

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

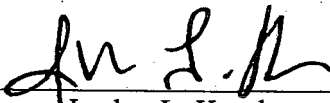
**APPLICATION OF XTO ENERGY INC.
FOR A NON-STANDARD SPACING AND
PRORATION UNIT, AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.**

CASE NO. 15718

AFFIDAVIT

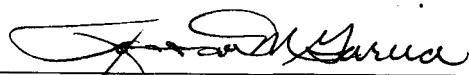
STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

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



Jordan L. Kessler

SUBSCRIBED AND SWORN to before this 7th day of June 2017 by Jordan L. Kessler.



Notary Public



**BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 6
Submitted by: XTO ENERGY, INC..
Hearing Date: June 8, 2017**

HOLLAND & HART



Jordan L. Kessler

Associate

Phone (505) 988-4421

Fax (505) 983-6043

jlkessler@hollandhart.com

May 19, 2017

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: POOLED PARTIES

Re: Application of XTO Energy Inc. for a non-standard spacing and proration unit, and compulsory pooling, Eddy County, New Mexico.
Corral Canyon Federal Com No. 16H Well

Dear Sir or Madam:

This letter is to advise you that XTO Energy 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 June 8, 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 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 Angie Repka, at (817) 885-2746 or Angie_Repka@xtoenergy.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR XTO ENERGY INC.

HOLLAND & HART^{LLP}



Jordan L. Kessler

Associate

Phone (505) 988-4421

Fax (505) 983-6043

jlkessler@hollandhart.com

May 19, 2017

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

RE: Application of XTO Energy Inc. for a non-standard spacing and proration unit, and compulsory pooling, Eddy County, New Mexico.
Corral Canyon Federal Com No. 16H Well

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

This application has been set for hearing before a Division Examiner at 8:15 AM on June 8, 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 Pre-Hearing Statement with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Angie Repka, at (817) 885-2746 or Angie_Repka@xtoenergy.com.

Sincerely,

for Jordan L. Kessler

ATTORNEY FOR XTO ENERGY INC.

**Corral Canyon Fed Com 16H
POOLING LIST**

Stovall Energy, Ltd.
P.O. Box 10
Graham, TX 76450

COG Operating LLC
600 West Illinois Avenue
Midland, TX 79701

BAGAM Ltd.
P.O. Box 900
Graham, TX 76450

HMJ Minerals, Inc.
P.O. Box 1240
Graham, TX 76450

LRF Jr., LLC
P.O. Box 11327
Midland, TX 79702

Moon Royalty L.L.C.
P.O. Box 720070
Oklahoma City, OK 73172

Concho Oil & Gas
600 West Illinois Avenue
Midland, TX 79701

Sonic Oil & Gas, LP
505 5th Street
Graham, TX 76450

H.M. Bettis, Inc.
505 5th Street
Graham, TX 76450

Guinn Family Properties, Ltd.
P.O. Box 1298
Graham, TX 76450

The Allar Company
735 Elm Street
Graham, TX 76450

Corral Canyon Fed Com 16H
Well - Offset Operators

ExxonMobil Corporation
810 Houston Street
Fort Worth, TX 76102

OXY USA, Inc.
5 Greenway Plaza, Suite 110
Houston, TX 77046

COG Operating LLC
600 West Illinois Avenue
Midland, TX 79701

Concho Oil & Gas
600 West Illinois Avenue
Midland, TX 79701

Nadel & Gussman Permian, LLC
4000 North Big Spring, Ste 310
Midland, TX 79705

Chevron U.S.A. Inc.
6301 Deauville Blvd.
Midland, TX 79706

Devon Energy Corporation
333 West Sheridan Avenue
Oklahoma City, OK 73102

Yates Petroleum Corporation
105 S. Fourth Street
Artesia, NM 88210

EOG Resources, Inc.
P.O. Box 2267
Midland, TX 79702

ABO Petroleum
105 S. Fourth Street
Artesia, NM 88210

7016 0750 0000 3268 0292

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

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

OFFICIAL USE

Certified Mail Fee \$

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

☐ Return Receipt (hardcopy)

☐ Return Receipt (electronic)

☐ Certified Mail Restricted Delivery

☐ Adult Signature Required

☐ Adult Signature Restricted Delivery \$

Postage \$

Total \$

Sent to: **Stovall Energy, Ltd.**
P.O. Box 10
Graham, TX 76450

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

0100 3268 0000 0750 7016

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

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

OFFICIAL USE

Certified Mail Fee \$

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

☐ Return Receipt (hardcopy)

☐ Return Receipt (electronic)

☐ Certified Mail Restricted Delivery

☐ Adult Signature Required

☐ Adult Signature Restricted Delivery \$

Postage \$

Total \$

Sent to: **COG Operating LLC**
600 West Illinois Avenue
Midland, TX 79701

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

Stovall Energy, Ltd.
 P.O. Box 10
 Graham, TX 76450

9590 9402 1832 6104 5955 61

2. Article Number (Transfer from service label)

7016 0750 0000 3268 0292

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

A. Signature *Lila Clarke*

☒ Agent ☐ Address

B. Received by (Printed Name) *Lila Clarke*

C. Date of Delivery *5/23/17*

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

Domestic Return Receipt

- 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.

COG Operating LLC
 600 West Illinois Avenue
 Midland, TX 79701

9590 9401 0132 5225 4700 62

2. Article Number (Transfer from service label)

7016 0750 0000 3268 0100

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

A. Signature *J. Monroe*

☐ Agent ☐ Address

B. Received by (Printed Name) *J. MONROE*

C. Date of Delivery *5-22-17*

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

Domestic Return Receipt

7016 0750 0000 3268 0117

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

For delivery information, visit **TO/JLK/Corral Canyon /Case 15718 Fed Com 16H Well - Pooled Parties**

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
 Postage \$
 Total Post \$
 Sent To
 Street and
 City, State

BAGAM Ltd.
P.O. Box 900
Graham, TX 76450

PS Form 3800, April 2015 PSN 7530-02-000-9033 See Reverse for Instructions

7016 0750 0000 3268 0124

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

For delivery information, visit **TO/JLK/Corral Canyon /Case 15718 Fed Com 16H Well - Pooled Parties**

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
 Postage \$
 Total Post \$
 Sent To
 Street and
 City, State

HMJ Minerals, Inc.
P.O. Box 1240
Graham, TX 76450

PS Form 3800, April 2015 PSN 7530-02-000-9033 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:

BAGAM Ltd.
P.O. Box 900
Graham, TX 76450

9590 9402 1832 6104 5964 07

2. Article Number (Transfer from service label)

7016 0750 0000 3268 0117

PS Form 3811, July 2015 PSN 7530-02-000-9033

A. Signature

[Signature] ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/23/17

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 checked="" 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 |

Restricted Delivery

Domestic Return Receipt

CERTIFIED MAIL

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:

HMJ Minerals, Inc.
P.O. Box 1240
Graham, TX 76450

9590 9402 1832 6104 5964 21

2. Article Number (Transfer from service label)

7016 0750 0000 3268 0124

PS Form 3811, July 2015 PSN 7530-02-000-9033

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/22/17

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 checked="" 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

Domestic Return Receipt

7016 0750 0000 3268 0131

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

For delivery information, visit **TO/JLK/Corral Canyon /Case**
 15718 Fed Com 14H Well -
 Pooled Parties

OFFICIAL

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 \$
 Total Postage \$

Sent To **LRF Jr., LLC**
 Street and Apt. **P.O. Box 11327**
 City, State, ZIP+4 **Midland, TX 79702**

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

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

For delivery information, visit **TO/JLK/Corral Canyon /Case**
 15718 Fed Com 14H Well -
 Pooled Parties

OFFICIAL

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 \$
 Total Postage \$

Sent To **LRF Jr., LLC**
 Street and Apt. **P.O. Box 11327**
 City, State, ZIP+4 **Midland, TX 79702**

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

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

For delivery information, visit **TO/JLK/Corral Canyon /Case**
 15718 Fed Com 14H Well -
 Pooled Parties

OFFICIAL

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 \$
 Total Postage \$

Sent To **Moon Royalty L.L.C.**
 Street and Apt. **P.O. Box 720070**
 City, State, ZIP+4 **Oklahoma City, OK 73172**

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

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:
LRF Jr., LLC
P.O. Box 11327
Midland, TX 79702

2. Article Number (Transfer from service label)
9590 9402 1832 6104 5964 38

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

A. Signature
X W.C. Tate ☐ Agent ☐ Addressee
 B. Received by (Printed Name) **WC TATE**
 C. Date of Delivery **5/24/17**
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

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:
Moon Royalty L.L.C.
P.O. Box 720070
Oklahoma City, OK 73172

2. Article Number (Transfer from service label)
9590 9402 1832 6104 5964 45

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

A. Signature
X C.S. G. J. E. ☐ Agent ☐ Addressee
 B. Received by (Printed Name) **C.S. G. J. E.**
 C. Date of Delivery **5/23/17**
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

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

Domestic Return Receipt

7016 0750 0000 3268 0148

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

For delivery information, visit **TO/JLK/Corral Canyon /Case**
 15718 Fed Com 14H Well -
 Pooled Parties

OFFICIAL

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 \$
 Total Postage \$

Sent To **Moon Royalty L.L.C.**
 Street and Apt. **P.O. Box 720070**
 City, State, ZIP+4 **Oklahoma City, OK 73172**

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

7016 0750 0000 3268 0155

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

For delivery information, visit usps.com

**TO/JLK/Corral Canyon /Case
 No 15718 Fed Com 16H Well -
 Pooled Parties**

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 \$
 Total Postage \$

Sent To
 Street and
 City, State

Concho Oil & Gas
 600 West Illinois Avenue
 Midland, TX 79701

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

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.

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

B. Received by (Printed Name)
 J. MONROE

C. Date of Delivery
 5-22-17

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

1. Article Addressed to:
 Concho Oil & Gas
 600 West Illinois Avenue
 Midland, TX 79701

2. Article Number (Transfer from service label)
 9590 9402 1832 6104 5964 52

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 0750 0000 3268 0155

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

Domestic Return Receipt

7016 0750 0000 3268 0162

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

For delivery information, visit usps.com

**TO/JLK/Corral Canyon /Case
 No 15718 Fed Com 16H Well -
 Pooled Parties**

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 \$
 Total \$

Sent To
 Street
 City, St

Sonic Oil & Gas, LP
 505 5th Street
 Graham, TX 76450

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

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.

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

B. Received by (Printed Name)
 J. MONROE

C. Date of Delivery
 5-22-17

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

1. Article Addressed to:
 Sonic Oil & Gas, LP
 505 5th Street
 Graham, TX 76450

2. Article Number (Transfer from service label)
 9590 9402 1832 6104 5964 69

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 0750 0000 3268 0162

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

Domestic Return Receipt

7016 0750 0000 3268 0179

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

For delivery information, visit **TO/JLK/Corral Canyon /Case No 15718 Fed-Com 16H Well - Pooled Partiers**

OFFICIAL

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as indicated)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage \$
 Sent To
 Street and
 City, State

H.M. Bettis, Inc.
505 5th Street
Graham, TX 76450

PS Form 3800, April 2015 PSN 7520-02-000-9053 See Reverse for Instructions

7016 0750 0000 3268 0186

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

For delivery information, visit **TO/JLK/Corral Canyon /Case No 15718 Fed-Com 16H Well - Pooled Partiers**

OFFICIAL

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as indicated)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage \$
 Sent To
 Street and
 City, State

Guinn Family Properties, Ltd.
P.O. Box 1298
Graham, TX 76450

PS Form 3800, April 2015 PSN 7520-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SIDE
CERTIFIED MAIL

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:
 H.M. Bettis, Inc.
505 5th Street
Graham, TX 76450

2. 7016 0750 0000 3268 0179

PS Form 3811, July 2015 PSN 7520-02-000-9053

B. Received by (Printed Name) *X* *B. Bettis*
 C. Date of Delivery *5/22/17*

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
☐ Insured Mail
☐ 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 SIDE
CERTIFIED MAIL

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:
 Guinn Family Properties, Ltd.
P.O. Box 1298
Graham, TX 76450

2. 7016 0750 0000 3268 0186

PS Form 3811, July 2015 PSN 7520-02-000-9053

A. Signature *X* *Guinn*
 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

Restricted Delivery

Domestic Return Receipt

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

Domestic Mail Only

For delivery information, call 1-800-375-8799 or visit us online at usps.com

OFF

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

\$

Total Postage

\$

Sent To

Street and A

City, State, ZIP+4[®]

Postmark Here

USPS

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

See Reverse for Instructions

The Allar Company
 735 Elm Street
 Graham, TX 76450

SENDER: COMPLETE THIS SIDE

- 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
 735 Elm Street
 Graham, TX 76450

9590 9402 1832 6104 5964 90

2. A

7016 0750 0000 3268 0193

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

CERTIFIED MAIL

A. Signature

x *Melanie Barnett*

Agent

Address

B. Received by (Printed Name)

Melanie Barnett

C. Date of Delivery

5/22/15

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 0750 0000 3576 3589

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

For delivery information, visit **TO/JLK/Corral Canyon /Case**
 o 15718 Fed Com 16H Well -

OFFICIAL

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 \$
 Total Post \$

Sent To **ExxonMobil Corporation**
 Street and **810 Houston Street**
 City, State, Zip **Fort Worth, TX 76102**

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

7016 0750 0000 3268 0209

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

For delivery information, visit **TO/JLK/Corral Canyon /Case**
 o 15718 Fed Com 16H Well -

OFFICIAL

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 \$
 Total Postage \$

Sent To **OXY USA, Inc.**
 Street and Apt **5 Greenway Plaza, Suite 110**
 City, State, Zip **Houston, TX 77046**

PS Form 3811, July 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:

ExxonMobil Corporation
 810 Houston Street
 Fort Worth, TX 76102

9590 9402 1832 6104 5968 58

2. Article Number (Transfer from service label)

7016 0750 0000 3576 3589

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) **MAY 22 2017**

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™
☐ Restricted Delivery ☐ 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:

OXY USA, Inc.
 5 Greenway Plaza, Suite 110
 Houston, TX 77046

9590 9402 1832 6104 5965 06

2. Article Number (Transfer from service label)

7016 0750 0000 3268 0209

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) **5/22/2017**

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™
☐ Restricted Delivery ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 0750 0000 3268 0216

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

For delivery information, visit usps.com

OFFICE

TO: J/LK/Corral Canyon /Case
 15719 Fed Com 16H Well -
 Operators

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 \$
 Total Postage \$

Sent To
 Street and Apt
 City, State, Zip

COG Operating LLC
 600 West Illinois Avenue
 Midland, TX 79701

PS Form 3800, April 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:

COG Operating LLC
 600 West Illinois Avenue
 Midland, TX 79701

9590 9402 1832 6104 5965 13

2. Article Number (Transfer from service label)

7016 0750 0000 3268 0216

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

A. Signature

J. MONROE

☐ Agent
☐ Addressee

B. Received by (Printed Name)

J. MONROE

C. Date of Delivery

5-22-17

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

SENDER: COMPLETE

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:

Concho Oil & Gas
 600 West Illinois Avenue
 Midland, TX 79701

9590 9402 1832 6104 5965 20

2. Article Number (Transfer from service label)

7016 0750 0000 3268 0223

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

A. Signature

J. MONROE

☐ Agent
☐ Addressee

B. Received by (Printed Name)

J. MONROE

C. Date of Delivery

5-22-17

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
☐ Insured Mail

☐ 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 0750 0000 3268 0223

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

For delivery information, visit usps.com

OFFICE

TO: J/LK/Corral Canyon /Case
 15719 Fed Com 16H Well -
 Operators

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 \$
 Total Postage \$

Sent To
 Street and Apt
 City, State, Zip

Concho Oil & Gas
 600 West Illinois Avenue
 Midland, TX 79701

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

0320 9926 0000 3268 0230

U.S. Postal Service® CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit usps.com

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

Postage

\$

Total Postage

\$

Sent To

Street and Apt

City, State, Zip

Nadel & Gussman Permian, LLC
4000 North Big Spring, Ste 310
Midland, TX 79705

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

TO: J/K/Corral Canyon /Case
15718 Fed Com 16H Well -
Offset Operator

NOV 19 2015
NM 8750

Postmark
Here

USPS

7016 0750 0000 3268 0247

U.S. Postal Service® CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit usps.com

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

Postage

\$

Total Postage

\$

Sent To

Street and Apt

City, State, Zip

Chevron U.S.A. Inc.
6301 Deauville Blvd.
Midland, TX 79706

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

TO: J/K/Corral Canyon /Case
15718 Fed Com 16H Well -
Offset Operator

NOV 19 2015
NM 8750

Postmark
Here

USPS

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.

Nadel & Gussman Permian, LLC
4000 North Big Spring, Ste 310
Midland, TX 79705

9590 9402 1832 6104 5965 37

2. Article Number (Transfer from service label)

7016 0750 0000 3268 0230

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

A. Signature

X *[Signature]*☐ Agent☐ Addressee

B. Received by (Printed Name)

Satantham 5/22/17

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

d 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.

Chevron U.S.A. Inc.
6301 Deauville Blvd.
Midland, TX 79706

9590 9402 1832 6104 5965 44

2. Article Number (Transfer from service label)

7016 0750 0000 3268 0247

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

A. Signature

X *[Signature]*☐ Agent☐ Addressee

B. Received by (Printed Name)

Elna Baerz 5/22/17

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 Deliveryd Delivery
(over \$500)

Domestic Return Receipt

4520 8920 0000 3268 0254

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

TO/JLK/Corral Canyon /Case
No 15718 Red Com 16H Well -
Operators

OFFICIAL USE

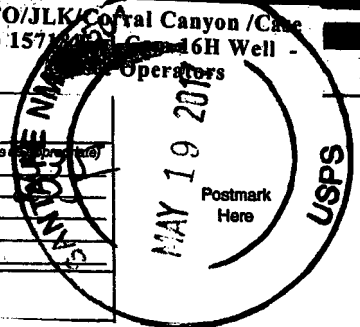
Certified Mail Fee \$
Extra Services & Fees (check box, add fee if appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
Total \$

Sent To
Street
City, State

Devon Energy Corporation
333 West Sheridan Avenue
Oklahoma City, OK 73102

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



7016 0750 0000 3268 0261

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

TO/JLK/Corral Canyon /Case
No 15718 Red Com 16H Well -
Operators

OFFICIAL USE

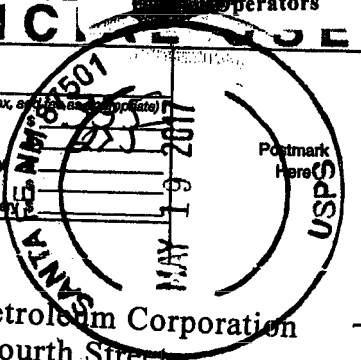
Certified Mail Fee \$
Extra Services & Fees (check box, add fee if appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
Total \$

Sent To
Street
City, State

Yates Petroleum Corporation
105 S. Fourth Street
Artesia, NM 88210

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



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:

Devon Energy Corporation
333 West Sheridan Avenue
Oklahoma City, OK 73102

9590 9402 2653 6336 3289 39

2. Article Number (Transfer from mailpiece)
7016 0750 0000 3268 0254

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

ON DELIVERY

A. Signature
B. Received by (Printed Name)
C. Date of Delivery
D. Is delivery address different from item 1? 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

INTER CITY OF OKLAHOMA CITY
MAY 22 2017

Signature
David Canillo

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:

Yates Petroleum Corporation
105 S. Fourth Street
Artesia, NM 88210

9590 9402 2653 6336 3289 46

2. Article Number (Transfer from mailpiece)
7016 0750 0000 3268 0261

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

ON DELIVERY

A. Signature
B. Received by (Printed Name)
C. Date of Delivery
D. Is delivery address different from item 1? 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

Signature
B. Received by (Printed Name)
C. Date of Delivery
5/23/17

7016 0750 0000 3268 0278

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

For delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee
 \$

Extra Services & Fees (check box, add fee to postage)

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

Postage
 \$

Total Post
 \$

Sent To
 Street and
 City, State

EOG Resources, Inc.
 P.O. Box 2267
 Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 0750 0000 3268 0285

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

For delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee
 \$

Extra Services & Fees (check box, add fee to postage)

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

Postage
 \$

Total Postage
 \$

Sent To
 Street and Apt.
 City, State, ZIP

ABO Petroleum
 105 S. Fourth Street
 Artesia, NM 88210

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

CERTIFIED MAIL

SENDER

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:

ABO Petroleum
 105 S. Fourth Street
 Artesia, NM 88210

9590 9402 2653 6336 3289 60

2. Article Number (Transfer from service label)

7016 0750 0000 3268 0285

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

RECEPTION ON DELIVERY

A. Signature
 X [Signature]

☐ Agent
☐ Addressee

B. Received by (Printed Name)
 [Signature]

C. Date of Delivery
 5/19/17

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

Domestic Return Receipt