELIVERY**

A Signature

*X Maria Green*

- ☒ Agent  
☐ Addressee

B Received by (Printed Name)

*Maria Green*

C Date of Delivery

*3/27/17*

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

3 Service Type

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

Mail Restricted Delivery

Domestic Return Receipt

7016 1370 0000 0397 0716

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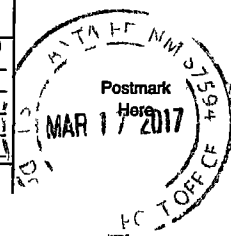
Certified Mail Fee

\$

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

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

Postage



Echo Production Inc  
 Post Office Box 1210  
 Graham Texas 76450

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

7016 1370 0000 0397 0686

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Certified Mail Fee

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

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

Postage



Chevron North America Exploration  
 and Production Company  
 1400 Smith Street  
 Houston Texas 77002  
 Attention Amber Tarr Delach

PS Form 3811, 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

Echo Production Inc  
 Post Office Box 1210  
 Graham Texas 76450

9590 9402 1627 6053 9156 32

2 Article Number (Transfer from service label)

7016 1370 0000 0397 0716

PS Form 3811 July 2015 PSN 7530 02 000 9053

Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Amber Tarr Delach*
☐ Agent  
☐ Addressee

B Received by (Printed Name)

Taylor Doyle

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

(over \$500)

## 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 North America Exploration  
 and Production Company  
 1400 Smith Street  
 Houston Texas 77002  
 Attention Amber Tarr Delach

9590 9402 1627 6053 9156 63

2 Article Number (Transfer from service label)

7016 1370 0000 0397 0686

PS Form 3811 July 2015 PSN 7530 02 000 9053

Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

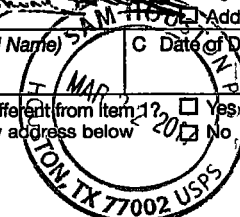
X *Amber Tarr Delach*
☐ Agent  
☐ Addressee

B Received by (Printed Name)

Taylor Doyle

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



7016 1370 0000 0397 0709

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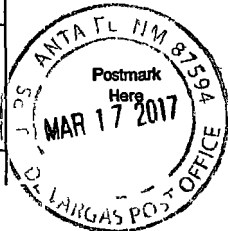
**OFFICIAL HHOPE**

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 \$

Postage \$

Cimarex Energy Corp  
 600 North Marienfeld  
 Midland Texas 79701  
 Attention Hilary Knight

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



7016 1370 0000 0397 0679

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

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**OFFICIAL HHOPE**

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 \$

Postage \$

The Allar Company  
 Post Office Box 1567  
 Graham Texas 76450

PS Form 3811, 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  
 Cimarex Energy Corp  
 600 North Marienfeld  
 Midland Texas 79701  
 Attention Hilary Knight

9590 9402 1627 6053 9156 49

2 Article Number (Transfer from service label)  
 7016 1370 0000 0397 0709

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
☒ Agent  
☐ Addressee

B. Received by (Printed Name)  
 B. RUSA

C. Date of Delivery  
 3/20/17

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

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

(over \$500)

**SENDER: COMPLETE THIS SECTION**

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

1 Article Addressed to  
 The Allar Company  
 Post Office Box 1567  
 Graham Texas 76450

9590 9402 1627 6053 9156 87

2 Article Number (Transfer from service label)  
 7016 1370 0000 0397 0679

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
☒ Agent  
☐ Addressee

B. Received by (Printed Name)  
 M Barrett

C. Date of Delivery  
 3-20-17

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

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

(over \$500)