

COG Operating LLC

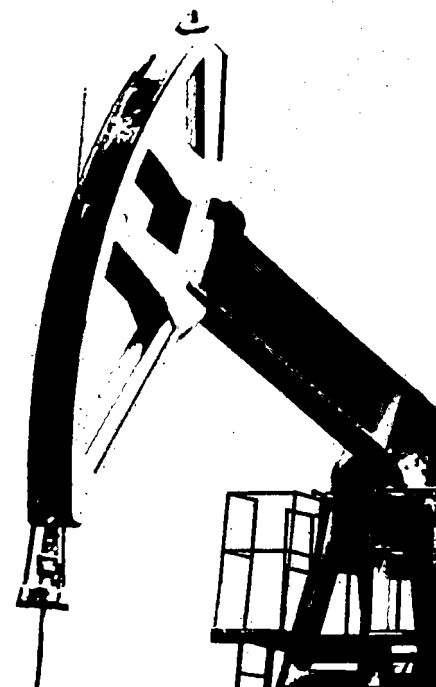
BONE YARD 11 FEE 16H

Hearing

Cemetery Area - Eddy County, New Mexico

BEFORE THE OIL CONSERVATION DIVISION
EXAMINER HEARING JULY 20, 2017

CASE NO. 15760



CONCHO

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

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

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

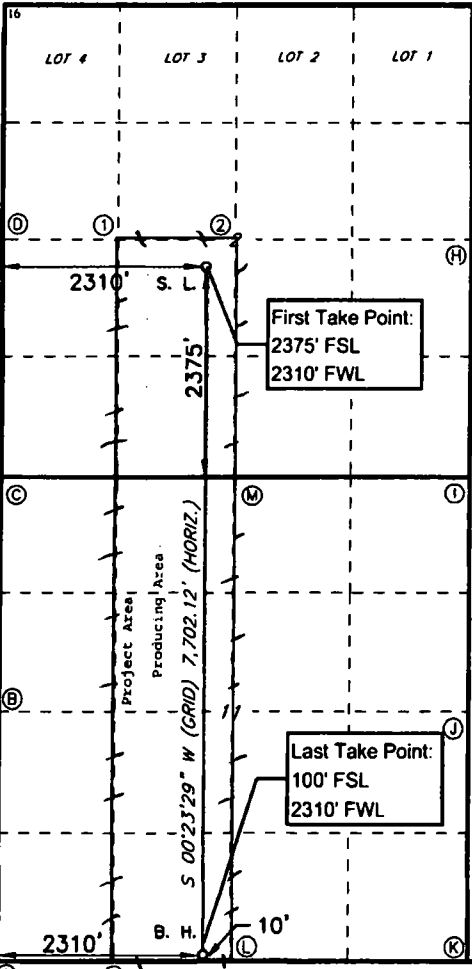
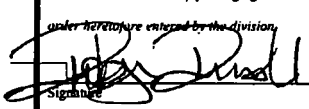
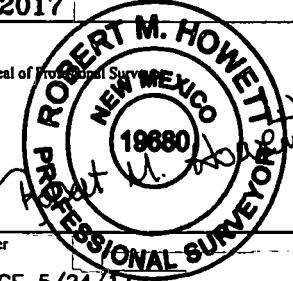
RECEIVED

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-43999		² Pool Code 97565		³ Pool Name N. Seven Rivers; Glorieta-Yeso					
⁴ Property Code 315130		⁵ Property Name BONE YARD 11 FEE						⁶ Well Number 16H	
⁷ GRID NO. 229137		⁸ Operator Name COG OPERATING, LLC						⁹ Elevation 3425'	
¹⁰ Surface Location									
UL or lot no. K	Section 2	Township 20S	Range 25E	Lot Idn	Feet from the 2375	North/South line SOUTH	Feet From the 2310	East/West line WEST	County EDDY
¹¹ Bottom Hole Location If Different From Surface									
UL or lot no. N	Section 11	Township 20S	Range 25E	Lot Idn	Feet from the 10	North/South line SOUTH	Feet from the 2310	East West line WEST	County EDDY
¹² Dedicated Acres 240		¹³ Joint or Infill		¹⁴ Consolidation Code		¹⁵ Order No.			

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

	GEODETIC DATA NAD 27 GRID - NM EAST SURFACE LOCATION N: 582630.5 - E: 462205.3 LAT: 32.60169619° N LONG: 104.45606201° W BOTTOM HOLE N: 574930.4 - E: 462152.7 LAT: 32.58052997° N LONG: 104.45620390° W	GEODETIC DATA NAD 83 GRID - NM EAST SURFACE LOCATION N: 582691.1 - E: 503383.9 LAT: 32.60180960° N LONG: 104.45658067° W BOTTOM HOLE N: 574990.8 - E: 503331.4 LAT: 32.58064341° N LONG: 104.45672233° W	17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling under authority entered by the division.  Signature Date 06/01/17 Robyn M. Russell Printed Name Russell@concho.com E-mail Address	
	CORNER DATA NAD 27 GRID - NM EAST A: FOUND BRASS CAP "1947" N: 574906.7 - E: 459843.2 B: FOUND BRASS CAP "1947" N: 577592.0 - E: 459886.9 C: FOUND BRASS CAP "1947" N: 580276.9 - E: 459887.3 D: FOUND BRASS CAP "1947" N: 582882.5 - E: 459896.7 E: FOUND BRASS CAP "1947" N: 585504.1 - E: 459906.0 F: FOUND BRASS CAP "1947" N: 585511.7 - E: 462548.4 G: FOUND BRASS CAP "1947" N: 585520.8 - E: 465190.9 H: FOUND BRASS CAP "1947" N: 582874.9 - E: 465184.7 I: FOUND BRASS CAP "1947" N: 580229.1 - E: 465177.8 J: FOUND BRASS CAP "1947" N: 577584.2 - E: 465171.8 K: CALCULATED CORNER N: 574939.6 - E: 465164.4 L: FOUND BRASS CAP "1947" N: 574922.5 - E: 462503.3 M: FOUND BRASS CAP "1947" N: 580253.1 - E: 462532.6			18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. 3-08-2017 Date of Survey Signature and Seal of Professional Surveyor  19880 Certificate Number B.H. CHANGE 5/24/17
	CALCULATED POINTS 1. N: 582880.6 - E: 461218.6 2. N: 582878.7 - E: 462540.5 3. N: 574914.6 - E: 461173.3			
	RRC - Firm No.: TX 10193838 NM 4655451 - Job No.: LS1601028R3			

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 1
Submitted by: **COG OPERATING LLC**
Date: July 20, 2017

EXHIBIT 2
Bone Yard 11 Fee #16H
E ½ of the SW ¼ of Section 2 and E ½ of the W ½ of Section 11
T20S, R25E, Eddy County
MINERAL INTERESTS

		2	
	Tract 1		
	Tract 2		
	Tract 3		
		11	
	Tract 4		
	Tract 5		

Tract 1

43.71% COG Operating LLC
12.50% *McCombs Energy LLC*
11.26% Marshall & Winston, Inc.
6.24% *Apache Corporation*
6.24% Hunt Cimarron LP
5.46% Black Shale Minerals LLC
5.40% *Plains Production, Inc.*
4.69% *LR Energy*
1.56% D2 Resources, LLC
1.56% *Solis Energy, LLC*
0.78% Chisos Ltd.
0.30% *Connacht, LLC*
0.30% *Partin Petroleum*

Tracts 2, 3 & 4

75.00% COG Operating LLC
12.50% **Heirs or devisees of Mary C. Aho**
12.50% **Heirs or devisees of Catherine A. Duncan
aka Catherine Austin Connelly**

Tract 5

100.00% COG Operating LLC

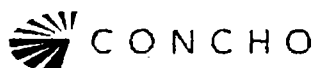
Interests in Proposed Spacing Unit

68.74% COG Operating LLC
6.25% **Heirs or devisees of Mary C. Aho (1)**
6.25% **Heirs or devisees of Catherine A. Duncan
aka Catherine Austin Connelly (1)**
4.17% *McCombs Energy LLC*
3.75% Marshall & Winston, Inc.
2.08% *Apache Corporation*
2.08% Hunt Cimarron LP
1.82% Black Shale Minerals LLC
1.80% *Plains Production, Inc. (2)*
1.56% *LR Energy*
0.52% D2 Resources, LLC
0.52% *Solis Energy, LLC (2)*
0.26% Chisos Ltd.
0.10% *Connacht, LLC*
0.10% *Partin Petroleum*

Uncommitted owner in proposed spacing unit

Unmarketable Title

- (1) all known heirs or devisees are leased
(2) signed AFE



Sent Certified Mail
Receipt No. 91-7199-9991-7036-0800-7593

May 4, 2017

McCombs Energy LLC
5599 San Felipe, Suite 1200
Houston, TX 77056

RE: **Well Proposal – Bone Yard 11 Fee #16H**
SHL: 2375' FSL & 2310' FWL (Unit K of Section 2)
BHL: 10' FSL & 2310' FWL (Unit N of Section 11)
E2SW of Section 2, E2W2 of Section 11
T20S, R25E, Eddy County, New Mexico

Dear McCombs Energy LLC:

COG Operating LLC ("COG"), as Operator, proposes to drill the Bone Yard 11 Fee #16H at the above-captioned location or at an approved surface location within location unit letter K in Section 2, to a depth of approximately 2,900' TVD, 10,150' MD to test the Yeso Formation ("Operation"). The total cost of the Operation is estimated to be \$5,773,500 and a detailed description of the cost is set out in the enclosed Authority for Expenditure ("AFE"). COG anticipates that it will spud the well on or before October 1, 2017.

COG is proposing to drill this well under the terms of a modified 1989 AAPL Model Form Operating Agreement ("OA") covering the E ½ of the W ½ of Section 11 and the E ½ of the SW ¼ of Section 2, T-20-S, R-25-E, with the following general provisions:

- 100/300 Non-consenting penalty
- Drilling and Producing rate of \$7000/\$700
- COG named as Operator

If you wish to participate in the Operation, please sign and return the AFE and a completed OA will be sent to you for execution.

If you do not wish to participate in the Operation, COG would like to acquire a Term Assignment of your interest for the following general terms:

- Three year primary term
- Delivering a 1.5% ORRI, proportionately reduced
- \$150 per net acre bonus consideration

BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 3
Submitted by: COG OPERATING, LLC
Hearing Date: July 20, 2017

If we do not reach an agreement within 30 days of the date of this letter COG will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well.

Technical questions should be directed to Carl Bird at 432-686-3057 and land questions to the undersigned at 432-685-4354.

Yours Truly,

COG Operating LLC

A handwritten signature in black ink, appearing to read "Stuart A. Dirks". The signature is stylized with a large, looping initial "S" and a cursive "A. Dirks".

Stuart A. Dirks, CPL
Senior Landman

**COG OPERATING LLC
AUTHORITY FOR EXPENDITURE
DRILLING**

1.5 Mile
1500 lb-ft

WELL NAME: Bone Yard 11 Fee 16H

PROSPECT NAME: Lakewood/Cemetery

SHL: 2375' FSL & 2310' FWL (Sec. 2 - K)

STATE & COUNTY: New Mexico, Eddy

BHL: 10' FSL & 2310' FWL (Sec. 11 - N)

OBJECTIVE: Yeso Horizontal

FORMATION: Yeso

DEPTH: 10,150

LEGAL: T20S-R25E, Sec. 2: E2SW &
Sec. 11: E2W2

TVD: 2,900

		Drill - Rig Release(D)	Completion(C)	Tank Bty Constructn(TB)	Prod. Equipment(PEQ)	TOTAL
INTANGIBLE COSTS						
Title/Curative/Permit	201	11,000				11,000
Insurance	202	5,000	302			5,000
Damages/Right of Way	203	25,000	303	351		25,000
Survey/Stake Location	204	7,000		352		7,000
Location/Pits/Road Expense	205	65,000	305	7,000	353	174,000
Drilling / Completion Overhead	206	4,000	306	6,000		10,000
Turnkey Contract	207		307			0
Footage Contract	208		308			0
Daywork Contract	209	180,000	309			180,000
Directional Drilling Services	210	280,000	310			280,000
Fuel & Power	211	30,000	311	1,000	354	31,000
Water	212	34,000	312	310,000	358	345,000
Bbs	213	20,000	313	4,000	359	24,000
Mud & Chemicals	214	42,000	314	12,000	370	54,000
Drill Stem Test	215		315			0
Coring & Analysis	216					0
Cement Surface	217	44,000				44,000
Cement Intermediate	218					0
Cement 2nd Intermediate/Production	219	77,000				77,000
Cement Squeeze & Other (Kickoff Plug)	220				371	0
Float Equipment & Concentrators	221	8,000				8,000
Casing Crews & Equipment	222	10,500				10,500
Fishing Tools & Service	223		323		372	0
Geologic/Engineering	224		324	355	373	0
Contract Labor	225	4,250	325	19,000	356	115,250
Company Supervision	226	69,000	326	8,000	357	79,500
Contract Supervision	227	45,000	327	108,000	358	161,000
Testing Casing/Tubing	228	8,000	328	6,000	377	14,000
Mud Logging Unit	229	22,000	329			22,000
Logging	230	18,560			378	18,560
Perforating/Wireline Services	231	1,500	331	307,000	379	308,500
Stimulation/Treating			332	1,880,000	380	1,880,000
Completion Unit			333	48,000	381	58,000
Swabbing Unit			334		382	0
Rentals-Surface	235	48,000	335	200,000	359	288,000
Rentals-Subsurface	236	58,000	336	19,000	384	77,000
Trucking/Ford/Rig Mobilization	237	68,000	337	54,000	385	125,000
Welding Services	238	2,000	338		386	2,000
Water Disposal	239		339	11,000	387	11,000
Plug to Abandon	240		340			0
Seismic Analysis	241		341			0
Miscellaneous	242		342	1,000	389	1,000
Contingency	243	24,180	343	82,000	363	88,180
Closed Loop & Environmental	244	63,000	344		384	63,000
Coil Tubing			346			0
Flowback Crews & Equip			347	3,000		3,000
Offset Directions/Frac	248		348		391	75,000
TOTAL INTANGIBLES		1,283,000	3,062,000	227,000	97,500	4,669,500
TANGIBLE COSTS						
Surface Casing	401	23,000				23,000
Intermediate Casing	402					0
Production Casing/Liner	403	111,000				111,000
Tubing			504	13,000	530	13,000
Wellhead Equipment	405	5,300	505	18,000	531	31,300
Pumping Unit					506	80,000
Prime Mover					507	0
Rods					508	15,000
Pumps-Sub Surface (BH)			509		532	95,000
Tanks				510	90,000	90,000
Flowlines				511	30,000	30,000
Heater Treater/Separator				512	180,000	180,000
Electrical System				513	75,000	105,000
Packers/Anchors/Hangers	414		514		534	1,000
Couplings/Fittings/Valves	415	500		515	180,000	180,500
Dehydration				517		0
Injection Plant/CO2 Equipment				518		0
Pumps-Surface				521	18,000	18,000
Instrumentation/SCADA/POC				522		7,000
Miscellaneous	419	500	519		535	500
Contingency	420	700	520		536	700
Meters/LACT				525	75,000	75,000
Flares/Combustors/Emission				526	48,000	48,000
Gas Lift/Compression			527		528	0
TOTAL TANGIBLES		141,000	31,000	696,000	238,000	1,104,000
TOTAL WELL COSTS		1,424,000	3,093,000	923,000	335,500	5,773,500

% of Total Well Cost

COG Operating LLC

By: Paul Fiegel/Carl Bird

We approve:
% Working Interest

Company:

By:

Printed Name:

Title:

Date:

Date Prepared: 4-20-2017

COG Operating LLC

By:

This AFE is only an estimate. By signing you agree to pay your share of the actual costs incurred.

Bone Yard 11 Fee #16H
E ½ of the SW ¼ of Section 2 and E ½ of the W ½ of Section 11
T20S, R25E, Eddy County
NON-PARTICIPATING ROYALTY INTERESTS

		2	
	Tract 1		
	Tract 2		
	Tract 3		
		11	
	Tract 4		
	Tract 5		

*APRI
Gurran*

0.00% Tract 1
No Non-Participating Royalty Interests

11.63% Tract 2
Charles Thompson, Lois Thompson, Harvey D. Sheehan II, Dan Evans Sheehan, Doda Suzanne Sheehan, Dan Cody Keefe, Heirs or Devisees of Leatha Phillips London, Heirs or Devisees of Glenwood London, Jimmy Lynn London, Jack Dean London, Randy V. Watts, Heirs or Devisees of Willie Ann Phillips Jones, Heirs or Devisees of Everett P. Jones, Christie Lynn London, Kenneth W. Magee, Suzie Bethurum Rumbin, Heirs or Devisees of Joseph Jackson, Angela Jackson, Robert Akins, Earl L. Harris III and wife, Jay Stuart Harris, Charles Louis Ray and wife, Christopher Robert Ray and wife, Curtis Andrew Ray and wife (if any), Wilda Jean Bethurum, Peggy Collins, Don Lyle and wife, Jack L. Lyle and wife, Heirs or Devisees of Norma Bird, Wesley Wayne Scott, Kevin Scott and wife, William Clinton Bird, Shirley Allen Duke and husband (if any), Shirley Jean Thomas and husband, Heirs or Devisees of Archie Walker Brown, Gerald Thomas Brown and wife, Reita D. King, Heirs or Devisees of Milton Brown, Thomas Wesley Brown and wife Patsy Ann Brown, Douglas Brown, Kathie Brown Smith and husband (if any), Heirs or Devisees of Wilbur Brown Sr., Teresa Nell Brown Dreyer, Heirs or Devisees of Wilbur Luther Brown Jr., Corby Dean Brown and wife Robbin Lynn McMinn, Matthew M. Brown and wife (if any), Margaret Ann Brown Ricks and husband (if any), Danny Ray Brown and wife Connie Sue Dunham, Mary Willis and husband Gary M. Willis, Gary Tipton and wife, Heirs or Devisees of Thelma Leach, Heirs or Devisees of Thurman L. Leach, Donna F. Leach, Dwain Leach and wife Dora June Leach, Carolyn Ann Lewis, Heirs or Devisees of J.W. Hendrix, Heirs or Devisees of Ruby B. Leach, Heirs or Devisees of J.B. Hendrix, Florence E. Barker, Sharalynn Rocha and husband (if any), Anita Hendrix and husband John Juric, Rhonda Hendrix and husband Kevin Haddock, Heirs or Devisees of Pauline Punk, Heirs or Devisees of Aileen Fay Wells, Janice Wells and husband (if any), Heirs or Devisees of Ray Leach, Eddie Leach and wife (if any), Ira Miller and husband (if any) if living or Heirs and Devisees of Ira Miller and husband (if any) if deceased, R. M. Weatherspoon and wife (if any) if living or Heirs and Devisees of R.M. Weatherspoon and wife (if any) if deceased, Hazel M. Knoedler and husband (if any) if living or Heirs and Devisees of Hazel M. Knoedler and husband (if any) if deceased, Frank Bond and wife (if any) if living or Heirs and Devisees of Frank Bond and wife (if any) if deceased, L.G. Ford and spouse (if any) if living or Heirs and Devisees of L.G. Ford and spouse (if any) if deceased, J.P. Chitwood and spouse (if any) if living or Heirs and Devisees of J.P. Chitwood and spouse (if any) if deceased, Loris Ford and husband (if any) if living or Heirs and Devisees of Loris. Ford and husband (if any) if deceased, Heirs or Devisees of Clifford Marrion Parrish, Bonnie E. Benson, Richard W. Benson and wife (if any), Letha Day Parrish Swank and husband (if any), A. G. Bunch and spouse (if any) if living or Heirs and Devisees of A. G. Bunch and spouse (if any) if deceased, Edwin Ford, Joyce Baker, Karen Hicks aka Karne Hicks Maddox, Ramona McDonald Prater, William Charles Noffske, Verena A. Noffske

Tract 3

12.50% William C. White, Ocotillo Production LLC, *B&G Royalties*, EHW LLC, Mary L. Gore Trustee of the Mary L. Gore Living Trust dated May 8, 2003, Tanya Marie Mangum and husband (if any)

Tract 4

12.50% *Heirs or Devisees of W.T. Hollis, Laurence David Willard, Steven R. Willard and wife, Cheryl Ann Currier, Catherine Anne Connolly, H.F. Investments LLC, Constance D. Connelly 2015 Revocable Trust dated 3/6/15, William J. Duncan and wife Carole Duncan, Tarleton A. Woodson, aka T.A. Woodson, and Sherrill M. Woodson, Trustees of the Tarleton A. Woodson, aka T.A. Woodson, and Sherrill M. Woodson Revocable Trust created on May 6, 1998, David R. Woodson and Loretta M. Woodson, as Trustees of the David R. Woodson and Loretta M. Woodson Living Trust, dated January 4, 1999, Thomas C. Woodson and wife, Linda K. Woodson and husband William Woodson, Janet M. Hanley, Robert L. Aho and wife Sharon K. Aho, Albert C. Wolfington, Mary Beckman aka Mary Ann Wolfington Beckman Jones and husband (if any), Ricky Lloyd Hollis aka Rick Hollis and wife (if any), Tressia Hollis Rawls aka Tressia Hollis Real and husband (if any), Gail Crownover Glen and husband Ian Glen, John Crownover, Suzy Crownover True, Jane Crownover Helms and husband Conner Helms, Shirley Mae Hollis Evans and husband, Sandra Jean Vasquez and husband (if any), Russel L. Hollis and wife, Larry D. Hollis and wife, Vernon F. Perkins and wife, Louise Perkins aka Betty Louise Perkins, Ryan Scott Strickler and wife (if any), Kyle J. Strickler and wife (if any), Karla Jean Hollis Hayslip and husband (if any), Rolisa Carol Hollis Twombly and husband, Scheila Wingate Hollis, Casey L. Hollis and spouse, Shawn R. Seay aka Shawn Hollis Golden and wife, Corey Hollis and spouse, Heirs or Devisees of Earline Geneva Dement Hollis aka Earlene Geneva Hollis, Heirs or Devisees of Lloyd Franklin Hollis aka Lloyd F. Hollis aka Mutt Hollis, Zana K. Hollis aka Zana Kay Hollis Cornell and husband, James D. Crownover and wife, Bennie Thomas Hollis and spouse, Heirs or Devisees of Willaim Thomas Hollis aka W.T. Hollis and Mary Delle Carroll Hollis, Heirs or Devisees of Robert E. Lee Hollis, Heirs or Devisees of Benjamin Franklin Hollis, Heirs or Devisees of Roy Mack Hollis, Heirs or Devisees of Laura A. Davis aka Lora A Davis Hollis and husband (if any), Heirs or Devisees of Winnie Davis Hollis Perkins Fielding, Heirs or Devisees of John Thomas Hollis aka John T. Hollis aka Tommy Hollis, Heirs or Devisees of Maggie Mae Hollis, Heirs or Devisees of Earnest Hollis, Heirs or Devisee of Sandy Lloyd Hollis, Heirs or Devisees of Robert H. Hollis, Heirs or Devisees of Beulah Mae Hollis Wolfington, Heirs or Devisees of Archie M. Hollis aka Pete Hollis aka Archie Melvin Hollis, Heirs or Devisees of Robert E. Hollis and Lillie Hollis, Heirs or Devisees of Alvin Leonard Hollis, Robert Leonard Hollis aka Bobby Hollis, Heirs or Devisees of Jean Hollis Crownover aka Billie Jean Hollis Crownover, Heirs or Devisees of Mattie Bell Beatrice Stroud Hollis, Sandra Jean Hollis and husband, Heirs or Devisees of Grady B. Perkins, Heirs or Devisees of Bobby B. Perkins, Heirs or Devisees of Regina Perkins Strickler, Joseph Scott Strickler, Harry Fielding (if living) Heirs or Devisees of Harry Fielding (if deceased), Heirs or Devisees of Dorothy Jean Lynn Hollis, Heirs or Devisees of John L. Hollis*

Tract 5

0.00%

No Non-Participating Royalty Interests

Interests in Proposed Spacing Unit

1.94%

Charles Thompson, Lois Thompson, Harvey D. Sheehan II, Dan Evans Sheehan, Doda Suzanne Sheehan, Dan Cody Keefe, Heirs or devisees of Leatha Phillips London, Heirs or devisees of Glenwood London, Jimmy Lynn London, Jack Dean London, Randy V. Watts, Heirs or devisees of Willie Ann Phillips Jones, Heirs or devisees of Everett P. Jones, Christie Lynn London, Kenneth W. Magee, Suzie Bethurum Rumbin, Heirs or devisees of Joseph Jackson, Angela Jackson, Robert Akins, Earl L. Harris III and wife, Jay Stuart Harris, Charles Louis Ray and wife, Christopher Robert Ray and wife, Curtis Andrew Ray and wife (if any), Wilda Jean Bethurum, Peggy Collins, Don Lyle and wife, Jack L. Lyle and wife, Heirs or devisees of Norma Bird, Wesley Wayne Scott, Kevin Scott and wife, William Clinton Bird, Shirley Allen Duke and husband (if any), Shirley Jean Thomas and husband, Heirs or devisees of Archie Walker Brown, Gerald Thomas Brown and wife, Reita D. King, Heirs or devisees of Milton Brown, Thomas Wesley Brown and wife Patsy Ann Brown, Douglas Brown, Kathie Brown Smith and husband (if any), Heirs or devisees of Wilbur Brown Sr., Teresa Nell Brown Dreyer, Heirs or devisees of Wilbur Luther Brown Jr., Corby Dean Brown and wife Robbin Lynn McMin, Matthew M. Brown and wife (if any), Margaret Ann Brown Ricks and husband (if any), Danny Ray Brown and wife Connie Sue Dunham, Mary Willis and husband Gary M. Willis, Gary Tipton and wife, Heirs or devisees of Thelma Leach, Heirs or devisees of Thurman L. Leach, Donna F. Leach, Dwain Leach and wife Dora June Leach, Carolyn Ann Lewis, Heirs or devisees of J.W. Hendrix, Heirs or devisees of Ruby B. Leach, Heirs or devisees of J.B. Hendrix, Florence E. Barker, Sharalynn Rocha and husband (if any), Anita Hendrix and husband John Juric, Rhonda Hendrix and husband Kevin Haddock, Heirs or devisees of Pauline Punk, Heirs or devisees of Aileen Fay Wells, Janice Wells and husband (if any), Heirs or devisees of Ray Leach, Eddie Leach and wife (if any), Ira Miller and husband (if any) if living or Heirs and devisees of Ira Miller and husband (if any) if deceased, R. M. Weatherspoon and wife (if any) if living or Heirs and devisees of R.M. Weatherspoon and wife (if any) if deceased, Hazel M. Knoedler and husband (if any) if living or Heirs and devisees of Hazel M. Knoedler and husband (if any) if deceased, Frank Bond and wife (if any) if living or Heirs and devisees of Frank Bond and wife (if any) if deceased, L.G. Ford and spouse (if any) if living or Heirs and devisees of L.G. Ford and spouse (if any) if deceased, J.P. Chitwood and spouse (if any) if living or Heirs and devisees of J.P. Chitwood and spouse (if any) if deceased, Loris Ford and husband (if any) if living or Heirs and devisees of Loris. Ford and husband (if any) if deceased, Heirs or devisees of Clifford Marrion Parrish, Bonnie E. Benson, Richard W. Benson and wife (if any), Letha Day Parrish Swank and husband (if any), A. G. Bunch and spouse (if any) if living or Heirs and devisees of A. G. Bunch and spouse (if any) if deceased, Edwin Ford, Joyce Baker, Karen Hicks aka Karne Hicks Maddox, Ramona McDonald Prater, William Charles Noffske, Verena A. Noffske

- 2.08% William C. White, Ocotillo Production LLC, B&G Royalties, EHW LLC, Mary L. Gore Trustee of the Mary L. Gore Living Trust dated May 8, 2003, Tanya Marie Mangum and husband (if any)
- 2.085% *Heirs or devisees of W.T. Hollis, Laurence David Willard, Steven R. Willard and wife, Cheryl Ann Currier, Catherine Anne Connolly, H.F. Investments LLC, Constance D. Connolly 2015 Revocable Trust dated 3/6/15, William J. Duncan and wife Carole Duncan, Tarleton A. Woodson, aka T.A. Woodson, and Sherrill M. Woodson, Trustees of the Tarleton A. Woodson, aka T.A. Woodson, and Sherrill M. Woodson Revocable Trust created on May 6, 1998, David R. Woodson and Loretta M. Woodson, as Trustees of the David R. Woodson and Loretta M. Woodson Living Trust, dated January 4, 1999, Thomas C. Woodson and wife, Linda K. Woodson and husband William Woodson, Janet M. Hanley, Robert L. Aho and wife Sharon K. Aho, Albert C. Wolfington, Mary Beckman aka Mary Ann Wolfington Beckman Jones and husband (if any), Ricky Lloyd Hollis aka Rick Hollis and wife (if any), Tressia Hollis Rawls aka Tressia Hollis Real and husband (if any), Gail Crownover Glen and husband Ian Glen, John Crownover, Suzy Crownover True, Jane Crownover Helms and husband Conner Helms, Shirley Mae Hollis Evans and husband, Sandra Jean Vasquez and husband (if any), Russel L. Hollis and wife, Larry D. Hollis and wife, Vernon F. Perkins and wife, Louise Perkins aka Betty Louise Perkins, Ryan Scott Strickler and wife (if any), Kyle J. Strickler and wife (if any), Karla Jean Hollis Hayslip and husband (if any), Rolisa Carol Hollis Twombly and husband, Scheila Wingate Hollis, Casey L. Hollis and spouse, Shawn R. Seay aka Shawn Hollis Golden and wife, Corey Hollis and spouse, Heirs or devisees of Earline Geneva Dement Hollis aka Earlene Geneva Hollis, Heirs or devisees of Lloyd Franklin Hollis aka Lloyd F. Hollis aka Mutt Hollis, Zana K. Hollis aka Zana Kay Hollis Cornell and husband, James D. Crownover and wife, Bennie Thomas Hollis and spouse, Heirs or devisees of Willaim Thomas Hollis aka W.T. Hollis and Mary Delle Carroll Hollis, Heirs or devisees of Robert E. Lee Hollis, Heirs or devisees of Benjamin Franklin Hollis, Heirs or devisees of Roy Mack Hollis, Heirs or devisees of Laura A. Davis aka Lora A Davis Hollis and husband (if any), Heirs or devisees of Winnie Davis Hollis Perkins Fielding, Heirs or devisees of John Thomas Hollis aka John T. Hollis aka Tommy Hollis, Heirs or devisees of Maggie Mae Hollis, Heirs or devisees of Earnest Hollis, Heirs or devisee of Sandy Lloyd Hollis, Heirs or devisees of Robert H. Hollis, Heirs or devisees of Beulah Mae Hollis Wolfington, Heirs or devisees of Archie M. Hollis aka Pete Hollis aka Archie Melvin Hollis, Heirs or devisees of Robert E. Hollis and Lillie Hollis, Heirs or devisees of Alvin Leonard Hollis, Robert Leonard Hollis aka Bobby Hollis, Heirs or devisees of Jean Hollis Crownover aka Billie Jean Hollis Crownover, Heirs or devisees of Mattie Bell Beatrice Stroud Hollis, Sandra Jean Hollis and husband, Heirs or devisees of Grady B. Perkins, Heirs or devisees of Bobby B. Perkins, Heirs or devisees of Regina Perkins Strickler, Joseph Scott Strickler, Harry Fielding (if living) Heirs or devisees of Harry Fielding (if deceased), Heirs or devisees of Dorothy Jean Lynn Hollis, Heirs or devisees of John L. Hollis*

Uncommitted owner in proposed spacing unit

Unmarketable Title

Unlocatable



Sent Certified Mail
Receipt No. 91-7199-9991-7036-0801-0463

May 4, 2017

Laurence David Willard, SSP
11020 Mira Vista Place
Albuquerque, NM 87123

RE: Well Proposal – Bone Yard 11 Fee #16H
SHL: 2375' FSL & 2310' FWL (Unit K of Section 2)
BHL: 10' FSL & 2310' FWL (Unit N of Section 11)
E2SW of Section 2, E2W2 of Section 11
T20S, R25E, Eddy County, New Mexico

Dear Interest Owner:

COG Operating LLC ("COG"), as Operator, proposes to drill the Bone Yard 11 Fee #16H at the above-captioned location or at an approved surface location within location unit letter K in Section 2, to a depth of approximately 2900' TVD, 10.150' MD to test the Yeso Formation ("Operation"). COG anticipates that it will spud the well on or before October 1, 2017.

COG must obtain your approval, as a non-participating royalty interest (NPRI) owner, to pool your interest. We request that you ratify the leases covering the mineral interests that are subject to your NPRI.

Enclosed are a Ratification of Oil, Gas and Mineral Leases ("Ratification") for your signature and copies of the leases described in the Ratification of Oil, Gas and Mineral Leases.

Please signify your approval of the pooling of your interest by signing the Ratification where indicated and returning to the undersigned. Instruments purporting to affect community real property that are executed by only one spouse are void and have no effect. If this is your sole and separate property, please indicate so in the signature block. If this is community property, please have your spouse sign in addition to your signature.

If we do not reach an agreement within 30 days of the date of this letter COG will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well.

If you have any questions or require further information, please call the undersigned at 432-685-4354.

Yours truly,

COG Operating, LLC

Stuart A. Dirks, CPL
Senior Landman

Enclosure (s)

BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 5
Submitted by: COG OPERATING, LLC
Hearing Date: July 20, 2017

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

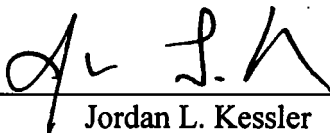
**APPLICATION OF COG OPERATING LLC
FOR A NON-STANDARD SPACING AND
PRORATION UNIT AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.**

CASE NO. 15760

AFFIDAVIT

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

Jordan L. Kessler, attorney in fact and authorized representative of COG Operating LLC
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.



Jordan L. Kessler

SUBSCRIBED AND SWORN to before me this 19th day of July, 2017 by Jordan L.
Kessler.



Notary Public

My Commission Expires:


August 26, 2017

HOLLAND & HART



**Jordan L. Kessler
Associate**

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

June 30, 2017

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico.
Bone Yard 11 Fee No. 16H Well**

Ladies & 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 July 20, 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 business days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Stuart Dirks, at (432) 685-4354 or Sdirks@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone (505) 988-4421 Fax (505) 983-6043 www.hollandhart.com

110 North Guadalupe Suite 1 Santa Fe, New Mexico 87501 Mailing Address P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington D.C. &

HOLLAND & HART LLP



Jordan L. Kessler
Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

June 30, 2017

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico.
Bone Yard 11 Fee No. 16H Well**

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application*, but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on July 20, 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 business 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 Stuart Dirks, at (432) 685-4354 or Sdirks@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

9916288_1

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.

**BONE YARD 11 Fee No. 16H
POOLED PARTIES**

McCombs Energy LLC
750 East Mulberry Ave.,
Ste. 403
San Antonio, TX 78212

Hunt Cimarron LP
500 N. Main, Suite 101
Roswell, NM 88201

LR Energy
8150 N. Central Expy.,
Suite 1605
Dallas, TX 75206

Chisos Ltd.
670 Dona Ana Road, SW
Deming, NM 88030

Jack Dean London, c/o Jimmy Lynn London
239 Dawn Drive
Fritch, TX 79036

Christopher Robert Ray
929 Pleasant Drive
Mesquite, TX 75150

Donna F. Leach
4008 Tracy Street NE
Albuquerque, NM 87111

Karen Hicks, aka Karen Hicks Maddox
1012 CR 20
Clovis, NM 88101

Steven R. Willard
PO Box 1174
Artesia, NM 88211-1174

Tarleton A. Woodson, aka T.A. Woodson and Sherrill M. Woodson, Trustees of the
Tarleton A. Woodson, aka T.A. Woodson and Sherrill M. Woodson Revocable Trust dtd
May 6, 1998
PO Box 1895
Acton, CA 93510

Robert L. Aho and
Sharon K. Aho
2941 W. Rome Avenue

Anaheim, CA 92804

Ryan Scott Strickler
10030 Ravello Blvd.

Fort Myers, FL 33905

Mary Ann Beckham Jones
PO Box 1623
Marshall, TX 75671

Marshall & Winston, Inc.
PO Box 50880
Midland, TX 79710-0880

Black Shale Minerals LLC
PO Box 2243
Longview, TX 75606-2243

D2 Resources, LLC
PO Box 10187
Midland, TX 79701

Connacht, LLC
9575 Katy Freeway, Suite 440
Houston, TX 77024

Christie Lynn London
6116 Hanson Road
Amarillo, TX 79106

Curtis Andrew Ray
118 E. Main Street, Unit M
Royce City, TX 75189

Rhonda Hendrix
24 Sunny Side Drive
Reno, NV 89503

B&G Royalties, 4 Partnership
Partner: William J. McCaw
PO Box 376
Artesia, NM 88211

Constance D. Connelly 2015 Revocable Trust dtd March 6, 2015
Connie Connelly
1014 Whispering Oak Court
Arlington, TX 76012-2803

Thomas C. Woodson
PO Box 120757
Arlington, TX 76012

Albert C. Wolfington
9368 TX HWY 37N
Clarksville, TX 75426

Kyle J. Strickler
2601 Reosdorph #702
Seabrook, TX 77586

Cheryl Ann Currier
PO Box 1813
Artesia, NM 88211-1813

Apache Corporation
303 Veterans Airpark Ln., Suite 600
Midland, TX 79705

Plains Production, Inc.
1601 SE 19th Street
Edmond, OK 73013

Solis Energy, LLC
242 Spring Park Dr., Suite C
Midland, TX 79705

Partin Petroleum
PO Box 41070
Houston, TX 77241

Randy V. Watts
PO Box 2367
Roswell, NM 88202

Kevin Scott
2300 Conveyor Drive
Burleson, TX 76028

Edwin Ford
1012 CR 20
Clovis, NM 88101

Laurence David Willard
11020 Mira Vista Place
Albuquerque, NM 87123

William J. Duncan and
Carol Duncan
1414 Crownhill Drive
Arlington, TX 76012

Janet M. Hanley
5422 Beaver Lodge Drive
Kingwood, TX 77345

Suzy Crownover True
6201 Chapel Hill Blvd. #211
Plano, TX 75093

Karla Hayslip
3004 S. Palm Drive
Slidell, LA 70458

Heirs or Devisees of Mary C. Aho

Heirs or Devisees of Catherine A. Duncan aka Catherine Austin Connelly

Heirs or Devisees of Mary C. Aho

Heirs or Devisees of Catherine A. Duncan aka Catherine Austin Connelly

Heirs or Devisees of Mary C. Aho

Heirs or Devisees of Catherine A. Duncan aka Catherine Austin Connelly

Dan Cody Keefe
RETURNED UNDELIVERABLE

Heirs or Devisees of Leatha Phillips London

Heirs or Devisees of Willie Ann Phillips Jones

Kenneth W. Magee
RETURNED REFUSED

Heirs or Devisees of Joseph Jackson

Angela Jackson
NO ADDRESS

Earl L. Harris III
RETURNED UNDELIVERABLE

Charles Louis Ray
RETURNED UNDELIVERABLE

Heirs or Devisees of Norma Bird

Heirs or Devisees of Archi Walker Brown

Heirs or Devisees of Milton Brown

Heirs or Devisees of Wilbur Brown, Sr.

Heirs or Devisees of Thelma Leach

Heirs or Devisees of J. W. Hendrix

Heirs or Devisees of Loris Ford

Catherine Connolly, c/o Cecilia Galloway-Sheil
RETURNED UNDELIVERABLE"

H.F. Investments LLC

Ed and Catherine D. Henderson
RETURNED UNDELIVERABLE

David R. Woodson and Loretta M. Woodson, as Trustees of the David R. Woodson and
Loretta M. Woodson Living Trust, dated January 4, 1999
RETURNED UNDELIVERABLE

Gail Glen and Ian Glen

RETURNED UNDELIVERABLE

Suzy Crownover True
6201 Chapel Hill Blvd. #211
Plano, TX 75093

RETURNED UNDELIVERABLE – Still included on Notice List

Sandra Jean Vasquez
RETURNED UNDELIVERABLE

Heirs or Devisees of Earline Geneva Dement Hollis

Tressia Hollis Rawls
RETURNED UNDELIVERABLE

Heirs or Devisees of Beulah Mae S. Wolfington

Heirs or Devisees of Lloyd Franklin Hollis

Joseph Scott Strickler
RETURNED UNDELIVERABLE

Heirs or Devisees of Robert E. Hollis

Heirs or Devisees of Alvin Leonard Hollis

Heirs or Devisees of Benjamin Ranklin Hollis

Heirs or Devisees of Winnie Davis Hollis Perkins, aka Winnie D. Hollis Fielding

Heirs or Devisees of Bobby B. Perkins

Heirs or Devisees of John Thomas Hollis, aka John T. Hollis, aka Tommy Hollis

7016 3010 0001 0743 4584

U.S. Postal Service™ **COG/ Bone Yard 11 Fee No.**
CERTIFIED MAIL 16H Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

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

Postage	\$	
Total	\$	

Sent **McCombs Energy LLC**
 Street **750 East Mulberry Ave.,**
 City, State, ZIP+4 **Ste. 403**
San Antonio, TX 78212

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:

McCombs Energy LLC
750 East Mulberry Ave.,
Ste. 403
San Antonio, TX 78212

9590 9402 2002 6123 0708 U/

Article Number (Transfer from service label)
7016 3010 0001 0743 4584

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature X <i>[Signature]</i>	☐ Agent ☐ Addressee
B. Received by (Printed Name) [Signature]	C. Date of Delivery 7-5-17
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	

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

Domestic Return Receipt

7016 3010 0001 0743 4577

U.S. Postal Service™ **COG/ Bone Yard 11 Fee No.**
CERTIFIED MAIL 16H Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

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

Postage	\$	
Total Postage and	\$	

Sent To **Hunt Cimarron LP**
 Street and Apt. No. **500 N. Main, Suite 101**
 City, State, ZIP+4 **Roswell, NM 88201**

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:

Hunt Cimarron LP
500 N. Main, Suite 101
Roswell, NM 88201

9590 9402 2002 6123 0707 91

Article Number (Transfer from service label)
7016 3010 0001 0743 4577

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature X <i>[Signature]</i>	☐ Agent ☐ Addressee
B. Received by (Printed Name) LORI Cox	C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	

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

Domestic Return Receipt

7016 3010 0001 0743 4553

U.S. Postal Service™ **COG/ Bone Yard 11 Fee No.**
CERTIFIED MAIL 16H Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

Postmark
Here

Postage

\$ _____
 Total Postage and

Sent To

LR Energy
 8150 N. Central Expy.,
 Suite 1605
 Dallas TX 75206

PS Form 3800, April 2015 Edition

7016 3010 0001 0743 4560

U.S. Postal Service™ **COG/ Bone Yard 11 Fee No.**
CERTIFIED MAIL 16H Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

Postmark
Here

Postage

\$ _____
 Total Postage and

Sent To

Chisos Ltd.
 670 Dona Ana Road, SW
 Deming, NM 88030

PS Form 3800, April 2015 Edition

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:

LR Energy
 8150 N. Central Expy.,
 Suite 1605
 Dallas TX 75206

9590 9402 2002 6123 0707 84

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4553

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X D. Saunders ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

Chisos Ltd.
 670 Dona Ana Road, SW
 Deming, NM 88030

9590 9402 2002 6123 0707 77

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4560

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X B. Jacobsen ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

Domestic Return Receipt

9454 4546 7016 3010 0001 0743 4546

U.S. Postal Service COG/ Bone Yard 11 Fee No.
CERTIFIED MAIL 16H Well - Pooled/ JLK
 Domestic Mail Only

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

OFFICIAL USE

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

Sent To
 Street and Apt. No. Jack Dean London, c/o Jimmy
 Lynn London
 City, State, ZIP+4 239 Dawn Drive
 Fritch, TX 79036

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

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:

Jack Dean London, c/o Jimmy
 Lynn London
 239 Dawn Drive
 Fritch, TX 79036

9590 9402 2002 6123 0707 60

7016 3010 0001 0743 4546

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) *Kevin London* C. Date of Delivery *7-3-17*
 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 (\$500)

Domestic Return Receipt

9454 4546 7016 3010 0001 0743 4546

U.S. Postal Service COG/ Bone Yard 11 Fee No.
CERTIFIED MAIL 16H Well - Pooled/ JLK
 Domestic Mail Only

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

OFFICIAL USE

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

Sent To
 Street and Apt. No. Christopher Robert Ray
 929 Pleasant Drive
 City, State, ZIP+4 Mesquite, TX 75150

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

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:

Christopher Robert Ray
 929 Pleasant Drive
 Mesquite, TX 75150

9590 9402 2002 6123 0707 60

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4539

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 *7-3-17*
 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 (\$500)

Domestic Return Receipt

7016 3010 0001 0743 4522

U.S. Postal Service™
CERTIFIED MAIL COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - Pooled/ /JLK

For delivery information, visit www.usps.com

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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

Postage
 \$ 0.00

Total Postage and
 \$ 3.45

Sent To
 Donna F. Leach
 4008 Tracy Street NE
 Albuquerque, NM 87111

PS Form 3800, A

7016 3010 0001 0743 4515

U.S. Postal Service™
CERTIFIED MAIL COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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

Postage
 \$ 0.00

Total Postage and
 \$ 3.45

Sent To
 Karen Hicks, aka Karen Hicks
 Maddox
 1012 CR 20
 Clovis, NM 88101

PS Form 3800, A

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 F. Leach
 4008 Tracy Street NE
 Albuquerque, NM 87111

9590 9402 2002 6123 0707 46

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4522

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Donna Leach ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/1/17

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™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery (\$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:

Karen Hicks, aka Karen Hicks
 Maddox
 1012 CR 20
 Clovis, NM 88101

9590 9402 2002 6123 0707 39

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4515

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Karen Ford ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

Domestic Return Receipt

7016 3010 0001 0743 4706

U.S. Postal Service[®] COG/ Bone Yard 11 Fee No.
CERTIFIED MAIL 16H Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

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

Postmark
 Here

Postage
 \$
 Total Postage and
 \$

Sent To
 Street and Apt. No.
 City, State, ZIP+4[®]

Steven R. Willard
 PO Box 1174
 Artesia, NM 88211-1174

PS Form 3800, April 2015

7016 3010 0001 0743 4690

U.S. Postal Service[®] COG/ Bone Yard 11 Fee No.
CERTIFIED MAIL 16H Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

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

Postmark
 Here

Postage
 \$
 Total Postage and
 \$

Sent To
 Street and Apt. No.
 City, State, ZIP+4[®]

Tarleton A. Woodson, aka T.A. Woodson
 and Sherrill M. Woodson, Trustees of the
 Tarleton A. Woodson, aka T.A. Woodson
 and Sherrill M. Woodson Revocable Trust
 dtd May 6, 1998
 PO Box 1895
 Acton, CA 93510

PS Form 3800, April 2015

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:

Steven R. Willard
 PO Box 1174
 Artesia, NM 88211-1174

9590 9402 2002 6123 0718 04

7016 3010 0001 0743 4706

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Steven R. Willard*

☐ Agent
☒ Addressee

B. Received by (Printed Name)

Steven R. Willard

C. Date of Delivery

7-3-17

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

☐ Priority Mail Express[®]

☐ Registered Mail[™]

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation[™]

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Tarleton A. Woodson, aka T.A. Woodson
 and Sherrill M. Woodson, Trustees of the
 Tarleton A. Woodson, aka T.A. Woodson
 and Sherrill M. Woodson Revocable Trust
 dtd May 6, 1998
 PO Box 1895
 Acton, CA 93510

9590 9402 2002 6123 0717 98

7016 3010 0001 0743 4690

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *T.A. Woodson*

☐ Agent
☒ Addressee

B. Received by (Printed Name)

T.A. Woodson

C. Date of Delivery

JUL 3 2017

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

☐ Priority Mail Express[®]

☐ Registered Mail[™]

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation[™]

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 3010 0001 0743 4881

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and Fees \$
 Sent To
 Street and Apt. No.
 City, State, ZIP+4

Robert L. Aho and
 Sharon K. Aho
 2941 W. Rome Avenue
 Anaheim, CA 92804

PS Form 3800, April 2015 PSN 7530-02-000-9083

7016 3010 0001 0743 4874

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and Fees \$
 Sent To
 Street and Apt. No.
 City, State, ZIP+4

Ryan Scott Strickler
 10030 Ravello Blvd.
 Fort Myers, FL 33905

PS Form 3800, April 2015 PSN 7530-02-000-9083

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:

Robert L. Aho and
 Sharon K. Aho
 2941 W. Rome Avenue
 Anaheim, CA 92804

9590 9402 2002 6123 0719 72

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4881

PS Form 3811, July 2015 PSN 7530-02-000-9083

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

MICHAEL RUIZ

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
☐ Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

U.S. Postal Service
CERTIFIED MAIL
Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee
\$ 3.45

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

Postage
\$
Total Postage and
\$

Sent To
Mary Ann Beckham Jones
PO Box 1623
Marshall, TX 75671
City, State, ZIP+4

PS Form 3800

U.S. Postal Service
CERTIFIED MAIL
Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee
\$ 3.45

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

Postage
\$
Total Postage and
\$

Sent To
Marshall & Winston, Inc.
PO Box 50880
Midland, TX 79710-0880
City, State, ZIP+4

PS Form 3800

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:

Mary Ann Beckham Jones
PO Box 1623
Marshall, TX 75671

9590 9402 2002 6123 0719 58

2. Article Number (Transfer from service label)
7016 3010 0001 0743 4867

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)
[Signature] Date of Delivery
Jul 5 2017

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

USPS - 57

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:

Marshall & Winston, Inc.
PO Box 50880
Midland, TX 79710-0880

9590 9402 2002 6123 0719 58

2. Article Number (Transfer from service label)
7016 3010 0001 0743 4863

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)
[Signature] Date of Delivery
7/5/17

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

Domestic Return Receipt

U.S. Postal Service™ **COG/ Bone Yard 11 Fee No.**
CERTIFIED MAIL **16H Well - Pooled/ /JLK**
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.40

☐ Return Receipt (electronic) \$ _____

☐ Certified Mail Restricted Delivery \$ _____

☐ Adult Signature Required \$ _____

☐ Adult Signature Restricted Delivery \$ _____

Postmark Here

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Apt. No. _____

City, State, ZIP+4 _____

PS Form 3800, _____

Black Shale Minerals LLC
PO Box 2243
Longview, TX 75606-2243

6994 0743 4669

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

COG/ Bone Yard 11 Fee No.
16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee
\$ 3.45

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

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

Postmark Here

Postage
\$ _____

Total Postage and
\$ _____

Sent To
Street and Apt. No.
City, State, ZIP+4®

D2 Resources, LLC
PO Box 10187
Midland, TX 79701

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

SHIPPER: 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 Shale Minerals LLC PO Box 2243 Longview, TX 75606-2243 9590 9402 2002 6123 0717 74 7016 3010 0001 0743 4676	COMPLETE THIS SECTION ON DELIVERY A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) Daisy Sarinam 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

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:	B. Received by (Printed Name)  C. Date of Delivery 
D2 Resources, LLC PO Box 10187 Midland, TX 79701	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
5590 9402 2002 6123 0717 67	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
Article Number (Transfer from service label) 7016 3010 0001 0743 4669	red Mail red Mail Restricted Delivery (\$500)
PS Form 3811, July 2015 PSN 7530-02-000-9053	

7016 3010 0001 0743 4652

U.S. Postal Service™ **COG/ Bone Yard 11 Fee No.**
CERTIFIED MAIL® 16H Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and \$

Sent To

Street and Apt. No. **Connacht, LLC**

City, State, ZIP+4® **9575 Katy Freeway, Suite 440
Houston, TX 77024**

PS Form 3800, April 2013

7016 3010 0001 0743 4654

U.S. Postal Service™ **COG/ Bone Yard 11 Fee No.**
CERTIFIED MAIL® 16H Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and \$

Sent To

Street and Apt. No. **Christie Lynn London**

City, State, ZIP+4® **6116 Hanson Road
Amarillo, TX 79106**

PS Form 3800, April 2013

- 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:

Connacht, LLC
9575 Katy Freeway, Suite 440
Houston, TX 77024

9590 9402 2002 6123 0717 50

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4652

PS Form 3811, July 2015 PSN 7580-02-000-9059

A. Signature

X K.S. Huh

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/5/17

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
☐ 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:

Christie Lynn London
6116 Hanson Road
Amarillo, TX 79106

9590 9402 2002 6123 0717 43

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4645

PS Form 3811, July 2015 PSN 7580-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Christie Lynn London

☐ 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

7016 3010 0001 0743 4638

U.S. Postal Service™ **COG/ Bone Yard 11 Fee No.**
CERTIFIED MAIL 16H Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To _____

Street and Apt. No. _____

City, State, ZIP+4® _____

Curtis Andrew Ray
118 E. Main Street, Unit M
Royce City, TX 75189

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Curtis Andrew Ray
118 E. Main Street, Unit M
Royce City, TX 75189

9590 9402 2002 6123 0717 36

2. Article Number (Transfer from service label)
7016 3010 0001 0743 4638

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Curtis Ray ☐ Agent ☐ Addressee

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

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

3. Service Type

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

Domestic Return Receipt

7016 3010 0001 0743 4621

U.S. Postal Service™ **COG/ Bone Yard 11 Fee No.**
CERTIFIED MAIL 16H Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To _____

Street and Apt. No. _____

City, State, ZIP+4® _____

Rhonda Hendrix
24 Sunny Side Drive
Reno, NV 89503

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

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:

Rhonda Hendrix
24 Sunny Side Drive
Reno, NV 89503

9590 9402 2002 6123 0717 29

2. Article Number (Transfer from service label)
7016 3010 0001 0743 4621

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Rhonda Hendrix ☐ Agent ☐ Addressee

B. Received by (Printed Name) R. J. Haddock 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
☐ Registered Mail ☐ Registered Mail Restricted Delivery (if \$500)

Domestic Return Receipt

7016 3010 0001 0743 4614

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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

Postage
 \$ 0.00

Total Postage and
 \$ 3.45

Sent To
 Street and Apt. No. B&G Royalties, 4 Partnership
 Partner: William J. McCaw
 PO Box 376
 City, State, ZIP+4[®] Artesia, NM 88211

PS Form 3806, April 2015 PSN 7530-02-000-9053

7016 3010 0001 0743 4805

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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

Postage
 \$ 0.00

Total Postage and
 \$ 3.45

Sent To
 Street and Apt. No. Constance D. Connelly 2015
 Revocable Trust dtd March 6, 2015
 Connie Connelly
 City, State, ZIP+4[®] 1014 Whispering Oak Court
 Arlington, TX 76012-2803

PS Form 3806, April 2015 PSN 7530-02-000-9053

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:
 Constance D. Connelly 2015
 Revocable Trust dtd March 6, 2015
 Connie Connelly
 1014 Whispering Oak Court
 Arlington, TX 76012-2803

9590 9402 2002 6123 0719 03
 Article Number (Transfer from service label)
 7016 3010 0001 0743 4805

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☒ Addressee
Constance Connelly

B. Received by (Printed Name)
CONNELLY

C. Date of Delivery
7/3/17

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

7016 3010 0001 0743 4799

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To

Street and Apt. No.

City, State, ZIP+4

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

Thomas C. Woodson
 PO Box 120757
 Arlington, TX 76012

Postmark
 Here

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:

Thomas C. Woodson
 PO Box 120757
 Arlington, TX 76012

9590 9402 2002 6123 0718 97

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4799

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Thomas C Woodson ☐ Agent ☐ Addressee

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

THOMAS C WOODSON 7/13/15

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

red Mail

red Mail Restricted Delivery

(over \$500)

☐ 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

☐ 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:

Albert C. Wolfington
 9368 TX HWY 37N
 Clarksville, TX 75426

9590 9402 2002 6123 0718 97

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4850

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Becky Wolfington ☐ Agent ☐ Addressee

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

Becky Wolfington 7/13/15

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

red Mail

red Mail Restricted Delivery

(over \$500)

☐ 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

☐ Signature Confirmation Restricted Delivery

7016 3010 0001 0743 4850

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To

Street and Apt. No.

City, State, ZIP+4

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

Albert C. Wolfington
 9368 TX HWY 37N
 Clarksville, TX 75426

Postmark
 Here

7016 3010 0001 0743 4843

U.S. Postal Service™ COG/ Bone Yard 11 Fee No.
CERTIFIED MAIL 1611 Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark
Here

Postage

\$

Total Postage and

\$

Sent To

Kyle J. Strickler

Street and Apt. No.

2601 Reosdorph #702

City, State, ZIP+4

Seabrook, TX 77586

PS Form 3800, A

7016 3010 0001 0743 4836

U.S. Postal Service™ COG/ Bone Yard 11 Fee No.
CERTIFIED MAIL 16H Well - Pooled/ /JLK
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark
Here

Postage

\$

Total Postage and

\$

Sent To

Cheryl Ann Currier

Street and Apt. No.

PO Box 1813

City, State, ZIP+4

Artesia, NM 88211-1813

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

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:

Cheryl Ann Currier
 PO Box 1813
 Artesia, NM 88211-1813

9590 9402 2002 6123 0719 27

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4836

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Kyle Brandon

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Kyle Brandon

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

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 3010 0001 0743 4782

U.S. Postal ServiceTM
CERTIFIED MAIL
 Domestic Mail Only

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee

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

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

Postmark
 Here

Postage

Total Postage and

Sent To

Street and Apt. No.

City, State, ZIP+4[®]

Apache Corporation
 303 Veterans Airpark Ln.,
 Suite 600
 Midland, TX 79705

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

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:

Apache Corporation
 303 Veterans Airpark Ln.,
 Suite 600
 Midland, TX 79705

9590 9402 2002 6123 0718 80

7016 3010 0001 0743 4782

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)

[Signature]

C. Date of Delivery

7-5-17

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

red Mail
 red Mail Restricted Delivery
 (r \$500)

Domestic Return Receipt

7016 3010 0001 0743 4775

U.S. Postal ServiceTM
CERTIFIED MAIL
 Domestic Mail Only

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee

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

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

Postmark
 Here

Postage

Total Postage and

Sent To

Street and Apt. No.

City, State, ZIP+4[®]

Plains Production, Inc.
 1601 SE 19th Street
 Edmond, OK 73013

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

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:

Plains Production, Inc.
 1601 SE 19th Street
 Edmond, OK 73013

9590 9402 2002 6123 0718 73

7016 3010 0001 0743 4775

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)

[Signature]

C. Date of Delivery

7/3/17

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

red Mail
 red Mail Restricted Delivery
 (r \$500)

Domestic Return Receipt

7016 3010 0001 0743 4768

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

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Pooled/ /JLKFor delivery information, visit our website at www.usps.com**OFFICIAL USE**

Certified Mail Fee

\$

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

- ☒ Return Receipt (hardcopy) \$ 3.55
- ☐ Return Receipt (electronic) \$ 2.80
- ☐ Certified Mail Restricted Delivery \$
- ☐ Adult Signature Required \$
- ☐ Adult Signature Restricted Delivery \$

Postmark
Here

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

Solis Energy, LLC
242 Spring Park Dr., Suite C
Midland, TX 79705

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

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

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Pooled/ /JLKFor delivery information, visit our website at www.usps.com**OFFICIAL USE**

Certified Mail Fee

\$

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

- ☒ Return Receipt (hardcopy) \$ 3.55
- ☐ Return Receipt (electronic) \$ 2.80
- ☐ Certified Mail Restricted Delivery \$
- ☐ Adult Signature Required \$
- ☐ Adult Signature Restricted Delivery \$

Postmark
Here

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

Partin Petroleum
PO Box 41070
Houston, TX 77241

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

See Reverse for Instructions

7016 3010 0001 0743 4751

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:

Solis Energy, LLC
242 Spring Park Dr., Suite C
Midland, TX 79705

9590 9402 2002 6123 0718 66

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4768

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X James Bush☐ Agent☐ Addressee

B. Received by (Printed Name)

James Bush

C. Date of Delivery

7/5/17D. 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

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:

Partin Petroleum
PO Box 41070
Houston, TX 77241

9590 9402 2002 6123 0718 59

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4751

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Julie Long☐ 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

7016 3010 0001 0743 4744

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.50

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 and
 \$

Sent To
 Street and Apt. No.
 City, State, ZIP+4

Randy V. Watts
 PO Box 2367
 Roswell, NM 88202

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

7016 3010 0001 0743 4737

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.50

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 and
 \$

Sent To
 Street and Apt. No.
 City, State, ZIP+4

Kevin Scott
 2300 Conveyor Drive
 Burleson, TX 76028

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:

Randy V. Watts
 PO Box 2367
 Roswell, NM 88202

9590 9402 2002 6123 0110 42

7016 3010 0001 0743 4744

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X 

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

Randy Watts

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ red Mail
☐ red Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

7016 3010 0001 0743 4720

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and \$
 Sent To
 Street and Apt. No. Edwin Ford
 City, State, ZIP+4 1012 CR 20
 Clovis, NM 88101
 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:

Edwin Ford
 1012 CR 20
 Clovis, NM 88101

9590 9402 2002 6123 0718 11

7016 3010 0001 0743 4720

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Edwin Ford*
☐ 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
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

 Add'l Mail
 Add'l Mail Restricted Delivery
 (\$500)

Domestic Return Receipt

7016 3010 0001 0743 4713

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and \$
 Sent To
 Street and Apt. No. Laurence David Willard
 City, State, ZIP+4 11020 Mira Vista Place
 Albuquerque, NM 87123
 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:

Laurence David Willard
 11020 Mira Vista Place
 Albuquerque, NM 87123

9590 9402 2002 6123 0720 03

7016 3010 0001 0743 4713

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Laurence David Willard*
☐ 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
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

 Add'l Mail
 Add'l Mail Restricted Delivery
 (\$500)

Domestic Return Receipt

7016 3010 0001 0743 4904

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee

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

Postage

\$
 Total Postage and

Sent To

Street and Apt. No.

City, State, ZIP+4

William J. Duncan and
 Carol Duncan
 1414 Crownhill Drive
 Arlington, TX 76012

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

Postmark
 Here

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:

William J. Duncan and
 Carol Duncan
 1414 Crownhill Drive
 Arlington, TX 76012

9590 9402 2002 6123 0719 96

7016 3010 0001 0743 4904

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Carol Duncan ☐ Agent ☒ Addressee

B. Received by (Printed Name) Duncan C. Date of Delivery 7/3/17

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
☐ Collect on Delivery Restricted Delivery ☐ Signature Restricted Delivery
☐ Registered Mail Restricted Delivery ☐ Signature Restricted Delivery

Domestic Return Receipt

7016 3010 0001 0743 4898

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

Certified Mail Fee

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

Postage

\$
 Total Postage and

Sent To

Street and Apt. No.

City, State, ZIP+4

Janet M. Hanley
 5422 Beaver Lodge Drive
 Kingwood, TX 77345

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

Postmark
 Here

7016 3010 0001 0743 4824

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

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 \$ _____

Postage
 \$ _____

Total Postage and
 \$ _____

Sent To
 Street and Apt. No.
 City, State, ZIP+4

Suzy Crownover True
 6201 Chapel Hill Blvd. #211
 Plano, TX 75093

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

7016 3010 0001 0743 4812

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

COG/ Bone Yard 11 Fee No.
 16H Well - Pooled/ /JLK

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

OFFICIAL USE

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 \$ _____

Postage
 \$ _____

Total Postage and
 \$ _____

Sent To
 Street and Apt. No.
 City, State, ZIP+4

Karla Hayslip
 3004 S. Palm Drive
 Slidell, LA 70458

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:

Karla Hayslip
 3004 S. Palm Drive
 Slidell, LA 70458

9590 9402 2002 6123 0719 10

7016 3010 0001 0743 4812

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x Karla Hayslip Agent Addressee

B. Received by (Printed Name)
KARLA HAYSLIP

C. Date of Delivery
JUL 06 2017

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
☐ red Mail
☐ red Mail Restricted Delivery (\$500)

☒ 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

**BONE YARD 11 Fee No. 16H
OFFSETS**

Apache Corporation
303 Veterans Airpark Ln., Suite 600
Midland, TX 79705

Catherine Connolly TR U/A 12/30/10
Catherine Connolly, Trustee
208 Esther Roberts Road
Glenwood, Durban, 4001
*** This address is in South Africa

Cheryl Ann Currier
PO Box 1813
Artesia, NM 88211-1174

Constance D. Connelly TR DTD 3/6/15
Constance D. Connelly, TRUSTEE
1014 Whispering Oak CT
Arlington, TX 76012

David R. & Loretta Woodson Living TR
David R. & Loretta M. Woodson TTEES
20313 NE 89TH AVE
Battleground, WA 98604

Hunt Cimarron LP
500 N. Main, Suite 101
Roswell, NM 88201

Janet M. Hanley
5422 Beaver Lodge
Kingwood, TX 77345

Marshall & Winston, Inc.
PO Box 50880
Midland, TX 79710-0880

Oleta Mounts Cole TR DTD 1/10/92
Charles Lee Cole, Trustee
3730 California Ave
Carmichael, CA 95608

Robert C. Chase
PO Box 297
Artesia, NM 88211

Solis Energy, LLC
242 Spring Park Dr., Suite C
Midland, TX 79705

Tarleton & Sherrill Woodson REV TR
T.A. & Sherrill Woodson, TTEES
PO BOX 1895
Acton, CA 93510

Black Shale Minerals LLC
PO Box 2243
Longview, TX 75606-2243

Charles Lee Cole, Successor Trustee of the Oleta Mounts Cole Trust dated 7/10/1992
3730 California Ave.
Carmichael, CA 95608

Chisos Ltd.
670 Dona Ana Road, SW
Deming, NM 88030

D2 Resources, LLC
PO Box 10187
Midland, TX 79701

DiaKan Minerals LLC
PO Box 693
Artesia, NM 88211

Iris M. Harris, Successor Trustee of the
Mildred V. Cole Living Trust, dated 6/7/1990
2208 Falling Springs Lane
Yukon, OK 73099

Laurence David Willard
11020 Mira Vista Place
Albuquerque, NM 87123

McCombs Energy LLC
750 East Mulberry Ave.,
Ste. 403
San Antonio, TX 78212

Partin Petroleum
PO Box 41070
Houston, TX 77241

Robert D & Tawnya Cole REV LIV TR
5414 70TH Place
Lubbock, TX 79424

St. Devote, LLC
919 Milam St., Suite 2475
Houston, TX 77002

Thomas C & Linda K. Woodson, JTWROS
818 Del Mar Lane
Arlington, TX 76012

Charles Lee Cole and Margaret Kathleen Cole
3730 California Ave.
Carmichael, CA 95608

Chase Oil Corporation
PO Box 1767
Artesia, NM 88211

Connacht, LLC
9575 Katy Freeway, Suite 440
Houston, TX 77024

David N. & Iris M. Harris Living Trust
Iris M. Harris, TRUSTEE
2208 Falling Springs Lane
Yukon, OK 73099

HF INVESTMENTS LLC
3018 S HIGH STREET
Denver, CO 80210

Iris M. Harris, Trustee of the
Nettie Louise Putman Trust
PO Box 850403
Yukon, OK 73085

LR Energy
8150 N. Central Expy.,
Suite 1605
Dallas, TX 75206

Nettie Louise Putman Trust
PO Box 850403
Yukon, OK 73085

Plains Production, Inc.
1601 SE 19th Street
Edmond, OK 73013

Robert L. & Sharon K. Aho, JTWROS
2941 W. Rome Ave
Anaheim, CA 92804

Steven Willard
PO BOX 1174
Artesia, NM 88211-1174

Ventana Minerals LLC
PO Box 359
Artesia, NM 88211

William J. & Carol O. Duncan, JTWROS
1414 Crownhill Drive
Arlington, TX 76012

William S. & Linda K. Woodson Trust
William & Woodson Trustees
211 Dunes Street
Morro Bay, CA 93442

Zanaida Ruth Griffin
166 Mountain Brook Park
Birmingham, AL 35213

7016 3010 0001 0743 4997

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

COG/ Bone Yard LL Fee No.
 16H Well 10/25/17/JLK

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

OFFICIAL USE

Certified Mail Fee

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

Postage

Total Postage and

Sent To

Street and Apt. No.

City, State, ZIP+4

Apache Corporation
 303 Veterans Airpark Ln.,
 Suite 600
 Midland, TX 79705

Postmark
 Here

PS Form 3800, April 2015 PSN 7530-02-000-9051

See Reverse for Instructions

COMPLETE THIS SECTION

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

1. Article Addressed to:

Apache Corporation
 303 Veterans Airpark Ln.,
 Suite 600
 Midland, TX 79705

9590 9402 2002 6123 0721 08

7016 3010 0001 0743 4997

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

☒ Agent
☐ Addressee

B. Received by (Printed Name)

T. Berry

C. Date of Delivery

7-5-17

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

(over \$500)

Domestic Return Receipt

Registered No.

RB265952010US

Date Stamp

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

Domestic Return Receipt

To Be Completed By Post Office	Postage \$ \$1.15	Extra Services & Fees (continued)
	Extra Services & Fees	☐ Signature Confirmation \$
	☐ Registered Mail \$ \$14.95	☐ Signature Confirmation Restricted Delivery \$
	☐ Return Receipt (hardcopy) \$ \$3.85	Total Postage & Fees \$ \$19.95
	☐ Return Receipt (electronic) \$ \$0.00	
	☐ Restricted Delivery \$	
Customer Must Declare Full Value \$ \$0.00	Received by 06/30/2017	Domestic Insurance up to \$50,000 is included based upon the declared value. International indemnity is limited. (See Reverse).
	NOM	
OFFICIAL USE		
To Be Completed By Customer (Please Print) All Entries Must Be in Ballpoint or Typed	FROM	SANTA FE, NM 87501
		Holland & Hart Up
		PB BOX 2208
		Santa Fe, NM 87504
		87501
	TO	Catherine Connolly FR U/A 12/30/10
	Catherine Connolly, Trustee	
	208 Esther Roberts Road	
	Glenwood, Durban, 4001	

PS Form 3806, Registered Mail Receipt

Copy 1 - Customer

April 2015, PSN 7530-02-000-9051

(See Information on Reverse)

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

7016 3010 0001 0743 4980

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

COG/ Bone Yard 11 Fee No.
16H Well - 0000/JLK

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

OFFICIAL USE

Certified Mail Fee

\$ 3.95

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

Postage

\$

Total Postage and

\$

Sent To

Cheryl Ann Currier
PO Box 1813
Artesia, NM 88211-1174

Street and Apt. No.

City, State, ZIP+4

PS Form 3800, April 2015

7016 3010 0001 0743 4973

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

COG/ Bone Yard 11 Fee No.
16H Well - 0000/JLK

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

OFFICIAL USE

Certified Mail Fee

\$ 3.95

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

Postage

\$

Total Postage and

\$

Sent To

Constance D. Connelly TR DTD 3/6/15
Constance D. Connelly, TRUSTEE
1014 Whispering Oak CT
Arlington, TX 76012

Street and Apt. No.

City, State, ZIP+4

PS Form 3800, April 2015

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:

Cheryl Ann Currier
PO Box 1813
Artesia, NM 88211-1174

9590 9402 2002 6123 0720 85

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4980

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Cheryl Ann Currier

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Cheryl Ann Currier

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

(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:

Constance D. Connelly TR DTD 3/6/15
Constance D. Connelly, TRUSTEE
1014 Whispering Oak CT
Arlington, TX 76012

9590 9402 2002 6123 0720 78

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4973

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Constance D. Connelly

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Constance D. Connelly

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

(over \$500)

Domestic Return Receipt

7016 3010 0001 0743 4966

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

COG/ Bone Yard 11 Fee No.
 16H Well - 01/27/17/JLK

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

OFFICIAL USE

Certified Mail Fee

\$

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

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

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9058

See Reverse for Instructions

David R. & Loretta Woodson Living TR
 David R. & Loretta M. Woodson TTEES
 20313 NE 89TH AVE
 Battleground, WA 98604

Postmark
 Here

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:

David R. & Loretta Woodson Living TR
 David R. & Loretta M. Woodson TTEES
 20313 NE 89TH AVE
 Battleground, WA 98604

9590 9402 2002 6123 0720 61

7016 3010 0001 0743 4966

PS Form 3811, July 2015 PSN 7530-02-000-9058

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Loretta Woodson ☐ Agent ☒ Addressee

B. Received by (Printed Name)

Loretta Woodson

C. Date of Delivery

7-5-17

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[™]
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery (\$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:

Hunt Cimarron LP
 500 N. Main, Suite 101
 Roswell, NM 88201

9590 9402 2002 6123 0720 54

7016 3010 0001 0743 4959

PS Form 3811, July 2015 PSN 7530-02-000-9058

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Boni Cox ☐ Agent ☒ Addressee

B. Received by (Printed Name)

Boni Cox

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 (\$500)

Domestic Return Receipt

7016 3010 0001 0743 4959

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

COG/ Bone Yard 11 Fee No.
 16H Well - 01/27/17/JLK

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

OFFICIAL USE

Certified Mail Fee

\$

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

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

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9058

See Reverse for Instructions

Hunt Cimarron LP
 500 N. Main, Suite 101
 Roswell, NM 88201

Postmark
 Here

7016 3010 0001 0742 0020

U.S. Postal Service[™]
CERTIFIED MAIL[®] COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - Offset/ /JLK

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

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and \$
 Sent To Janet M. Hanley
 5422 Beaver Lodge
 Street and Apt. No. Kingwood, TX 77345
 City, State, ZIP+4[®]

PS Form 3800, April 2015 PSN 7530-02-000-9001 See Reverse for Instructions

7016 3010 0001 0742 0013

U.S. Postal Service[™]
CERTIFIED MAIL[®] COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - Offset/ /JLK

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

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage and \$
 Sent To Marshall & Winston, Inc.
 PO Box 50880
 Street and Apt. No. Midland, TX 79710-0880
 City, State, ZIP+4[®]

PS Form 3800, April 2015 PSN 7530-02-000-9001 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:
 Marshall & Winston, Inc.
 PO Box 50880
 Midland, TX 79710-0880

9590 9402 2002 6123 0721 15
 7016 3010 0001 0742 0013

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
 [Signature] 7/5/17

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 (\$500)

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

7016 3010 0001 0742 0822

U.S. Postal Service™
CERTIFIED MAIL

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Offset/ /JLKFor delivery information, visit our website at www.usps.com**OFFICIAL USE**

Certified Mail Fee

\$ 3.45

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

☐ Return Receipt (hardcopy) \$ 2.40☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4®

Oleta Mounts Cole TR DTD 1/10/92
Charles Lee Cole, Trustee
3730 California Ave
Carmichael, CA 95608

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

See Reverse for Instructions

Postmark
Here

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:

Oleta Mounts Cole TR DTD 1/10/92
Charles Lee Cole, Trustee
3730 California Ave
Carmichael, CA 95608

9590 9402 2002 6123 0723 06

2. Article Number (Transfer from carrier label)

7016 3010 0001 0742 0822

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Charles Lee Cole Agent
X Charles Lee Cole Addressee

B. Received by (Printed Name)

CHUCK COLE

C. Date of Delivery

JUL - 5 2017

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

3. Service Type

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

Domestic Return Receipt

7016 3010 0001 0742 0815

U.S. Postal Service™
CERTIFIED MAIL

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Offset/ /JLKFor delivery information, visit our website at www.usps.com**OFFICIAL USE**

Certified Mail Fee

\$ 3.45

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

☐ Return Receipt (hardcopy) \$ 2.40☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4®

Robert C. Chase
PO Box 297
Artesia, NM 88211

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

See Reverse for Instructions

Postmark
Here

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:

Robert C. Chase
PO Box 297
Artesia, NM 88211

9590 9402 2002 6123 0722 90

2. Article Number (Transfer from carrier label)

7016 3010 0001 0742 0815

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Kathy Beauregard Agent
Kathy Beauregard Addressee

B. Received by (Printed Name)

KATHY BEAUREGARD

C. Date of Delivery

7-5-17

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

Domestic Return Receipt

7016 3010 0001 0742 0808

U.S. Postal Service™

CERTIFIED MAIL

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Office /JLKFor delivery information, visit our website at usps.com**OFFICIAL USE**

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 \$Postmark
Here

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

Solis Energy, LLC
242 Spring Park Dr., Suite C
Midland, TX 79705

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:

Solis Energy, LLC
242 Spring Park Dr., Suite C
Midland, TX 79705

9590 9402 2002 6123 0722 83

2. Article Number (Transfer from sender label)

7016 3010 0001 0742 0808

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Name: Hamre Bush☐ Agent
☐ Addressee

B. Received by (Printed Name)

Name: Hamre Bush

C. Date of Delivery

Date: 7/5/17D. 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☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

U.S. Postal Service™

CERTIFIED MAIL

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Office /JLKFor delivery information, visit our website at usps.com**OFFICIAL USE**

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 \$Postmark
Here

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

Tarleton & Sherrill Woodson REV TR
T.A. & Sherrill Woodson, TTEES
PO BOX 195
Acton, CA 93510

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

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:

Tarleton & Sherrill Woodson REV TR
T.A. & Sherrill Woodson, TTEES
PO BOX 195
Acton, CA 93510

9590 9402 2002 6123 0722 76

7016 3010 0001 0742 0792

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Name: T.A. Woodson☐ Agent
☐ Addressee

B. Received by (Printed Name)

Name: T.A. Woodson

C. Date of Delivery

Date: JUL 3 2017D. 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☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation 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☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 3010 0001 0743 4942

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

COG/ Bone Yard 11 Fee No.
 16H Well - 0000007JLK

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

OFFICIAL USE

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

Postmark
 Here

Postage
 \$
 Total Postage and

Sent To
 Street and Apt. No.
 City, State, ZIP+4

Black Shale Minerals LLC
 PO Box 2243
 Longview, TX 75606-2243

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

7016 3010 0001 0743 4942

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

COG/ Bone Yard 11 Fee No.
 16H Well - Offset/ J/LK

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

OFFICIAL USE

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

Postmark
 Here

Postage
 \$
 Total Postage and

Sent To
 Street and Apt. No.
 City, State, ZIP+4

Charles Lee Cole, Successor Trustee
 of the Oleta Mounts Cole Trust dated
 7/10/1992
 3730 California Ave.
 Carmichael, CA 95608

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:

Black Shale Minerals LLC
 PO Box 2243
 Longview, TX 75606-2243

9590 9402 2002 6123 0720 47

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4942

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Deisy Samana* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Deisy Samana

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

Charles Lee Cole, Successor Trustee
 of the Oleta Mounts Cole Trust dated
 7/10/1992
 3730 California Ave.
 Carmichael, CA 95608

9590 9402 2002 6123 0720 30

2. Article Number (Transfer from service label)

7016 3010 0001 0743 4935

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Charles Lee Cole* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Charles Lee Cole

C. Date of Delivery

JUL - 5 2017

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

Domestic Return Receipt

7016 3010 0001 0743 4928

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

COG/ Bone Yard 11 Fee No.
 16H Well - 0153 /JLK

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

OFFICIAL USE

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

Chisos Ltd.
 670 Dona Ana Road, SW
 Deming, NM 88030

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:

Chisos Ltd.
 670 Dona Ana Road, SW
 Deming, NM 88030

9590 9402 2002 6123 0720 23

7016 3010 0001 0743 4928

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)

B. Jacobson

C. Date of Delivery

7/3/17

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

☐ Registered Mail

☐ Registered Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express[®]

☐ Registered Mail[™]

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation[™]

☐ Signature Confirmation Restricted Delivery

7016 3010 0001 0743 4911

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

COG/ Bone Yard 11 Fee No.
 16H Well - 0153 /JLK

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

OFFICIAL USE

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

D2 Resources, LLC
 PO Box 10187
 Midland, TX 79701

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:

D2 Resources, LLC
 PO Box 10187
 Midland, TX 79701

9590 9402 2002 6123 0720 10

7016 3010 0001 0743 4911

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)

Andrew

C. Date of Delivery

7/3/17

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

☐ Registered Mail

☐ Registered Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express[®]

☐ Registered Mail[™]

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation[™]

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 3010 0001 0742 0105

U.S. Postal Service™

CERTIFIED MAIL™

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Offset /JLKFor delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee

\$ 345

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

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

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

DiaKan Minerals LLC
PO Box 693
Artesia, NM 88211

City, State, ZIP+4

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

See Reverse for Instructions

Postmark
Here

7016 3010 0001 0742 0099

U.S. Postal Service™

CERTIFIED MAIL™

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Offset /JLKFor delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee

\$ 345

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

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

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

Iris M. Harris, Successor Trustee of the
Mildred V. Cole Living Trust, dated
6/7/1990
2208 Falling Springs Lane
Yukon, OK 73099

City, State, ZIP+4

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

See Reverse for Instructions

Postmark
Here

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:

DiaKan Minerals LLC
PO Box 693
Artesia, NM 88211

9590 9402 2002 6123 0722 07

2. Article Number (Transfer from service label)

7016 3010 0001 0742 0105

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Kathy Beauregard

☐ Agent☐ Addressee

B. Received by (Printed Name)

KATHY BEAUREGARD

C. Date of Delivery

7-5-17

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

Iris M. Harris, Successor Trustee of the
Mildred V. Cole Living Trust, dated
6/7/1990
2208 Falling Springs Lane
Yukon, OK 73099

9590 9402 2002 6123 0721 91

2. Article Number (Transfer from service label)

7016 3010 0001 0742 0099

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Iris M. Harris

☐ Agent☐ Addressee

B. Received by (Printed Name)

IRIS M. HARRIS

C. Date of Delivery

JUL - 3 2017

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☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation 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☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery☐ Signature Confirmation Restricted Delivery

7016 3010 0001 0742 0778

U.S. Postal Service[™]
CERTIFIED MAIL[®] COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - Offset/JLK

For delivery information, visit usps.com**OFFICIAL USE**

Certified Mail Fee	\$	3.45	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	\$	2.70	
☐ Return Receipt (hardcopy)	\$		
☐ Return Receipt (electronic)	\$		
☐ Certified Mail Restricted Delivery	\$		
☐ Adult Signature Required	\$		
☐ Adult Signature Restricted Delivery	\$		
Postage	\$		
Total Postage and	\$		

Sent To
 Street and Apt. No.
 City, State, ZIP+4[®]

Laurence David Willard
 11020 Mira Vista Place
 Albuquerque, NM 87123

PS Form 3800, April 2015 PSN 7530-02-000-9031 See Reverse for Instructions

7016 3010 0001 0742 0761

U.S. Postal Service[™]
CERTIFIED MAIL[®] COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - Offset/JLK

For delivery information, visit usps.com**OFFICIAL USE**

Certified Mail Fee	\$	3.45	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	\$	2.70	
☐ Return Receipt (hardcopy)	\$		
☐ Return Receipt (electronic)	\$		
☐ Certified Mail Restricted Delivery	\$		
☐ Adult Signature Required	\$		
☐ Adult Signature Restricted Delivery	\$		
Postage	\$		
Total Postage and	\$		

Sent To
 Street and Apt. No.
 City, State, ZIP+4[®]

McCombs Energy LLC
 750 East Mulberry Ave.,
 Ste. 403
 San Antonio, TX 78212

PS Form 3800, April 2015 PSN 7530-02-000-9031 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:

Laurence David Willard
 11020 Mira Vista Place
 Albuquerque, NM 87123

9590 9402 2002 6123 0722 52

7016 3010 0001 0742 0778

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Laurence David Willard* ☐ Agent
☒ Addressee

B. Received by (Printed Name)

LAURENCE D WILLARD

C. Date of Delivery

D. 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 |

1 Mail

1 Mail Restricted Delivery

(over \$500)

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:

McCombs Energy LLC
 750 East Mulberry Ave.,
 Ste. 403
 San Antonio, TX 78212

9590 9402 2002 6123 0722 45

7016 3010 0001 0742 0761

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Laurence David Willard* ☐ Agent
☒ Addressee

B. Received by (Printed Name)

LAURENCE D WILLARD

C. Date of Delivery

D. 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 |

1 Mail

1 Mail Restricted Delivery

(over \$500)

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

Domestic Return Receipt

7016 3010 0001 0742 0754

U.S. Postal Service™

CERTIFIED MAIL™

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Offset/JLKFor delivery information, visit usps.com

OFFICIAL USE

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

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

Partin Petroleum

PO Box 41070

Houston, TX 77241

PS Form 3800, April 2015 PSN 7530-02-000-9054

See Reverse for Instructions

Postmark
Here

7016 3010 0001 0742 0747

U.S. Postal Service™

CERTIFIED MAIL™

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Offset/JLKFor delivery information, visit usps.com

OFFICIAL USE

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

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

Robert D & Tawnya Cole REV LIV TR

5414 70TH Place

Lubbock, TX 79424

PS Form 3800, April 2015 PSN 7530-02-000-9054

See Reverse for Instructions

Postmark
Here

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:

Partin Petroleum
PO Box 41070
Houston, TX 77241

9590 9402 2002 6123 0722 38

2. Article Number (Transfer from service label)

7016 3010 0001 0742 0754

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Julie Long

☐ 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☐ Collect on Delivery Restricted Delivery

Mail

Mail 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:

Robert D & Tawnya Cole REV LIV TR
5414 70TH Place
Lubbock, TX 79424

9590 9402 2002 6123 0722 21

7016 3010 0001 0742 0747

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Douglas Cole

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

B. 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☐ Collect on Delivery Restricted Delivery

Mail

Mail Restricted Delivery

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

(over \$500)

7016 3010 0001 0742 0730

U.S. Postal Service[™]
CERTIFIED MAIL[®] COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - Offset/ /JLK

For delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and \$

Sent To

Street and Apt. No.,

City, State, ZIP+4[®]

St. Devote, LLC
 919 Milam St., Suite 2475
 Houston, TX 77002

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:

St. Devote, LLC
 919 Milam St., Suite 2475
 Houston, TX 77002

9590 9402 2002 6123 0722 14

2. Article Number (Transfer from service label)

7016 3010 0001 0742 0730

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)

Tracy Strain

C. Date of Delivery

7/5/17

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

1 Mail

1 Mail Restricted Delivery

500)

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

Domestic Return Receipt

7016 3010 0001 0742 0921

U.S. Postal Service[™]
CERTIFIED MAIL[®] COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - Offset/ /JLK

For delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and \$

Sent To

Street and Apt. No.,

City, State, ZIP+4[®]

Thomas C & Linda K.
 Woodson, JTWROS
 818 Del Mar Lane
 Arlington, TX 76012

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:

Thomas C & Linda K.
 Woodson, JTWROS
 818 Del Mar Lane
 Arlington, TX 76012

9590 9402 2002 6123 0724 05

7016 3010 0001 0742 0921

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)

Thomas C Woodson

C. Date of Delivery

JUL 5 2017

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

1 Mail

1 Mail Restricted Delivery

500)

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

Domestic Return Receipt

7016 3010 0001 0742 0082

U.S. Postal Service™

CERTIFIED MAIL®

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - OFFICE /JLKFor delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee

\$

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

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

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4®

Charles Lee Cole and Margaret
Kathleen Cole
3730 California Ave.
Carmichael, CA 95608

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

See Reverse for Instructions

U.S. Postal Service™

CERTIFIED MAIL®

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - OFFICE /JLKFor delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee

\$

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

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

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4®

Chase Oil Corporation
PO Box 1767
Artesia, NM 88211

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:

Charles Lee Cole and Margaret
Kathleen Cole
3730 California Ave.
Carmichael, CA 95608

9590 9402 2002 6123 0721 84

7016 3010 0001 0742 0082

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Charles Lee Cole and
Margaret K. Cole☐ Agent☐ Addressee

B. Received by (Printed Name)

CHUCK COLE

C. Date of Delivery

7/5/17

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☐ Collect on Delivery Restricted Delivery

d Mail

d Mail Restricted Delivery

(\$800)

☐ 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:

Chase Oil Corporation
PO Box 1767
Artesia, NM 88211

9590 9402 2002 6123 0721 77

7016 3010 0001 0742 0075

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Kathy Beauregard

☐ Agent☐ Addressee

B. Received by (Printed Name)

KATHY BEAUREGARD

C. Date of Delivery

7-5-17

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☐ Collect on Delivery Restricted Delivery

ed Mail

ed Mail Restricted Delivery

(\$800)

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

9500 2420 0001 0000 0742 9702

U.S. Postal Service™
CERTIFIED MAIL™ COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - 01/05/17/JLK

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage amt \$

Sent To Connacht, LLC

Street and Apt. No 9575 Katy Freeway, Suite 440

City, State, ZIP+4® Houston, TX 77024

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:

Connacht, LLC
9575 Katy Freeway, Suite 440
Houston, TX 77024

9590 9402 2002 6123 0721 60
 7016 3010 0001 0742 0068

COMPLETE THIS SECTION ON DELIVERY

A. Signature XKS. Hubert ☐ Agent ☐ Addressee

B. Received by (Printed Name) _____ C. Date of Delivery 7/5/17

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

3. Service Type ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery

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

☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

ed Mail
 ed Mail Restricted Delivery
 over \$500

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

1500 2420 0001 0000 0742 9702

U.S. Postal Service™
CERTIFIED MAIL™ COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - 01/05/17/JLK

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage amt \$

Sent To David N. & Iris M. Harris Living Trust

Street and Apt. No Iris M. Harris, TRUSTEE

City, State, ZIP+4® 2208 Falling Springs Lane
Yukon, OK 73099

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:

David N. & Iris M. Harris Living Trust
Iris M. Harris, TRUSTEE
2208 Falling Springs Lane
Yukon, OK 73099

9590 9402 2002 6123 0721 53
 7016 3010 0001 0742 0051

COMPLETE THIS SECTION ON DELIVERY

A. Signature X David N. Harris ☐ Agent ☐ Addressee

B. Received by (Printed Name) _____ C. Date of Delivery JUL - 3 2017

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

3. Service Type ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery

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

☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

ed Mail
 ed Mail Restricted Delivery
 over \$500

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

7016 3010 0001 0742 0044

U.S. Postal Service™

CERTIFIED MAIL™

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Offset/ JLKFor delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45☐ Return Receipt (electronic) \$ 2.40☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and Fees

\$

Sent To

Street and Apt. No.

City, State, ZIP+4®

HF INVESTMENTS LLC
3018 S HIGH STREET
Denver, CO 80210

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

See Reverse for Instructions

7016 3010 0001 0742 0037

U.S. Postal Service™

CERTIFIED MAIL™

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Offset/ JLKFor delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45☐ Return Receipt (electronic) \$ 2.40☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and Fees

\$

Sent To

Street and Apt. No.

City, State, ZIP+4®

Iris M. Harris, Trustee of the
Nettie Louise Putman Trust
PO Box 850403
Yukon, OK 73085

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:

Iris M. Harris, Trustee of the
Nettie Louise Putman Trust
PO Box 850403
Yukon, OK 73085

9590 9402 2002 6123 0721 39

7016 3010 0001 0742 0037

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Iris Harris

☐ Agent☐ Addressee

B. Received by (Printed Name)

IRIS HARRIS

C. Date of Delivery

7/3/11

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

Domestic Return Receipt

7016 3010 0001 0742 0907

U.S. Postal Service[™]
CERTIFIED MAIL[®] COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - Offset/ /JLK

For delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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

Postage
 \$
 Total Postage and
 \$

Sent To
 Street and Apt. No. LR Energy
 8150 N. Central Expy.,
 Suite 1605
 City, State, ZIP+4[®] Dallas, TX 75206

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:

LR Energy
 8150 N. Central Expy.,
 Suite 1605
 Dallas, TX 75206

9590 9402 2002 6123 0723 82

2. Article Number (Transfer from service label)

7016 3010 0001 0742 0907

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x D. Saunders
☐ 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

(over \$500)

Domestic Return Receipt

7016 3010 0001 0742 0891

U.S. Postal Service[™]
CERTIFIED MAIL[®] COG/ Bone Yard 11 Fee No.
 Domestic Mail Only 16H Well - Offset/ /JLK

For delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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

Postage
 \$
 Total Postage and
 \$

Sent To
 Street and Apt. No. Nettie Louise Putman Trust
 PO Box 850403
 City, State, ZIP+4[®] Yukon, OK 73085

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:

Nettie Louise Putman Trust
 PO Box 850403
 Yukon, OK 73085

9590 9402 2002 6123 0723 15

7016 3010 0001 0742 0891

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Aris Harris
☐ 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

(over \$500)

Domestic Return Receipt

7016 3010 0001 0742 0884

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

COG/ Bone Yard 11 Fee No.
 16H Well - Offset/ /JLK

For delivery information, visit www.usps.com

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

Extra Services & Fees (check box, add fee except where indicated)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage
 \$

Total Postage and
 \$

Sent To
 Plains Production, Inc.
 1601 SE 19th Street
 Edmond, OK 73013

Street and Apt. No.
 City, State, ZIP+4

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:

Plains Production, Inc.
 1601 SE 19th Street
 Edmond, OK 73013

9590 9402 2002 6123 0723 68

7016 3010 0001 0742 0884

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X David Phillips
☐ Agent
☐ Addressee

B. Received by (Printed Name)

David Phillips

C. Date of Delivery

4/3/17

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

(over \$500)

Domestic Return Receipt

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:

Robert L & Sharon K. Aho,
 JTWROS
 2941 W. Rome Ave
 Anaheim, CA 92804

9590 9402 2002 6123 0723 51

2. 3010 0001 0742 0877

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Michael Ruiz
☐ Agent
☐ Addressee

B. Received by (Printed Name)

Michael Ruiz

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

(over \$500)

Domestic Return Receipt

7016 3010 0001 0742 0877

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

COG/ Bone Yard 11 Fee No.
 16H Well - Offset/ /JLK

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

Extra Services & Fees (check box, add fee except where indicated)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage
 \$

Total Postage and
 \$

Sent To
 Robert L & Sharon K. Aho,
 JTWROS
 2941 W. Rome Ave
 Anaheim, CA 92804

Street and Apt. No.
 City, State, ZIP+4

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

7016 3010 0001 0742 0860

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

COG/ Bone Yard 11 Fee No.
 16H Well - Offset/JLK

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage
 \$

Total Postage and
 \$

Sent To
 Steven Willard
 PO BOX 1174
 Artesia, NM 88211-1174

Street and Apt. No.
 City, State, ZIP+4

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:
 Steven Willard
 PO BOX 1174
 Artesia, NM 88211-1174

2. Article Number (Transfer from service label)
 9590 9402 2002 6123 0723 44
 7016 3010 0001 0742 0860

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 Steven P Willard

C. Date of Delivery
 7-3-17

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

Domestic Return Receipt

7016 3010 0001 0742 0853

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

COG/ Bone Yard 11 Fee No.
 16H Well - Offset/JLK

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage
 \$

Total Postage and
 \$

Sent To
 Ventana Minerals LLC
 PO Box 359
 Artesia, NM 88211

Street and Apt. No.
 City, State, ZIP+4

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:
 Ventana Minerals LLC
 PO Box 359
 Artesia, NM 88211

2. Article Number (Transfer from service label)
 9590 9402 2002 6123 0723 31
 7016 3010 0001 0742 0853

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 KATHY BEAUREGARD

C. Date of Delivery
 7-5-17

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

Domestic Return Receipt

7016 3010 0001 0742 0785

U.S. Postal Service™

CERTIFIED MAIL

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - 0785/JLKFor delivery information, visit our website at usps.com**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 and

\$

Sent To

Street and Apt. N

City, State, ZIP+4

William J & Carol O. Duncan, JTWROS
1414 Crownhill Drive
Arlington, TX 76012

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

See Reverse for Instructions

U.S. Postal Service™

CERTIFIED MAIL

Domestic Mail Only

COG/ Bone Yard 11 Fee No.
16H Well - Offset/ JLKFor delivery information, visit our website at usps.com**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 and

\$

Sent To

Street and Apt. N

City, State, ZIP+4

William S. & Linda K. Woodson Trust
William & Linda Woodson, TTEES
211 Dunes Street
Morro Bay, CA 93442

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:

William J & Carol O. Duncan, JTWROS
1414 Crownhill Drive
Arlington, TX 76012

9590 9402 2002 6123 0722 69

2. Article Number (Transfer from service label).

7016 3010 0001 0742 0785

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Carol O. Duncan ☐ Agent ☒ Addressee

B. Received by (Printed Name)

DUNCAN 7/8/17

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
- ☐ Mail
- ☐ Mail Restricted Delivery (\$500)
- ☐ 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:

William S. & Linda K. Woodson Trust
William & Linda Woodson, TTEES
211 Dunes Street
Morro Bay, CA 93442

9590 9402 2002 6123 0723 99

7016 3010 0001 0742 0914

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X W.S. Woodson ☐ Agent ☒ Addressee

B. Received by (Printed Name)

W.S. Woodson 7/8/17

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

7016 3010 0001 0742 0846

U.S. Postal Service[™]
CERTIFIED MAIL[®] COG/ Bone Yard 11 Fee No.
Domestic Mail Only 16H Well - Offert/ JLK

For delivery information, visit usps.com

OFFICIAL USE

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 \$

Postmark
Here

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4[®]

Zanaida Ruth Griffin
166 Mountain Brook Park
Birmingham, AL 35213

PS Form 3800, April 2015 PSN 7530-02-000-9000

See Reverse for Instructions

Affidavit of Publication

State of New Mexico,
County of Eddy, ss.

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

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

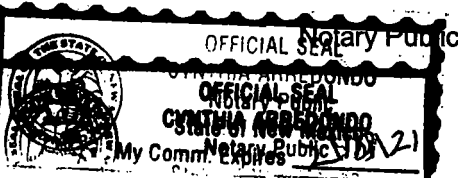
July 5 2017

That the cost of publication is
\$382.26 and that payment
thereof has been made and
will be assessed as court
costs.

Subscribed and sworn to before me
this 10 day of July, 2017

My commission Expires on 2/13/21

Notary Public



July 5, 2017 STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT OIL CONSERVATION DIVISION SANTA FE, NEW MEXICO

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on July 20, 2017, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appointed for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact: Florene Davidson at 505-476-3458 or through the New Mexico Relay Network 1-800-659-1779 by July 11, 2017. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

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

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

To: McCombs Energy LLC, and its successors, heirs and/or devisees; Hunt Cimarron LP, and its successors, heirs and/or devisees; LR Energy, and its successors, heirs and/or devisees; Chisos Ltd., and its successors, heirs and/or devisees; Jack Dean London, c/o Jimmy Lynn London, and his successors, heirs and/or devisees; Christopher Robert Ray, and his successors, heirs and/or devisees; Donna F. Leach, and her successors, heirs and/or devisees; Karen Hicks, aka Karen Hicks Maddox, and her successors, heirs and/or devisees; Steven R. Willard, and his successors, heirs and/or devisees; Janet M.

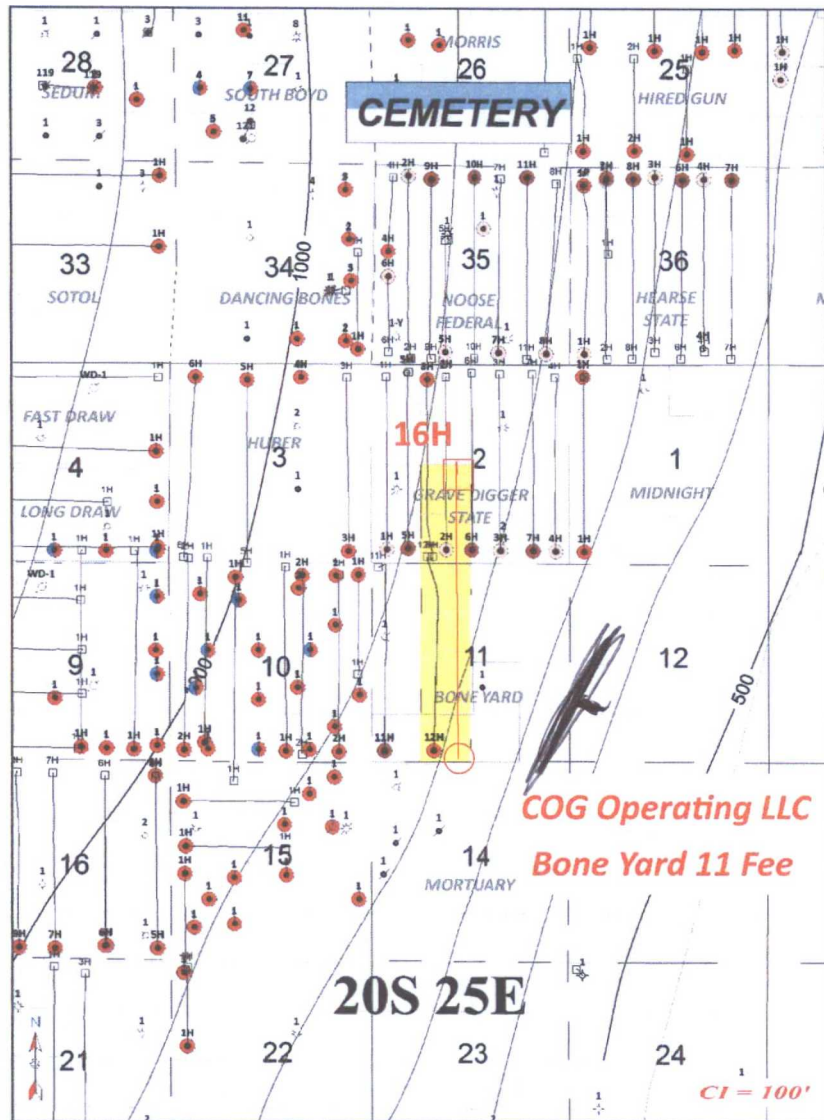
and/or devisees; Hanley, and her successors, heirs and/or devisees; Tarelton A. Woodson, aka T.A. Woodson, and Sherrill M. Woodson, Trustees of the Tarelton A. Woodson, aka T.A. Woodson and Sherrill M. Woodson Revocable Trust dtd May 6, 1998, and their successors, heirs and/or devisees; Robert L. Aho and Sharon K. Aho, and their successors, heirs and/or devisees; Ryan Scott Strickler, and his successors, heirs and/or devisees; Mary Ann Beckham Jones, and her successors, heirs and/or devisees; Marshall & Winston, Inc., and its successors, heirs and/or devisees; Black Shale Minerals LLC, and its successors, heirs and/or devisees; D2 Resources, LLC, and its successors, heirs and/or devisees; Connacht, LLC, and its successors, heirs and/or devisees; Christie-Lynn London, and her successors, heirs and/or devisees; Curtis Andrew Ray, and his successors, heirs and/or devisees; Rhonda Hendrix, and her successors, heirs and/or devisees; B&G Royalties, 4 Partnership, William J. McCaw, Partner, and their successors, heirs and/or devisees; Constance D. Connolly 2015 Revocable Trust dtd March 6, 2015, Connie Connolly, and their successors, heirs and/or devisees; Thomas C. Woodson, and his successors, heirs and/or devisees; Albert C. Wolfington, and his successors, heirs and/or devisees; Kyle J. Strickler, and his successors, heirs and/or devisees; Cheryl Ann Currier, and her successors, heirs and/or devisees; Apache Corporation, and its successors, heirs and/or devisees; Plains Production, Inc., and its successors, heirs and/or devisees; Solis Energy, LLC, and its successors, heirs and/or devisees; Parth Petroleum, and its successors, heirs and/or devisees; Randy V. Watts, and his successors, heirs and/or devisees; Kevin Scott, and his successors, heirs and/or devisees; Edwin Ford, and his successors, heirs and/or devisees; Laurence David Willard, and his successors, heirs and/or devisees; William J. Duncan, and Carol Duncan, and their successors, heirs and/or devisees; Janet M.

Leonard Hollis; Heirs or Devises of Benjamin Ranklin Hollis; Heirs or Devises of George Davis Hollis Perkins, aka Winnie D. Hollis Fielding; Heirs or Devises of Bobby B. Perkins; and Heirs or Devises of John Thomas Hollis, aka John T. Hollis, aka Tommy Hollis.

CASE 15760: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling; Eddy County, New Mexico; Applicant in the above-styled cause seeks an order (1) creating a 240-acre, more or less, spacing and proration unit comprised of the E/2 W/2 of Section 11 and the E/2 SW/4 of Section 2, Township 20 South, Range 25 East, NMPM, Eddy County, New Mexico; and (2) pooling all uncommitted interests in the N Seven Rivers, Gloria Yaso Pool (97565) underlying this acreage. Said non-standard unit is to be dedicated to applicant's proposed Bone Yard #1 Fee No. 16H Well, which will be horizontally drilled from a surface location in the NE/4 SW/4 (Unit K) of Section 2 to a non-standard bottom hole location in the SE/4 SW/4 (Unit N) of Section 11. The completed interval for this well will be unorthodox. Also to be considered will be the cost of drilling and completing said well and the allocation of the cost thereof as well as actual operating costs and charges for supervision, designation of COG Operating LLC as operator of the well and a 200% charge for risk involved in drilling said well. Said area is located approximately 2 miles west of Seven Rivers, New Mexico.

BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 7
Submitted by: COG OPERATING, LLC
Hearing Date: July 20, 2017

Cemetery Area – Structure Map T/PDCK



Map Legend

-  Paddock Producer
-  Paddock Upper Producer
-  Paddock Lower Producer
-  Blinebry Producer

SHL



COG - Horizontal Location
(Bone Yard "11" Fee #16H)

BHL



 Concho Acreage

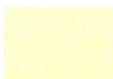
Cemetery Area – Cross Section Map

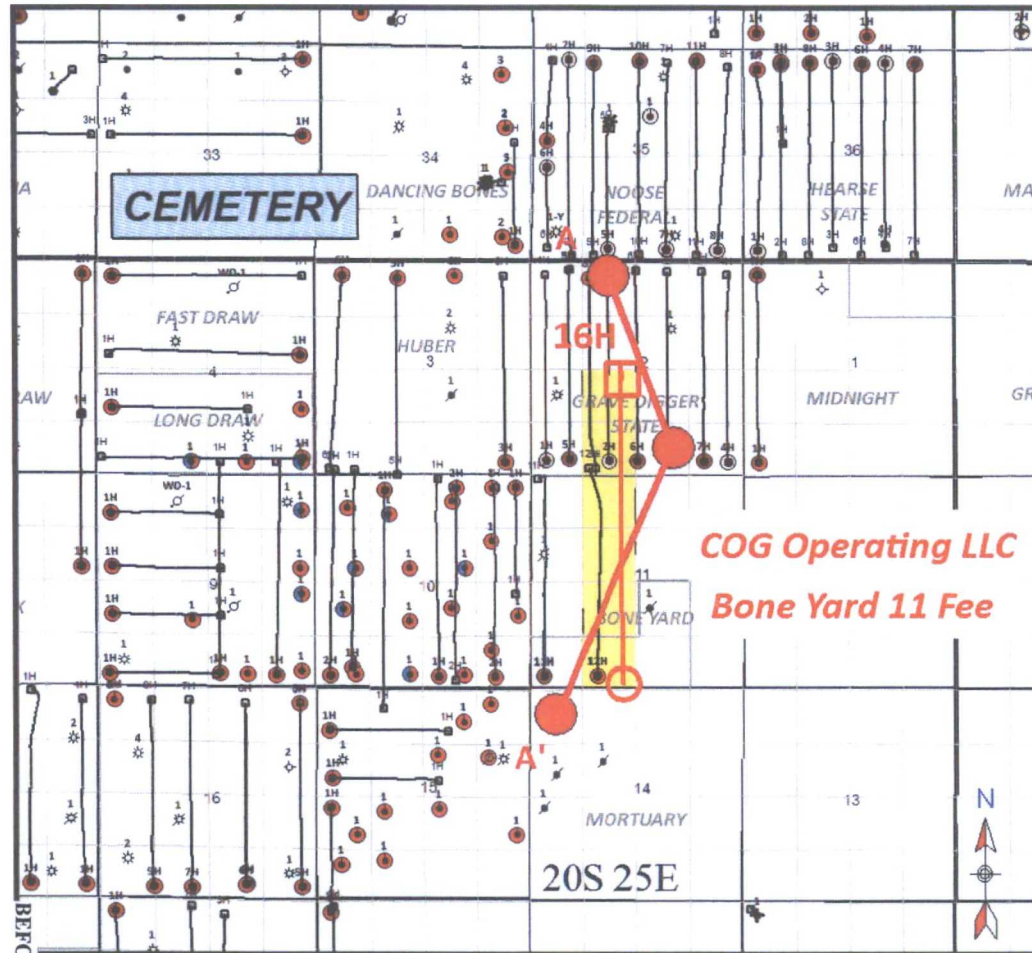
Map Legend

-  Paddock Producer
-  Paddock Upper Producer
-  Paddock Lower Producer
-  Blinebry Producer

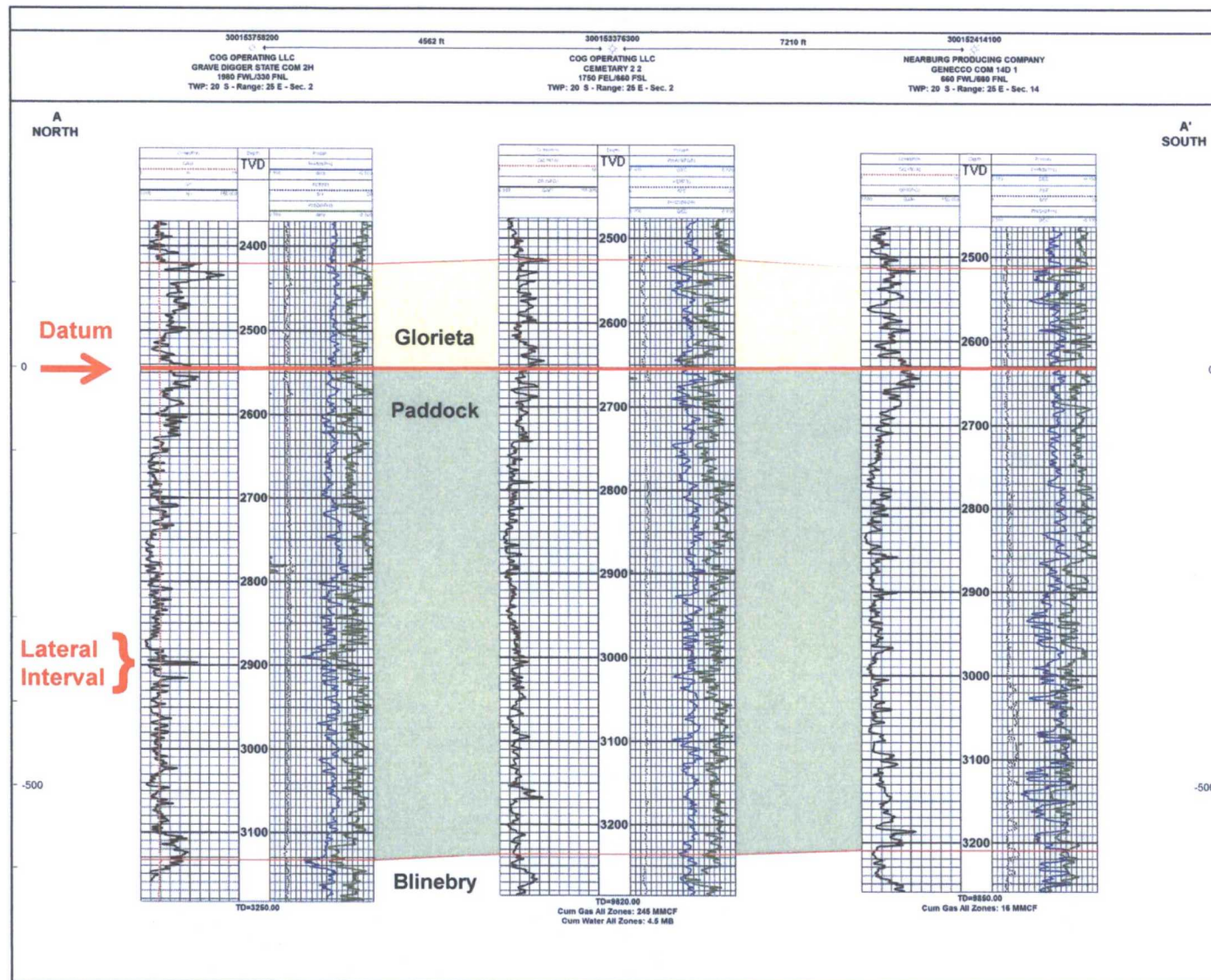
- SHL  COG - Horizontal Location (Bone Yard "11" Fee #16H)
- BHL 

-  Cross Section Line

-  Concho Acreage



Cemetery Area - Cross Section A – A'



BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 10
Submitted by: COG OPERATING, LLC
Hearing Date: July 20, 2017