

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240
Phone (505) 582-4141 Fax (505) 582-4755

DISTRICT II
811 S. First St., Artesia, NM 88210
Phone (505) 748-1225 Fax (505) 748-4755

DISTRICT III
1000 Rio Brazos Rd., Arden, NM 87410
Phone (505) 836-2176 Fax (505) 836-2176

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone (505) 476-5233 Fax (505) 476-5453

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to appropriate
District Office

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

API Number	Pool Code	Pool Name
Property Code	Property Name JENNA	Well Number 1H
OGRID No.	Operator Name SPECIAL ENERGY CORPORATION	Elevation 3909'

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	SOUTH/South line	Feet from the	East/West line	County
0	30	11 S	38 E		290	SOUTH	2205	EAST	LEA

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	SOUTH/South line	Feet from the	East/West line	County
0	31	11 S	38 E		330	SOUTH	2205	EAST	LEA
Dedicated Acres	Joint or Infill	Consolidation Code	Order No.						

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

N: 854758.3
E: 904175.9
(NAD83)

N: 849492.7
E: 904194.6
(NAD83)

N: 844214.4
E: 904287.2
(NAD83)

N: 854832.7
E: 904032.8
(NAD83)

N: 849554.3
E: 90473.2
(NAD83)

N: 844276.1
E: 905048.6
(NAD83)

SURFACE LOCATION
Lat - N 33.350313
Long - W 103.135291
NMSPC- N 848818.5
E 907285.0
(NAD-83)

BOTTOM HOLE LOCATION
Lat - N 33.315917
Long - W 103.135245
NMSPC- N 844580.3
E 907339.3
(NAD-83)

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

Signature _____ Date _____

Printed Name _____

Email Address _____

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.

Date Surveyed _____
Signature _____
Professional Surveyor
7977

Certification No. 7977
Dated 10/26/06

0' 500' 1000' 1500' 2000'
SCALE: 1" = 1000'
WD Num.: 32833

No pool code

OCD Case No. 15713
SPECIAL ENERGY CORP.
Jenna #1-H
Exhibit #1

R. K. PINSON & ASSOCIATES, LLC

10201 Buffalo Ridge Road
Edmond, Oklahoma 73025
(405) 359-6727
Fax (405) 359-6728
E-mail: KPinson@RKPinson.com

April 10, 2017

TO: Working Interest Owners – Listed on Attached Exhibit "A"

RE: Well proposal – Jenna 1-H
SHL: 2210' FEL & 250' FNL
BHL: 2210' FEL & 330' FSL
Section 31-11S-38E, N.M.P.M.
Lea County, NM

Dear Working Interest Owners:

Our client, Special Energy Corporation ("SEC"), P.O. Drawer 369, Stillwater, OK 74076, as Operator, does hereby propose the drilling of the Jenna 1-H well as a horizontal well at the location referenced above, or at a legal location as approved by the governing regulatory agency. SEC intends to test the San Andres formation at a TVD of approximately 5,250' and a MD of 10,000'. As shown on the enclosed AFE estimated dry hole costs are \$715,450 and total estimated completed costs are \$2,501,845.00.

Please indicate your participation election in the space provided below and return one copy of this letter to the undersigned. If you elect to participate please also return an executed AFE along with your geological well requirements.

Thank you for your consideration and if you have any questions please do not hesitate to contact me.

Yours truly,

M. Zane Pinson

M. Zane Pinson, CPL
Project Manager

_____ I/we elect to participate in the drilling of the Jenna 1-H.

_____ I/we elect to **NOT** participate in the drilling of the Jenna 1-H

Signed: _____

Printed Name: _____ Title: _____

Company Name: _____

Date: _____

OCD Case No. 15713
SPECIAL ENERGY CORP.
Jenna #1-H
Exhibit #2

Jenna 1-H Compulsory Pooling List
Lea County, New Mexico
April 26, 2017

1. Thomas R. Anderson
1425 Neeley Drive
Houston, TX 77055
2. Alice McCoy Anderson
9747 Edgepine Drive
Dallas, TX 75238
3. Lucy Anderson Rose
1469 Cattle Baron Court
Fairview, TX 75069
4. Known and unknown heirs of E. M.
Anderson, deceased
c/o Betty Anderson Haisten
18415 Blue Springs Road
Fayetteville, AR 72703
5. Gibson F. Anderson Jr.
135 Wyndham Drive
Portola Valley, CA 94028
6. Thomas R. Anderson
1425 Neeley Drive
Houston, TX 77055
7. Edward Graham Gallagher, Trustee U/W
of Elmer E. Batzell, deceased
810 American Security Building
730 15th Street Northwest
Washington, D. C. 20005
8. Charles V. Beasley and Edwina D.
Beasley
350 Mt Union Cutoff
El Dorado, AR 71730
9. Bergman Mineral Holdings, LLC
P.O. Box 813
Midland, TX 79702
10. Boldrick Family Properties, LP
c/o Boldrick Management Company, LLC
P.O. Box 10648
Midland, TX 79702
11. Charles E. Breslin
5409 Angels Breath Drive
Tuscon, AZ 85757
12. Known and unknown heirs of Betty Rae
Nelson Breslin, deceased
c/o Charles E. Breslin
5409 Angels Breath Drive
Tuscon, AZ 85757
13. Coby Burrow
131 Columbia Road 462
Magnolia, AR 71753
14. Known and unknown heirs of Jane P.
Burrow, deceased
c/o Coby Burrow
131 Columbia Road 462
Magnolia, AR 71753
15. Cirrus Minerals, LLC
c/o Fortis Minerals
1111 Bagby Street, Suite 2150
Houston, TX 77002
16. Pauline Deeme Couch
Address Unknown
17. Charles Peter Crouch, Jr.
Address Unknown
18. Pauline Couch Slack
Address Unknown
19. Terry A. Currie
413 Mamle Street
Hattiesburg, MS 39401
20. Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224
21. Blake Dodds
c/o Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224
22. Cassidy Dodds
c/o Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224

Jenna 1-H Compulsory Pooling List
Lea County, New Mexico
April 26, 2017

23. Known and unknown heirs of Nancy Dodds, deceased
c/o Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224
24. Evanil Oil Company
1000 Green Pond Road
Newfoundland, NJ 07435
25. Known and unknown heirs of Vance and Ray Beth Foster, deceased
c/o Janis Foster McCoy
P.O. Box 2463
Boerne, TX 78006
26. Goldston Oil Corporation
1819 Saint James Place
Houston, TX 77056
27. Nancy Zoe Herpin
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
28. Susan Mayfield 1997 Marital Trust, Jack H. Mayfield, Trustee
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
29. Iris Goldston Trust for Nancy Zoe Goldston Herpin
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
30. Lydia Mayfield Abbott 1999 Trust
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
31. Walter Goldston Mayfield
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
32. Jack H. Mayfield, III
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
33. Walter K. Graham
1504 Soplo Road Southeast
Albuquerque, NM 87123
34. Known and unknown heirs of Anna Ray Joyner, deceased
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
35. Robert Owen Joyner
6324 Station Mill Drive
Norcross, GA 30092
36. Robert Henry Joyner
19403 Dickson Park Drive
Spring, TX 77373
37. Tracy Knifong
518 Woodland Drive
Benton, AR 72015
38. Richard C. Lawton III
18415 SE 244th Street
Covington, WA 98042
39. J. Fred Jordan, Trustee of the R.G. Lawton Trust No. 5
Box 628
Magnolia, AR 71753
40. R.G. Lawton, as Trustee
Box 628
Magnolia, AR 71753
41. David C. Mapes, Jr.
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
42. Known and unknown heirs of Nell Joyner Mapes, deceased
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
43. David Mapes, Sr.
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677

Jenna 1-H Compulsory Pooling List
Lea County, New Mexico
April 26, 2017

44. Bank of America, as Agent for Mark Pittman Marshall
P.O. Box 2546
Fort Worth, TX 76113
45. Jack H. Mayfield Jr.
P.O. Box 570365
Houston, TX 77257
46. Known and unknown heirs of R.G. Lawton, deceased
c/o Elizabeth Lawton Mellon
2321 Northeast 35th Street
Lighthouse Point, FL 33064
47. Keely Meyer
772 Canterbury Road
Fayetteville, AR 72701
48. Juliet Lawton Miller
2426 20th Avenue North
Texas City, TX 77500
49. Morrie Nelson
360 Lake Manor Trace
Alpharetta, GA 30022
50. PEP II Management, LLC
330 Marshall Street, Suite 300
Shreveport, LA 71101
51. Thomas L. Pool, Trustee of the Thomas and Donda Pool Trust dated December 18, 2007, as amended
Via E. Miscia 19
66034 Lanciano, Italy
52. RAM Energy, LLC
5100 E. Skelly Drive, Suite 600
Tulsa, OK 74135
53. Ramsey Petroleum, L.P.
306 West Wall, Suite 1010
Midland, TX 79701
54. T.J. Raney & Sons
c/o Morgan Keegan Company
50 Front Street
Memphis, TX 38103
55. Ribble Investment Company, LLC
P.O. Box 9
Magnolia, AR 71754
56. Michael J. Sheridan
350 N. LaSalle Street, Suite 800
Chicago, IL 60610
57. Source Energy Partners, LLC, f/k/a Source Minerals, LLC
Attn: Brandon Benson
4311 Oak Lawn Avenue Suite 450
Dallas, TX 75219
58. Stephens Production Company
623 Garrison Ave
Fort Smith, AR 72901
59. Charles A. Stokes
34 Wilshire Drive
Delmar, NY 12054
60. Strata Land Acquisition, LP
100 Club Drive
Midland, TX 79701
61. Summer Resources, LLC
1605 Wheaton Terrace
Fort Smith, AR 72908
62. Robert D. Wallace and Sheila G. Wallace, Individually and as Trustees of the Sheila G. Wallace Revocable Trust dated the 15th day of July, 2008
3504 Thompkins
Bethany, OK 73009
63. The William K. Warren Foundation
P.O. Box 470372
Tulsa, OK 74147

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:

Lydia Mayfield Abbott 1999 Trust
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365

9590 9402 2074 6132 7431 64

2. A 7016 2710 0000 0157 8526

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *William Cochran*
☐ Agent
☐ Addressee

B. Received by (Printed Name)

William Cochran

C. Date of Delivery

4/17/17

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

3. Service Type

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

Restricted Delivery

(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:

Thomas R. Anderson
1425 Neeley Drive
Houston, TX 77055

9590 9402 2074 6132 7351 21

2. Article Number (Transfer from service label)

7016 2710 0000 0157 8359

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Thomas Anderson*
☐ Agent
☐ Addressee

B. Received by (Printed Name)

Thomas Anderson

C. Date of Delivery

4-19-17

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

3. Service Type

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

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:

Unknown and unknown heirs of E. M. Anderson, deceased
c/o Betty Anderson Maisten
9415 Blue Springs Road
 Fayetteville, AR 72703

9590 9402 2074 6132 7431 88

7016 2710 0000 0157 8502

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *BAH*
☐ Agent
☐ Addressee

B. Received by (Printed Name)

BAH

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

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:

Thomas R. Anderson
1425 Neeley Drive
Houston, TX 77055

9590 9402 2074 6132 7431 26

2. Article Number (Transfer from service label)

7016 2710 0000 0157 8564

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Thomas Anderson*
☐ Agent
☐ Addressee

B. Received by (Printed Name)

Thomas Anderson

C. Date of Delivery

4-19-17

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

3. Service Type

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

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.

Article Addressed to:

res V. Beasley and Edwina D. Beasley
Mt Union Cutoff
orado, AR 71730

9590 9402 2074 6132 7350 22

Article Number (Transfer from service label)

7016 2710 0000 0157 8625

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name)

Dawn Beasley

C. Date of Delivery

4-13-17

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

R9

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☐ 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:

Coby Burrow
131 Columbia Road 462
Magnolia, AR 71753

9590 9402 2074 6132 7350 11

Article Number (Transfer from service label)

7016 2710 0000 0157 8458

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name)

Coby Burrow

C. Date of Delivery

4-13-2017

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☐ 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.

Article Addressed to:

Bergman Mineral Holdings, LLC
P.O. Box 813
Midland, TX 79702

9590 9402 2074 6132 7351 14

7016 2710 0000 0157 8335

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name)

Brett Bergman

C. Date of Delivery

4-28-17

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

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

Known and unknown heirs of
Lane P. Burrow, deceased
c/o Coby Burrow
131 Columbia Road 462
Magnolia, AR 71753

9590 9402 2074 6132 7350 40

Article Number (Transfer from service label)

7016 2710 0000 0157 8489

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name)

Coby Burrow

C. Date of Delivery

APR 13 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☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

ENDE

Comp

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.

Article Addressed to:

rus Minerals, LLC
J Marshall Street, Suite 1200
eveport, LA 71101

9590 9402 2074 6132 7431 71

Article Number (Transfer from service label)

7016 2710 0000 0157 8519

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

Domestic Return Receipt

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- 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.

Article Addressed to:

Cirrus Minerals, LLC
c/o Fortis Minerals
1111 Bagby Street, Suite 2150
Houston, TX 77002

9590 9402 1604 5362 4801 51

Article Number (Transfer from service label)
7016 1970 0000 7217 4965

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

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

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:

Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224

9590 9402 2074 6132 7431 19

2. Article Number (Transfer from service label)

7016 2710 0000 0157 8571

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:

Evanil Oil Company
1000 Green Pond Road
Newfoundland, NJ 07435

9590 9402 2074 6132 7430 96

2. Article Number (Transfer from service label)

7016 2710 0000 0157 8601

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X  ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

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

COMPLETE THIS SECTION

A. Signature

X  ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
1. Complete items 1, 2, and 3. 2. Print your name and address on the reverse so that we can return the card to you. 3. Attach this card to the back of the mailpiece, or on the front if space permits. 4. Article Addressed to: Raney Forbes 5510 Bryant Place Springdale, AR 72764	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) EC Forbes C. Date of Delivery 4-13-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	1. Complete items 1, 2, and 3. 2. Print your name and address on the reverse so that we can return the card to you. 3. Attach this card to the back of the mailpiece, or on the front if space permits. 4. Article Addressed to: Goldston Oil Corporation 1819 Saint James Place Houston, TX 77056	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) H. Killian C. Date of Delivery 4/17/17 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 ☐ 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	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery 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	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery 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	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery 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
9590 9402 2074 6132 7432 63 7016 2710 0000 0157 8632		9590 9402 2074 6132 7350 91 7016 2710 0000 0157 8373	
S Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt		PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
1. Complete items 1, 2, and 3. 2. Print your name and address on the reverse so that we can return the card to you. 3. Attach this card to the back of the mailpiece, or on the front if space permits. 4. Article Addressed to: Known and unknown heirs of Vance and Ray Beth Foster, deceased c/o Janis Foster McCoy P.O. Box 2463 Boerne, TX 78006	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) BA Halsten C. Date of Delivery 4-13-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	1. Complete items 1, 2, and 3. 2. Print your name and address on the reverse so that we can return the card to you. 3. Attach this card to the back of the mailpiece, or on the front if space permits. 4. Article Addressed to: Betty Anderson Halsten 18415 Blue Springs Road Fayetteville, AR 72703	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) BA Halsten C. Date of Delivery 4-13-17 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 ☐ 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	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery 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	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery 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	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery 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
9590 9402 2074 6132 7351 07 7016 2710 0000 0157 8410		9590 9402 2074 6132 7350 53 7016 2710 0000 0157 8472	
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt		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.

Article Addressed to:

nk of America, as Agent for Mark Pittman Marshall
J. Box 2546
rt Worth, TX 76113

9590 9402 2074 6132 7429 52

7016 2710 0000 0157 8809

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X EDS

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

APR 13 2017

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

APR 13 2017

3. Service Type

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

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.

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

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

1. Article Addressed to:

Jack H. Mayfield, III
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365

9590 9402 2074 6132 7431 02

7016 2710 0000 0157 8588

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X William Cochran

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

4/17/17

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

3. Service Type

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

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

Domestic Return Receipt

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.

Article Addressed to:

Jack H. Mayfield Jr.
P.O. Box 570365
Houston, TX 77257

9590 9402 2074 6132 7429 38

7016 2710 0000 0157 8823

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X William Cochran

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

4/17/17

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

3. Service Type

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

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.

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

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

1. Article Addressed to:

Susan Mayfield 1997 Marital Trust, Jack H. Mayfield,
Trustee
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365

9590 9402 2074 6132 7350 60

7016 2710 0000 0157 8465

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X William Cochran

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

4/17/17

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

3. Service Type

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

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

Domestic Return Receipt

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.

Article Addressed to:

Iary Gall Hentzen
3571 Via Val Verde
iguna Niguel, CA 92677

9590 9402 2074 6132 7432 56

7016 2710 0000 0157 8649

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Maya*
☐ 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™

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 Goldston Trust for Nancy Zoe Goldston Herpin
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365

9590 9402 2074 6132 7431 95

2. Article Number (Transfer from service label)

7016 2710 0000 0157 8496

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *William Cochran*
☐ 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™

Mail 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.

Article Addressed to:

Nancy Zoe Herpin
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365

9590 9402 2074 6132 7539 34

Article Number (Transfer from service label)

7016 2710 0000 0157 8434

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *William Cochran*
☐ 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™

Mail 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:

Known and unknown heirs of R.G. Lawton, deceased
c/o Elizabeth Lawton Mellon
2321 Northeast 35th Street
Highhouse Point, FL 33064

9590 9402 2074 6132 7428 91

7016 2710 0000 0157 8861

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Elizabeth Mellon*
☐ 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™

Delivery Restricted Delivery

Insured Mail 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.

Article Addressed to:

after Goldston Mayfield
Goldston Oil Corporation, Nominee
Box 570365
Houston, TX 77257-0365

9590 9402 2074 6132 7431 33
7016 2710 0000 0157 8557
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *William Cochran* ☐ Agent ☐ Addressee
B. Received by (Printed Name) *William Cochran* C. Date of Delivery *4/17/17*

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
(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:

Juliet Lawton Miller
2426 20th Avenue North
Texas City, TX 77500

9590 9402 2074 6132 7432 32
7016 2710 0000 0157 8663
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Juliet Miller* ☐ Agent ☐ Addressee
B. Received by (Printed Name) C. Date of Delivery

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

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

Article Addressed to:

Elizabeth Lawton Mellon, a/k/a, Elizabeth T. Mellon
21 Northeast 35th Street
Gothouse Point, FL 33064

9590 9402 2074 6132 7429 14
7016 2710 0000 0157 8847
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Elizabeth Mellon* ☐ Agent ☐ Addressee
B. Received by (Printed Name) *Elizabeth Mellon* C. Date of Delivery *4/17*

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
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:

PEP II Management, LLC
c/o Fortis Minerals
1111 Bagby Street, Suite 2150
Houston, TX 77002

9590 9402 1604 5362 4801 68
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Marta Rodriguez* ☐ Agent ☐ Addressee
B. Received by (Printed Name) *Marta Rodriguez* C. Date of Delivery *4/19/17*

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
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.

Article Addressed to:

Oil Management, LLC
 Marshall Street, Suite 300
 Aveport, LA 71101

9590 9402 2074 6132 7430 65

Article Number (Transfer from service label)

7016 2710 0000 0157 8694

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Tiffany Paine*☐ Agent☐ Addressee

B. Received by (Printed Name)

Tiffany Paine

C. Date of Delivery

4/12/17

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

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

I.J. Raney & Sons
 c/o Morgan Keegan Company
 50 Front Street
 Memphis, TX 38103

9590 9402 2074 6132 7429 76

2. Article Number (Transfer from service label)

7016 2710 0000 0157 8786

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Thomas Cox*☐ Agent☐ Addressee

B. Received by (Printed Name)

Thomas Cox

C. Date of Delivery

4/13/17

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

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

Article Addressed to:

RAM Energy, LLC
 5100 E. Skelly Drive, Suite 600
 Tulsa, OK 74135

9590 9402 2074 6132 7430 34

Article Number (Transfer from service label)

7016 2710 0000 0157 8724

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Amanda Gray*☐ Agent☐ Addressee

B. Received by (Printed Name)

Amanda Gray

C. Date of Delivery

4/14/17

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

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

Ribble Investment Company, LLC
 P.O. Box 9
 Vagnolia, AR 71754

9590 9402 2074 6132 7429 21

2. Article Number (Transfer from service label)

7016 2710 0000 0157 8830

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Amanda Ballant*☐ Agent☐ Addressee

B. Received by (Printed Name)

Amanda Ballant

C. Date of Delivery

4/14/17

D. Is delivery address different from item 1?

☐ Yes

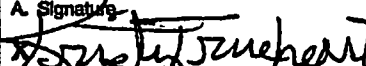
If YES, enter delivery address below:

☐ No

3. Service Type

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON 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. Article Addressed to: ata Land Acquisition, LP 30 Club Drive Midland, TX 79701	A. Signature X  ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	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: Kristy Trueheart 22114 Glen Arden Lane Katy, TX 77450	A. Signature X  ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery Kristy Trueheart 04/18/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3810 Katy Hockley Rd Katy, TX 77493
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 ☐ Registered Mail Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	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 ☐ Registered Mail Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	9590 9402 2074 6132 7430 27 7016 2710 0000 0157 8731	9590 9402 2074 6132 7430 27 7016 2710 0000 0157 8731
S Form 3811, July 2015 PSN 7530-02-000-8053	Domestic Return Receipt	PS Form 3811, July 2015 PSN 7530-02-000-8053	Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON 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. Article Addressed to: Summer Resources, LLC 1605 Wheaton Terrace Fort Smith, AR 72908	A. Signature X  ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery Sheila Wallace 4-13-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	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. Wallace and Sheila G. Wallace, Individually and as Trustees of the Sheila G. Wallace Revocable Trust dated the 15th day of July, 2008 3504 Thompkins Bethany, OK 73009	A. Signature X  ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery Sheila Wallace APR 21-2017 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 ☐ Registered Mail Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	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 ☐ Registered Mail Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	9590 9402 2074 6132 7429 90 7016 2710 0000 0157 8762	9590 9402 2074 6132 7429 90 7016 2710 0000 0157 8762
S Form 3811, July 2015 PSN 7530-02-000-8053	Domestic Return Receipt	PS Form 3811, July 2015 PSN 7530-02-000-8053	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:

Lucy Anderson Rose
1469 Cattle Baron Court
Fairview, TX 75069

9590 9402 2074 6132 7350 84

2. Article Number (Transfer from service label)

7016 2710 0000 0157 8441

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Lucy Rose
B. Received by (Printed Name)
Lucy Rose
C. Date of Delivery
4/19/17

- ☐ Agent
☐ Addressee

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

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:

Stephens Production Company
523 Garrison Ave
Fort Smith, AR 72901

9590 9402 2074 6132 7428 84

7016 2710 0000 0157 8878

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Haite Brown
B. Received by (Printed Name)
Haite Brown
C. Date of Delivery
4/13/17

- ☐ Agent
☐ Addressee

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 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:

Source energy Partners, LLC
ATTN: Brandon Benson
4311 Oak Lawn Avenue, Suite 450
Dallas, Texas 75219

9590 9402 1604 5362 4801 44

7016 2070 0000 9329 8745

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Brandon Benson
B. Received by (Printed Name)
Brandon Benson
C. Date of Delivery
4/11/17

- ☒ Agent
☐ Addressee

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

- ☐ 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

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 A. Stokes
34 Wilshire Drive
Delmar, NY 12054

9590 9402 2074 6132 7428 60

2. Article Number (Transfer from service label)

7016 2710 0000 0157 8892

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

M. Stokes
B. Received by (Printed Name)
M. Stokes
C. Date of Delivery
4/11/17

- ☐ Agent
☐ Addressee

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

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.

Article Addressed to:

William K. Warren Foundation

P. Box 470372

Isa, OK 74147

9590 9402 2074 6132 7429 69

Article Number (Transfer from service label)

7016 2710 0000 0157 8793

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

ALLIANCE

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™

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

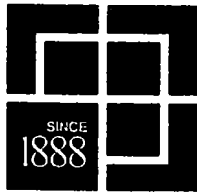
☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

☐ Restricted Delivery

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

Domestic Return Receipt



HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE, NEW MEXICO 87504

505-982-4554 (FAX) 505-982-8623

WRITER:

Gary W. Larson,
Partner

glarson@hinklelawfirm.com

May 17, 2017

VIA CERTIFIED MAIL

Alice McCoy Anderson
9747 Edgepine Drive
Dallas, TX 75238

Re: Special Energy Corporation NMOCD Application

Dear Ms. Anderson:

Enclosed is a copy of an application for approval of a 160-acre, non-standard spacing and proration unit and compulsory pooling that Special Energy Corporation ("Special Energy") has filed with the New Mexico Oil Conservation Division ("the Division"). The proposed non-standard spacing and proration unit is comprised of the W2 E/2 of Section 31, Township 11 South, Range 38 East, NMPM, Lea County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, June 8, 2017 in Porter Hall at the Division's offices located at 1220 South St. 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 Special Energy's application, you may appear at the hearing and present testimony. If you do not appear at that time and become a party of record, you will be precluded from contesting the matter at a later date.

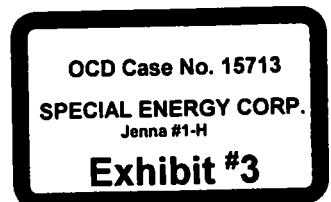
A party appearing in a Division case is required by the Division's Rules to file a Pre-Hearing Statement, which in this matter must be filed no later than Thursday, June 1, 2017. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: the name of the party and the party's attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate amount of time the party will need to present the party's case; and an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to me.

Thank you for your attention to this matter.

Very truly yours,

Gary W. Larson

GWL:sm
Enclosure



PO BOX 10
ROSWELL, NEW MEXICO 88202
575-622-6510
(FAX) 575-623-9332

PO BOX 1720
ARTESIA, NEW MEXICO 88210
575-622-6510
(FAX) 575-746-6316

PO BOX 2068
SANTA FE, NEW MEXICO 87504
505-982-4554
(FAX) 505-982-8623

Jenna 1-H Project Area Pooled List
Lea County, New Mexico
April 26, 2017

1. Alice McCoy Anderson
9747 Edgepine Drive
Dallas, TX 75238
2. Amber Smith
307 Baethge Boulevard
Fredricksburg, TX 78624
3. Bank of America, as Agent for Mark
Pittman Marshall
P.O. Box 2546
Fort Worth, TX 76113
4. Bergman Mineral Holdings, LLC
P.O. Box 813
Midland, TX 79702
5. Betty Anderson Haisten
18415 Blue Springs Road
Fayetteville, AR 72703
6. Betty L. Pagan
5875 Friars Road, #4316
San Diego, CA 92110
7. Blake Dodds
c/o Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224
8. Boldrick Family Properties, LP
c/o Boldrick Management Company, LLC
P.O. Box 10648
Midland, TX 79702
9. Bradford A. Stevenson
P.O. Box 2646
Overgaard, AZ 85933
10. C.E.S. Bellows, IV
6 Ashlin Drive
Midland, TX 79705
11. Cassidy Dodds
c/o Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224
12. Charles A. Stokes
34 Wilshire Drive
Delmar, NY 12054
13. Charles E. Breslin
5409 Angels Breath Drive
Tuscon, AZ 85757
14. Charles Peter Crouch, Jr.
Address Unknown
15. Charles V. Beasley and Edwina D.
Beasley
350 Mt Union Cutoff
El Dorado, AR 71730
16. Cirrus Minerals, LLC
c/o Fortis Minerals
1111 Bagby Street, Suite 2150
Houston, TX 77002
17. Coby Burrow
131 Columbia Road 462
Magnolia, AR 71753
18. David C. Mapes, Jr.
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
19. David Mapes, Sr.
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
20. Dean Kinsolving, d/b/a KINCO
P.O. Box 325
Tatum, NM 88267
21. Dorothy Looney
2606 Briargrove, Apartment 28
San Angelo, TX 76904
22. Edward Graham Gallagher, Trustee U/W
of Elmer E. Batzell, deceased
810 American Security Building
730 15th Street Northwest
Washington, D. C. 20005
23. Evanil Oil Company
1000 Green Pond Road
Newfoundland, NJ 07435
24. Gibson F. Anderson Jr.
135 Wyndham Drive
Portola Valley, CA 94028

Jenna 1-H Project Area Pooled List
Lea County, New Mexico
April 26, 2017

25. Goldston Oil Corporation
1819 Saint James Place
Houston, TX 77056
26. Harriet Cutler Bellows Crockard
6 Ashlin Drive
Midland, TX 79705
27. Helen Elizabeth Bellows
6 Ashlin Drive
Midland, TX 79705
28. Hugh Robert Frenzel
7010 Lake Louise Drive
Arlington, TX 76016
29. Iris Goldston Trust for Nancy Zoe
Goldston Herpin
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
30. J. Fred Jordan, Trustee of the R.G.
Lawton Trust No. 5
Box 628
Magnolia, AR 71753
31. Jack H. Mayfield Jr.
P.O. Box 570365
Houston, TX 77257
32. Jack H. Mayfield, III
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
33. Janie D. Corley, as Trustee of the Janie D.
Corley Trust Declaration,
dated September 6, 2013
P.O. Box 914
Belen, NM 87002
34. JBC Interests, Ltd.
303 W. Wall Street, Suite 602
Midland, TX 79701
35. Jeannie McCraw
1104 West Avenue I
Lovington, NM 88260
36. Jolene Wojinski
23910 West Interstate 10, Apt. 2104
San Antonio, TX 78257
37. Juliet Lawton Miller
2426 20th Avenue North
Texas City, TX 77500
38. Keely Meyer
772 Canterbury Road
Fayetteville, AR 72701
39. Kent H. Wallace & Suzan Jill Wallace, Co-
Trustees of the 2008 Kent H. Wallace
Trust Agreement, dated October 10,
2008
2447 Hidden River Lane
Franklin, TN 37069
40. Kevin H. Tripp & Linda K. Tripp, as Co-
Trustees of The Kevin H. Tripp and Linda
K. Tripp Family Trust, dated November
1, 2005
9290 E. Thompson Peak Parkway
Scottsdale, AZ 85255
41. Known and unknown heirs of Anna Ray
Joyner, deceased
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
42. Known and unknown heirs of Betty Rae
Nelson Breslin, deceased
c/o Charles E. Breslin
5409 Angels Breath Drive
Tuscon, AZ 85757
43. Known and unknown heirs of E. M.
Anderson, deceased
c/o Betty Anderson Haisten
18415 Blue Springs Road
Fayetteville, AR 72703
44. Known and unknown heirs of Jane P.
Burrow, deceased
c/o Coby Burrow
131 Columbia Road 462
Magnolia, AR 71753

Jenna 1-H Project Area Pooled List
Lea County, New Mexico
April 26, 2017

45. Known and unknown heirs of Nancy Dodds, deceased
c/o Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224
46. Known and unknown heirs of Nell Joyner Mapes, deceased
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
47. Known and unknown heirs of R.G. Lawton, deceased
c/o Elizabeth Lawton Mellon
2321 Northeast 35th Street
Lighthouse Point, FL 33064
48. Known and unknown heirs of Vance and Ray Beth Foster, deceased
c/o Janis Foster McCoy
P.O. Box 2463
Boerne, TX 78006
49. Kristy Trueheart
3810 Katy Hockley Road
Katy, TX 77493
50. Larry Burrow
131 Columbia Road 462
Magnolia, AR 71753
51. Leslie Diane Beckmann
2017 Diamond Ridge Drive
Carrollton, TX 75010
52. Lucy Anderson Rose
1469 Cattle Baron Court
Fairview, TX 75069
53. Lydia Mayfield Abbott 1999 Trust
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
54. Margaret Wallace Eaton
7921 NW 38th Street
Bethany, OK 73008
55. Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224
56. Martha Castillo
406 Spindrift Circle
Richmond, TX 77469
57. Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
58. Maurine M. Massie
4110 Larchmont
Wichita Falls, TX 76302
59. Michael J. Sheridan
350 N. LaSalle Street, Suite 800
Chicago, IL 60610
60. Morrie Nelson
360 Lake Manor Trace
Alpharetta, GA 30022
61. Nancy Zoe Herpin
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
62. Natasha Dees
P.O. Box 3644
Killeen, TX 76549
63. Pamela Anne Wallace Pruitt
1501 South 3rd Street
Midlothian, TX 76065
64. Pauline Couch Slack
Address Unknown
65. Pauline Deeme Couch
Address Unknown
66. PEP II Management, LLC
330 Marshall Street, Suite 300
Shreveport, LA 71101
67. R.G. Lawton, as Trustee
Box 628
Magnolia, AR 71753
68. RAM Energy, LLC
5100 E. Skelly Drive, Suite 600
Tulsa, OK 74135
69. Ramsey Petroleum, L.P.
306 West Wall, Suite 1010
Midland, TX 79701

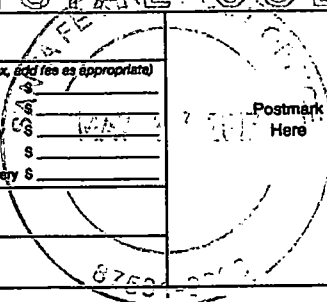
Jenna 1-H Project Area Pooled List
Lea County, New Mexico
April 26, 2017

70. Raney Forbes
5510 Bryant Place
Springdale, AR 72764
71. RCPTX, Ltd.
401 Congress Avenue, Suite 1510
Austin, TX 78701
72. Ribble Investment Company, LLC
P.O. Box 9
Magnolia, AR 71754
73. Richard C. Lawton III
18415 SE 244th Street
Covington, WA 98042
74. Robert D. Wallace and Sheila G. Wallace,
Individually and as Trustees of the Sheila
G. Wallace Revocable Trust dated the
15th day of July, 2008
3504 Thompkins
Bethany, OK 73009
75. Robert Henry Joyner
19403 Dickson Park Drive
Spring, TX 77373
76. Robert Owen Joyner
6324 Station Mill Drive
Norcross, GA 30092
77. Ronald Alan Dunlap
5801 Pleasant Wood Trail
Arlington, TX 76016
78. Ronald Gene Stevenson and Kathy
Stevenson
P.O. Box 123
Grants, NM 87020
79. Source Energy Partners, LLC, f/k/a
Source Minerals, LLC
Attn: Brandon Benson
4311 Oak Lawn Avenue Suite 450
Dallas, TX 75219
80. Stephens Production Company
623 Garrison Ave
Fort Smith, AR 72901
81. Steven Chase, Trustee of the Chase
Family Trust
1303 West Kansas Avenue
Midland, TX 79701
82. Strata Land Acquisition, LP
100 Club Drive
Midland, TX 79701
83. Summer Resources, LLC
1605 Wheaton Terrace
Fort Smith, AR 72908
84. Susan Mayfield 1997 Marital Trust, Jack
H. Mayfield, Trustee
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
85. T.J. Raney & Sons
c/o Morgan Keegan Company
50 Front Street
Memphis, TX 38103
86. Terry A. Currie
413 Mamie Street
Hattiesburg, MS 39401
87. The William K. Warren Foundation
P.O. Box 470372
Tulsa, OK 74147
88. Thomas L. Pool, Trustee of the Thomas
and Donda Pool Trust dated December
18, 2007, as amended
Via E. Miscia 19
66034 Lanciano, Italy
89. Thomas R. Anderson
1425 Neeley Drive
Houston, TX 77055
90. Tracy Knifong
518 Woodland Drive
Benton, AR 72015
91. W.C. Hubbard
303 W. Wall Street, Suite 602
Midland, TX 79701

**Jenna 1-H Project Area Pooled List
Lea County, New Mexico
April 26, 2017**

- 92. W.C. Partee, Jr.
P.O. Box 667
Magnolia, AR 71754**
- 93. Walter Goldston Mayfield
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365**
- 94. Walter K. Graham
1504 Soplo Road Southeast
Albuquerque, NM 87123**
- 95. William Dee Wallace
3504 N. Thompkins
Bethany, OK 73008**
- 96. William Gerald Dean
P.O. Box 430
Capitan, NM 88316**

7017 1000 0001 0525 8722

U.S. Postal Service CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee \$	
Extra Services & Fees (check box, add 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., or PO Box No. City, State, ZIP+4®	
Alice McCoy Anderson 9747 Edgepine Drive Dallas, TX 75238	
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: Amber Smith 307 Baethge Boulevard Fredricksburg, TX 78624 9590 9402 2691 6351 8891 01 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8739	COMPLETE THIS SECTION ON DELIVERY A. Signature X <i>Marion J. Bickel</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) MARION J BICKEL C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery
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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: Bank of America, as Agent for Mark Pittman Marshall P.O. Box 2546 Fort Worth, TX 76113 9590 9402 2874 7069 5545 97 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8647	COMPLETE THIS SECTION ON DELIVERY A. Signature X <i>ED. S. Wom</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) MAY 23 2017 C. Date of Delivery MAY 23 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 ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery
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PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Bergman Mineral Holdings, LLC P.O. Box 813 Midland, TX 79702 9590 9402 2691 6351 8884 94 2. Article Number (Transfer from service label) 7017 1000 0001 0525 9354	A. Signature X  ☐ Agent ☐ Addressee B. Received by (Printed Name) Beth Bergman C. Date of Delivery 5/22/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ 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
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

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☒ 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: Betty Anderson Haisten 18415 Blue Springs Road Fayetteville, AR 72703 9590 9402 2691 6351 8890 95 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8746	A. Signature X  ☐ Agent ☐ Addressee B. Received by (Printed Name) Betty A Haisten C. Date of Delivery 5-24-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Betty L. Pagan 5875 Friars Road, #4316 San Diego, CA 92110 9590 9402 2691 6351 8890 88 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8753	A. Signature X  ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ 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
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Blake Dodds c/o Mark Dodds P.O. Box 2801 Crested Butte, CO 81224 9590 9402 2691 6351 8890 71 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8760	A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No MAY 22 2011 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail®</td> <td></td> </tr> </table> ☐ Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Insured Mail®	
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☐ Adult Signature Restricted Delivery	☐ Registered Mail™														
☒ Certified Mail®	☐ Registered Mail Restricted Delivery														
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise														
☐ Collect on Delivery	☐ Signature Confirmation™														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Insured Mail®															

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☒ 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: Boldrick Family Properties, LP c/o Boldrick Management Co., LLC P.O. Box 10648 Midland, TX 79702 9590 9402 2874 7069 5545 42 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8692	A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail®</td> <td></td> </tr> </table> ☐ Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Insured Mail®	
☐ Adult Signature	☐ Priority Mail Express®														
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☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise														
☐ Collect on Delivery	☐ Signature Confirmation™														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Insured Mail®															

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

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☒ 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: Bradford A. Stevenson P.O. Box 2646 Overgaard, AZ 85933 9590 9402 2691 6351 8890 64 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8777	A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail®</td> <td></td> </tr> </table> ☐ Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Insured Mail®	
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☐ Insured Mail®															

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

7017 1000 0001 0525 8784

U.S. Postal Service CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee \$ _____	Postmark (Here)
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 C.E.S. Bellows, IV 6 Ashlin Drive Midland, TX 79705	
Street and Apt. No., or PO Box No. _____	
City, State, ZIP+4® _____	
PS Form 3800, April 2015 PSN 7530-02-000-90-07 See Reverse for Instructions	

SENDER COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
- Complete items 1, 2, and 3. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☒ Agent ☒ Addressee
1. Article Addressed to: Cassidy Dodds c/o Mark Dodds P.O. Box 2801 Crested Butte, CO 81224	B. Received by (Printed Name) Mark Dodds
2. Article Number (Transfer from service label) 9590 9402 2691 6351 8890 40	C. Date of Delivery MAY 22 2017
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	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt	

SENDER COMPLETE THIS SECTION	COMPLETE 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: Charles A. Stokes 34 W. Shire Drive Delmar, NY 12054	B. Received by (Printed Name) Charles A. Stokes
2. Article Number (Transfer from service label) 9590 9402 2691 6351 8890 33	C. Date of Delivery 5-22-17
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	☐ 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	

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☒ 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: Coby Burrow 131 Columbia Road 462 Magnolia, AR 71753 9590 9402 2691 6351 8890 02 2. Article Number. (Transfer from service label) 7017 1000 0001 0525 8838 m, 3811, July 2015 PSN 7530-02-000-9053	A. Signature <i>X Coby Burrow</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>Coby Burrow</i> C. Date of Delivery <i>July 2015</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery		

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☒ 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 Mapes, Jr. c/o Mary Gail Hentzen 29571 Via Val Verde Laguna Niguel, CA 92677 9590 9402 2691 6351 8889 99 2. Article Number. (Transfer from service label) 7017 1000 0001 0525 8845 PS Form 3811, July 2015 PSN 7530-02-000-9053	A. Signature <i>X Mary Gail Hentzen</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>Mary Gail Hentzen</i> C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery		

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☒ 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 Mapes, Sr. c/o Mary Gail Hentzen 29571 Via Val Verde Laguna Niguel, CA 92677 9590 9402 2691 6351 8889 82 2. Article Number. (Transfer from service label) 7017 1000 0001 0525 8852 PS Form 3811, July 2015 PSN 7530-02-000-9053	A. Signature <i>X Mary Gail Hentzen</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>Mary Gail Hentzen</i> C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery
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7017 1000 0001 0525 8814

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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 Charles E. Breslin
 5409 Angels Breath Drive
 Street and Apt. No., or PO Box Tuscon, AZ 85757
 City, State, ZIP+4®

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

SENDER: CO

- 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 V. Beasley and Edwin O. Beasley
 350 Mt. Union Cutoff
 El Dorado, AR 71730

9590 9402 2691 6351 8890 19

7017 1000 0001 0525 8821

A. Signature *[Signature]* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *Dawn Beasley* C. Date of Delivery *5-27-17*

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

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

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

Domestic Return Receipt

SENDER: COMPLETE

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

1. Article Addressed to:

Cirrus Minerals, LLC
 c/o Fortis Minerals
 1111 Bagby Street, Suite 2150
 Houston, TX 77002

9590 9402 2874 7069 5546 41

7017 1000 0001 0525 8593

A. Signature *[Signature]* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *Maria Rodriguez* C. Date of Delivery *09/20/17*

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

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

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Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete Items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Evanil Oil Company 1000 Green Pond Road Newfoundland, NJ 07435 9590 9402 2874 7069 5546 34 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8609	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery JUDITH BROWN 5/24/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Mail Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

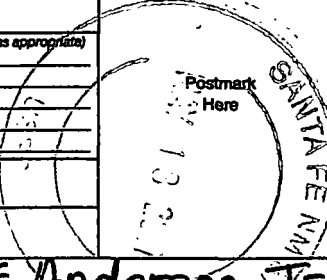
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7017 1000 0001 0525 8975

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

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

OFFICIAL USE

Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) <table style="width: 100%;"> <tr> <td>☐ Return Receipt (hardcopy)</td> <td>\$</td> </tr> <tr> <td>☐ Return Receipt (electronic)</td> <td>\$</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>\$</td> </tr> <tr> <td>☐ Adult Signature Required</td> <td>\$</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>\$</td> </tr> </table> Postage \$ Total Postage and Fees \$ Sent To <i>Gibson F Anderson Jr.</i> Street and Apt. No., or PO Box No. <i>135 Wyndham Drive</i> City, State, ZIP+4® <i>Portola Valley CA 94028</i>	☐ Return Receipt (hardcopy)	\$	☐ Return Receipt (electronic)	\$	☐ Certified Mail Restricted Delivery	\$	☐ Adult Signature Required	\$	☐ Adult Signature Restricted Delivery	\$	 Postmark Here
☐ Return Receipt (hardcopy)	\$										
☐ Return Receipt (electronic)	\$										
☐ Certified Mail Restricted Delivery	\$										
☐ Adult Signature Required	\$										
☐ Adult Signature Restricted Delivery	\$										

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete Items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Goldston Oil Corporation 1819 Saint James Place Houston, TX 77056 9590 9402 2874 7069 5546 10 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8623	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery T. Jones 5/22/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Mail Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Dean Kinsolving, d/b/a KINCO P.O. Box 325 Tatum, NM 88267 9590 9402 2874 7069 5545 35 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8715	A. Signature X <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Don Kinsolving</i> C. Date of Delivery <i>5/22/10</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
3. Service Type <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Delivery Restricted Delivery ☐ Insured Mail Restricted Delivery (over \$500) </td> <td style="width: 50%; vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>		☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Delivery Restricted Delivery ☐ 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
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Delivery Restricted Delivery ☐ 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		

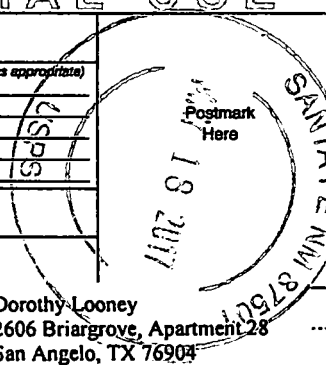
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7017 1000 0001 0525 8968

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

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

OFFICIAL USE

Certified Mail Fee \$ Extra Services & Fees (check box, add 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 <u>Dorothy Looney</u> Street and Apt. No., or PO Box No. <u>2606 Briargrove, Apartment 28</u> City, State, ZIP+4® <u>San Angelo, TX 76904</u>	 Postmark Here
--	---

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Edward Graham Gallagher, Trustee U/W of Elmer E. Batzell 810 American Security Building 730 15th Street Northwest Washington, D. C. 20005 9590 9402 2874 7069 5547 40 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9466	A. Signature X <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Kevin Baird</i> C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
3. Service Type <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail </td> <td style="width: 50%; vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>		☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

7017 1000 0001 0525 8982

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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OFFICIAL USE

Certified Mail Fee

\$

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

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

Postage

\$

Total Postage and Fees

\$

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Harriet Cutler Bellows Crookard
 6 Ashlin Drive
 Midland, TX 79705

Postmark
 Here

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

See Reverse for Instructions

7017 1000 0001 0525 8920

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

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

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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., or PO Box No.

City, State, ZIP+4®

Helen Elizabeth Bellows
 6 Ashlin Drive
 Midland, TX 79705

Postmark
 Here

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

See Reverse for Instructions

7017 1000 0001 0525 8937

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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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., or PO Box No.

City, State, ZIP+4®

Hugh Robert Frenzel
 7010 Lake Louise Drive
 Arlington, TX 76016

Postmark
 Here

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

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Iris Goldston Trust for Nancy Zoe Goldston Herpin c/o Goldston Oil Corporation P.O. Box 570365 Houston, TX 77257-0365 9590 9402 2691 6351 8885 00 2. Article Number (Transfer from service label) 7017 1000 0001 0525 9347	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) William Cochran C. Date of Delivery 5-22 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>		☐ 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
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

7017 1000 0001 0525 8661

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

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

OFFICIAL USE

Certified Mail Fee \$ Extra Services & Fees (check box, add 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., or PO Box No. _____ City, State, ZIP+4® _____	Postmark Here
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R.G. Lawton Trust No. 5
Box 628
Magnolia, AR 71753

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Jack H. Mayfield Jr. P.O. Box 570365 Houston, TX 77257 9590 9402 2691 6351 8888 90 7017 1000 0001 0525 8944	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) William Cochran C. Date of Delivery 5-22 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>		☐ 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
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☐ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Jack H. Mayfield, III c/o Goldston Oil Corporation, Nominee P.O. Box 570365 Houston, TX 77257-0365 9590 9402 2691 6351 8888 83 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8951	A. Signature X <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>William Cochran</i> C. Date of Delivery <i>5-22</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☐ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

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

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☐ 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: Janie D. Corley, as Trustee of the Janie D. Corley Trust Declaration P.O. Box 914 Belen, NM 87002 9590 9402 2874 7069 5547 26 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9480	A. Signature X <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Janie D. Corley</i> C. Date of Delivery <i>5-22-17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☒ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

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

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☐ 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: JBC Interests, Ltd. 303 W. Wall Street, Suite 602 Midland, TX 79701 9590 9402 2874 7069 5546 65 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8579	A. Signature X <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Subbaru</i> C. Date of Delivery <i>MAY 2</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: <i>303 W Wall 602 79701</i> ☐ No 3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☒ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery

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

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☐ 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: Jeannie McCraw 1104 West Avenue I Lovington, NM 88260 9590 9402 2691 6351 8889 75 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8869	A. Signature ☒ <i>Jeannie McCraw</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>Jeannie McCraw</i> May 2020 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 ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery	

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☐ Complete items 1, 2, and 3. ☐ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Jolene Wojinski 23910 West Interstate 10, Apt. 2104 San Antonio, TX 78257 9590 9402 2691 6351 8889 68 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8876	A. Signature ☒ <i>Jolene Wojinski</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>Jolene Wojinski</i> 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 ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery	

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

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☐ 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: Juliet Lawton Miller 2426 20th Avenue North Texas City, TX 77500 9590 9402 2691 6351 8889 51 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8883	A. Signature ☒ <i>Juliet Lawton Miller</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>Juliet Lawton Miller</i> 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 ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery	

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

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

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

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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

Keely Meyer

Street and Apt. No., or PO Box No.

772 Canterbury Road

City, State, ZIP+4[®]

Fayetteville, AR 72701

PS Form 3800, April 2015 PSN 7530-02-000-90-7

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:

Kent H. Wallace Trust
 2447 Hidden River Lane
 Franklin, TN 37069

9590 9402 2691 6351 8884 87

2.

7017 1000 0001 0525 9361

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

FRANKLIN, TN 37069

MAY 29 2014

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail[®]

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express[®]

☐ Registered MailTM

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature ConfirmationTM

☐ Signature Confirmation Restricted Delivery

Restricted Delivery

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Kevin H. Tripp & Linda K. Tripp, as
 Co-Trustees of The Kevin H. Tripp
 and Linda K. Tripp Family Trust
 9290 E. Thompson Peak Parkway
 Scottsdale, AZ 85255

9590 9402 2691 6351 8885 17

2. Article Number (Transfer from carrier label)

7017 1000 0001 0525 9330

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Linda K. Tripp

☐ 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 MailTM

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature ConfirmationTM

☐ Signature Confirmation Restricted Delivery

Restricted Delivery

(over \$500)

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Heirs of Anna Ray Joyner c/o Mary Gail Hentzen 29571 Via Val Verde Laguna Niguel, CA 92677 9590 9402 2354 6225 865 2. Article Number (Transfer from service label) 7017 0660 0000 6478 0554	A. Signature <i>X Mary Gail Hentzen</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) _____ Date of Delivery _____ D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> </table> Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Insured Mail	
☐ Adult Signature	☐ Priority Mail Express®														
☐ Adult Signature Restricted Delivery	☐ Registered Mail™														
☒ Certified Mail®	☐ Registered Mail Restricted Delivery														
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise														
☐ Collect on Delivery	☐ Signature Confirmation™														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Insured Mail															

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

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____ Extra Services & Fees (check box, add 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 Heirs of Betty Rae Nelson Breslin 5409 Angels Breath Drive Tuscon, AZ 85757 City, State, ZIP+4® _____	Postmark Here
---	----------------------

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
☒ 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: Known and unknown heirs of E. M. Anderson, deceased c/o Betty Anderson Haisten 18415 Blue Springs Road Fayetteville, AR 72703 9590 9402 2874 7069 5548 01 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9404	A. Signature <i>X Betty A Haisten</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Betty A Haisten</i> C. Date of Delivery <i>5-24-15</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> </table> Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Insured Mail	
☐ Adult Signature	☐ Priority Mail Express®														
☐ Adult Signature Restricted Delivery	☐ Registered Mail™														
☒ Certified Mail®	☐ Registered Mail Restricted Delivery														
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise														
☐ Collect on Delivery	☐ Signature Confirmation™														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Insured Mail															

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
☐ Complete items 1, 2, and 3. ☐ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Heirs of Jane P. Burrow c/o Cora Burrow 131 Columbia Road 462 Magnolia, AR 71753 2. Article Number (Transfer from service label) 9590 9402 2691 6351 8885 48 7017 1000 0001 0525 9309	A. Signature <i>[Signature]</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>Cora Burrow</i> C. Date of Delivery <i>9/3/10</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No USPS 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Restricted Delivery</td> <td></td> </tr> </table>	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Restricted Delivery	
☐ Adult Signature	☐ Priority Mail Express®														
☐ Adult Signature Restricted Delivery	☐ Registered Mail™														
☒ Certified Mail®	☐ Registered Mail Restricted Delivery														
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☐ Collect on Delivery	☐ Signature Confirmation™														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Restricted Delivery															

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
☐ Complete items 1, 2, and 3. ☐ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Heirs of Nancy Dodds c/o Mark Dodds P.O. Box 2801 Crested Butte, CO 81224 2. Article Number (Transfer from service label) 9590 9402 2691 6351 8885 55 7017 1000 0001 0525 9293	A. Signature <i>[Signature]</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>MAVADOCS</i> C. Date of Delivery <i>MAY 22 2011</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Restricted Delivery</td> <td></td> </tr> </table>	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Restricted Delivery	
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☐ Adult Signature Restricted Delivery	☐ Registered Mail™														
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☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Restricted Delivery															

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

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☐ 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: Heirs of Nell Joyner Mapes c/o Mary Gail Hentzen 29571 Via Val Verde Laguna Niguel, CA 92677 2. Article Number (Transfer from service label) JO 9402 2691 6351 8885 62 7017 1000 0001 0525 9286	A. Signature <i>[Signature]</i> ☐ 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 <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Restricted Delivery</td> <td></td> </tr> </table>	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Restricted Delivery	
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☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Restricted Delivery															

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

7017 1000 0001 0525 9279

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visit our website at www.usps.com®**OFFICIAL USE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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., or PO Box No.

City, State, ZIP+4®

Heirs of R.G. Lawton

2321 Northeast 35th Street

Lighthouse Point, FL 33064

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

See Reverse for Instructions

Postmark
Here

7017 1000 0001 0525 9316

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visit our website at www.usps.com®**OFFICIAL USE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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., or PO Box No.

City, State, ZIP+4®

Heirs of Vance & Ray Beth Foster

P.O. Box 2463

Boerne, TX 78006

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

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:

Kristy Trueheart
 3810 Katy Hockley Road
 Katy, TX 77493

9590 9402 2691 6351 8889 37

2. Article Number (Transfer from service label)

7017 1000 0001 0525 8906

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Kristy Trueheart

☐ Agent☒ Addressee

B. Received by (Printed Name)

Kristy Trueheart

C. Date of Delivery

05/24/17

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☒ No

3. Service Type

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Larry Burrow 131 Columbia Road 462 Magnolia, TX 71753 9590 9402 2691 6351 8889 20 2. Article Number (Transfer from service label) 7017 1000 0001 0525 8913	A. Signature <i>X [Signature]</i> ☒ Agent ☒ Addressee B. Received by (Printed Name) <i>Larry Burrow</i> C. Date of Delivery <i>5-23-17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No USPS 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

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

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

OFFICIAL USE

Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) <table style="width: 100%;"> <tr> <td>☐ Return Receipt (hardcopy)</td> <td>\$</td> </tr> <tr> <td>☐ Return Receipt (electronic)</td> <td>\$</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>\$</td> </tr> <tr> <td>☐ Adult Signature Required</td> <td>\$</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>\$</td> </tr> </table> Postage \$ Total Postage and Fees \$ Sent To Street and Apt. No., or PO Box No. <i>2017 Diamond Ridge Drive</i> City, State, ZIP+4® <i>Carrollton, TX 75010</i>	☐ Return Receipt (hardcopy)	\$	☐ Return Receipt (electronic)	\$	☐ Certified Mail Restricted Delivery	\$	☐ Adult Signature Required	\$	☐ Adult Signature Restricted Delivery	\$	Postmark Here MAY 23 2017 SANTA FE NM
☐ Return Receipt (hardcopy)	\$										
☐ Return Receipt (electronic)	\$										
☐ Certified Mail Restricted Delivery	\$										
☐ Adult Signature Required	\$										
☐ Adult Signature Restricted Delivery	\$										

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Lucy Anderson Rose 1469 Cattle Baron Court Fairview, TX 75069 9590 9402 2691 6351 8888 38 2. Article Number (Transfer from service label) 7017 1000 0001 0525 9002	A. Signature <i>X [Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>5-23-17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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:

Lydia Mayfield Abbott 1999 Trust
c/o Goldston Oil Corporation
P.O. Box 570365
Houston, TX 77257-0365

9590 9402 2874 7069 5546 03

2. Article Number (Transfer from service label)

7017 1000 0001 0525 8630

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *William Cochran*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

William Cochran

C. Date of Delivery

5-22

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

3. Service Type

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

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

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

Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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., or PO Box No

City, State, ZIP+4®

Margaret Wallace Eaton
7921 NW 38th Street
Bethany, OK 73008

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:

Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224

9590 9402 2691 6351 8888 14

2. Article Number (Transfer from service label)

7017 1000 0001 0525 9026

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Mark Dodds*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Mark Dodds

C. Date of Delivery

MAY 26

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

3. Service Type

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

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

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

Domestic Return Receipt

7017 1000 0001 0525 9033

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	Postmark Here
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 Martha Castillo Street and Apt. No., or PO Box No. 406 Spindrift Circle, Richmond, TX 77469 City, State, ZIP+4® _____	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION ☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Mary Gail Hentzen 29571 Via Val Verde Laguna Niguel, CA 92677 9590 9402 2691 6351 8887 91 2. Article Number (Transfer from service label) 7017 1000 0001 0525 9040	COMPLETE THIS SECTION ON DELIVERY A. Signature ☒ Agent ☒ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ all Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
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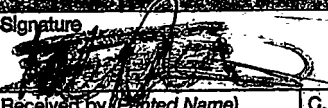
PS Form 3811, July 2015 PSN 7530-02-000-9053

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: Maurine M. Massie 4110 Larchmont Wichita Falls, TX 76302 9590 9402 2691 6351 8887 84 2. Article Number (Transfer from service label) 7017 1000 0001 0525 9057	COMPLETE THIS SECTION ON DELIVERY A. Signature ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ all Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
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PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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: Michael J. Sheridan 350 N. LaSalle Street, Suite 800 Chicago, IL 60610		B. Received by (Printed Name) _____ C. Date of Delivery _____	
2. Article Number (Transfer from service label) 9590 9402 2691 6351 8887 77		D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below: _____	
3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery		☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

9590 9402 2691 6351 8887 77

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add 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 \$ _____

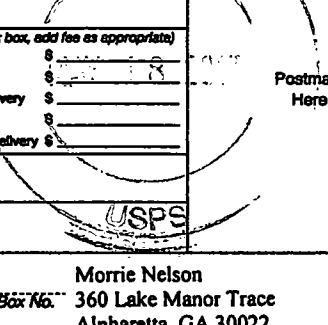
Sent To _____

Street and Apt. No., or PO Box No. _____

City, State, ZIP+4® _____

PS Form 3800, April 2015 PSN 7530-02-000-90-47 See Reverse for Instructions

Postmark Here



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: Nancy Zoe Herpin c/o Goldston Oil Corporation P.O. Box 570365 Houston, TX 77257-0365		B. Received by (Printed Name) <u>William Cochran</u> C. Date of Delivery <u>5-22</u>	
2. Article Number (Transfer from service label) 9590 9402 2691 6351 8887 46		D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below: _____	
3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery		☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

7017 1000 0001 0525 9118

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®	
OFFICIAL USE	
Certified Mail Fee \$	Postmark Here
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., or PO Box No. City, State, ZIP+4®	
P.O. Box 3644 Killeen, TX 76549	
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: Pamela Anne Wallace Pruitt 1501 South 3rd Street Midlothian, TX 76065 9590 9402 2691 6351 8887 22 Article Number (Transfer from service label) 7017 1000 0001 0525 9125	COMPLETE THIS SECTION ON DELIVERY A. Signature <i>Pamela A. Pruitt</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) Pamela A. Pruitt C. Date of Delivery 7/22/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery
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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: PEP II Management, LLC 330 Marshall Street, Suite 300 Shreveport, LA 71101 9590 9402 2874 7069 5546 58 Article Number (Transfer from service label) 7017 1000 0001 0525 8586	COMPLETE THIS SECTION ON DELIVERY A. Signature <i>Nathalie Rose</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) Nathalie Rose C. Date of Delivery 7/22/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery ☐ Restricted Delivery
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PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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

R.G. Lawton, as Trustee

Box 628

Street and Apt. No., or PO Box Magnolia, AR 71753

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-90-17

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:

RAM Energy, LLC
 5100 E. Skelly Drive, Suite 600
 Tulsa, OK 74135

9590 9402 2874 7069 5546 27

2. Article Number (Transfer from service label)

7017 1000 0001 0525 8616

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Sharon Brichard

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Sharon Brichard

C. Date of Delivery

5/22/17

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

3. Service Type

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

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

Domestic Return Receipt

SENDER - COMPLETE THIS SECTION

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

1. Article Addressed to:

Ramsey Petroleum, L.P.
 306 West Wall, Suite 1010
 Midland, TX 79701

9590 9402 2691 6351 8885 24

2. Article Number (Transfer from service label)

7017 1000 0001 0525 9323

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Marcus Haynes

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/25/17

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
☐ 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 THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Richard C. Lawton III 18415 SE 244th Street Covington, WA 98042	A. Signature X <i>[Signature]</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) C. Date of Delivery 5-25 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 7017 1000 0001 0525 9149	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Robert D. Wallace and Sheila G. Wallace 3504 Thompkins Bethany, OK 73009	A. Signature X <i>Sheila Wallace</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) C. Date of Delivery 5-20-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 7017 0660 0000 6477 9497	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Robert Henry Joyner 19403 Dickson Park Drive Spring, TX 77373	A. Signature X <i>[Signature]</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) C. Date of Delivery 5-22-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 7017 1000 0001 0525 9156	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

7017 1000 0001 0525 9132

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

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

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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

Raney Forbes

Street and Apt. No., or PO Box No.

5510 Bryant Place

City, State, ZIP+4®

Springdale, AR 72764

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:

RCPTX, Ltd.

401 Congress Avenue, Suite 1510
Austin, TX 78701

9590 9402 2874 7069 5547 33

2. Article Number (Transfer from service label)

7017 0660 0000 6477 9473

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Ashley Hay

☐ Agent☐ Addressee

B. Received by (Printed Name)

Ashley Hay

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

all Restricted Delivery

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

Domestic Return Receipt

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:

Ribble Investment Company, LLC
P.O. Box 9
Magnolia, AR 71754

9590 9402 2874 7069 5547 02

2. Article Number (Transfer from service label)

7017 0660 0000 6477 9503

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Amanda Gallant

☐ Agent☐ Addressee

B. Received by (Printed Name)

Amanda Gallant

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

all Restricted Delivery

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Source Energy Partners, LLC Attn: Brandon Benson 4311 Oak Lawn Avenue Suite 450 Dallas, TX 75219 9590 9402 2874 7069 5547 71	A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) ASHLEY HANIS C. Date of Delivery 5/22/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No												
2. Article Number (Transfer from service label) 7017 0660 0000 6477 9435	3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☒ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☒ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table>	☐ Adult Signature	☐ Priority Mail Express®	☒ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☒ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery
☐ Adult Signature	☐ Priority Mail Express®												
☒ Adult Signature Restricted Delivery	☐ Registered Mail™												
☒ Certified Mail®	☐ Registered Mail Restricted Delivery												
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise												
☐ Collect on Delivery	☒ Signature Confirmation™												
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery												

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Stephens Production Company 623 Garrison Ave Fort Smith, AR 72901 9590 9402 2874 7069 5546 96	A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) Jordan Sisco C. Date of Delivery 5/22/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No												
2. Article Number (Transfer from service label) 7017 0660 0000 6477 9510	3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☒ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☒ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table>	☐ Adult Signature	☐ Priority Mail Express®	☒ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☒ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery
☐ Adult Signature	☐ Priority Mail Express®												
☒ Adult Signature Restricted Delivery	☐ Registered Mail™												
☒ Certified Mail®	☐ Registered Mail Restricted Delivery												
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise												
☐ Collect on Delivery	☒ Signature Confirmation™												
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery												

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Steven Chase, Trustee of the Chase Family Trust 1303 West Kansas Avenue Midland, TX 79701 9590 9402 2874 7069 5545 59	A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) Steve Chase C. Date of Delivery 05-23-2017 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No												
2. Article Number (Transfer from service label) 7017 1000 0001 0525 8685	3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☒ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☒ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table>	☐ Adult Signature	☐ Priority Mail Express®	☒ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☒ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery
☐ Adult Signature	☐ Priority Mail Express®												
☒ Adult Signature Restricted Delivery	☐ Registered Mail™												
☒ Certified Mail®	☐ Registered Mail Restricted Delivery												
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise												
☐ Collect on Delivery	☒ Signature Confirmation™												
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery												

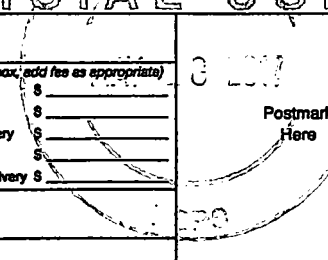
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

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

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$	
Extra Services & Fees (check box, add 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., or PO Box No. Robert Owen Joyner
6324 Station Mill Drive
City, State, ZIP+4[®] Norcross, GA 30092

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

7017 1000 0001 0525 9163

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:

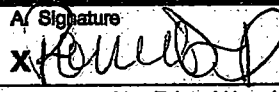
Ronald Alan Dunlap
5801 Pleasant Wood Trail
Arlington, TX 76016

9590 9402 2691 6351 8887 53

2. Article Number (Transfer from service label)

7017 1000 0001 0525 9095

COMPLETE THIS SECTION ON DELIVERY

A. Signature 	☐ Agent ☐ Addressee
B. Received by (Printed Name)	C. Date of Delivery

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

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

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:

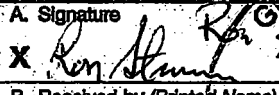
Ronald Gene Stevenson and Kathy Stevenson
P.O. Box 123
Grants, NM 87020

9590 9402 2691 6351 8886 23

2. Article Number (Transfer from service label)

7017 1000 0001 0525 9224

COMPLETE THIS SECTION ON DELIVERY

A. Signature 	☐ Agent ☐ Addressee
B. Received by (Printed Name)	C. Date of Delivery

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

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

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: T.J. Raney & Sons c/o Morgan Keegan Company 50 Front Street Memphis, TX 38103 9590 9402 2874 7069 5547 64 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9442	A. Signature ☒ <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>Thomas Ex</i> 5/22/11 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%; font-size: small;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> </table> Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Insured Mail	
☐ Adult Signature	☐ Priority Mail Express®														
☐ Adult Signature Restricted Delivery	☐ Registered Mail™														
☒ Certified Mail®	☐ Registered Mail Restricted Delivery														
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise														
☐ Collect on Delivery	☐ Signature Confirmation™														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Insured Mail															

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

7017 1000 0001 0525 9231

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add 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., or PO Box No.

City, State, ZIP+4®

Terry A. Currie

413 Mamie Street

Hattiesburg, MS 39401

PS Form 3800, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: The William K. Warren Foundation P.O. Box 470372 Tulsa, OK 74147 9590 9402 2874 7069 5547 64 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9459	A. Signature ☒ <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>William K. Warren</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%; font-size: small;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> </table> Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Insured Mail	
☐ Adult Signature	☐ Priority Mail Express®														
☐ Adult Signature Restricted Delivery	☐ Registered Mail™														
☒ Certified Mail®	☐ Registered Mail Restricted Delivery														
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise														
☐ Collect on Delivery	☐ Signature Confirmation™														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Insured Mail															

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

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

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

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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

Strata Land Acquisition, LP
 100 Club Drive
 Midland, TX 79701

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

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

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Summer Resources, LLC
 1605 Wheaton Terrace
 Fort Smith, AR 72908

2. Article Number (Transfer from service label)

7017 1000 0001 0525 8562

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Charles E. Still*

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Charles E. Still

C. Date of Delivery

5-20-17

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

3. Service Type

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

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

☐ 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:

Susan Mayfield 1997 Marital Trust,
 Jack H. Mayfield, Trustee
 c/o Goldston Oil Corporation
 P.O. Box 570365
 Houston, TX 77257-0365

2. Article Number (Transfer from service label)

7017 1000 0001 0525 8678

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *William Cochran*

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

William Cochran

C. Date of Delivery

5-22

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

3. Service Type

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

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

☐ Restricted Delivery

(over \$500)

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: W.C. Partee, Jr. P.O. Box 667 Magnolia, AR 71754		A. Signature <i>W.C. Partee Jr.</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>W.C. Partee Jr.</i> C. Date of Delivery <i>May 23 2011</i> D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below: USPS	
2. Article Number (Transfer from service label) 9590 9402 2691 6351 8886 78		3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☐ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery	

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

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Walter Goldston Mayfield c/o Goldston Oil Corporation P.O. Box 570365 Houston, TX 77257-0365		A. Signature <i>W. K. Graham</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>W. K. Graham</i> C. Date of Delivery <i>5-22</i> D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:	
2. Article Number (Transfer from service label) 9590 9402 2691 6351 8886 61		3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☐ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery	

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

7017 1000 0001 0525 9194

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ <i>18.00</i>	Postmark Here
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., or PO Box No. City, State, ZIP+4®	Walter K. Graham 1504 Soplo Road Southeast Albuquerque, NM 87123

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

7017 1000 0001 0525 9248

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

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

OFFICIAL USE

Certified Mail Fee	\$	Postmark Here
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	Thomas R. Anderson	
Street and Apt. No., or PO Box No.	1425 Neeley Drive	
City, State, ZIP+4®	Houston, TX 77055	

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

7017 1000 0001 0525 9255

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

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

OFFICIAL USE

Certified Mail Fee	\$	Postmark Here
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	Tracy Knifong	
Street and Apt. No., or PO Box No.	518 Woodland Drive	
City, State, ZIP+4®	Benton, AR 72015	

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:

W.C. Hubbard
 303 W. Wall Street, Suite 602
 Midland, TX 79701

2. Article Number (Transfer from service label)

7017 1000 0001 0525 9262

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Tracy Knifong* ☐ Agent ☒ Addressee

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

Hubbard *9/23/2017*
 D. Is delivery address different from item 1? ☒ Yes ☐ No
 If YES, enter delivery address below:

*303 W Wall St 602
 79702*

3. Service Type

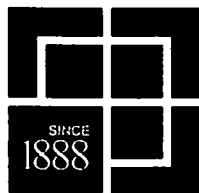
- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☐ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: William Dee Wallace 3504 N. Thompkins Bethany, OK 73008 9590 9402 2691 6351 8886 47 2. Article Number (Transfer from service label) 7017 1000 0001 0525 9200	A. Signature <i>X Sheila Wallace</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>Sheila Wallace</i> 5/22/17 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 ☐ Restricted Delivery

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: William Gerald Dean P.O. Box 430 Capitan, NM 88316 9590 9402 2691 6351 8886 30 2. Article Number (Transfer from service label) 7017 1000 0001 0525 9217	A. Signature <i>X William Gerald Dean</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>William Gerald Dean</i> 5/22/17 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 ☐ Restricted Delivery

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



HINKLE SHANOR LLP
ATTORNEYS AT LAW
PO BOX 2068
SANTA FE, NEW MEXICO 87504
505-982-4554 (FAX) 505-982-8623

WRITER:

Gary W. Larson,
Partner
glarson@hinklelawfirm.com

May 17, 2017

VIA CERTIFIED MAIL

Alma L. Tisher and Kelly B. Tisher
P.O. Box 533
Littleton, CO 80160

Re: Special Energy Corporation NMOCD Application

Dear Mr. and Mrs. Tisher:

Enclosed is a copy of an application for approval of a 160-acre, non-standard spacing and proration unit and compulsory pooling that Special Energy Corporation ("Special Energy") has filed with the New Mexico Oil Conservation Division ("the Division").

The proposed non-standard spacing and proration unit is comprised of the W/2 E/2 of Section 31, Township 11 South, Range 38 East, NMPM, Lea County, New Mexico. The location of the proposed project area is orthodox. Your interests are not being pooled, but as the owner of an interest in an offsetting tract, you are entitled to receive notice of Special Energy's application.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, June 8, 2017 in Porter Hall at the Division's offices located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest in an offset tract, you have the right to appear at the hearing and present testimony. If you do not appear at the hearing, you will be precluded from contesting the matter at a later date.

A party appearing in the case is required by the Division's Rules to file a Pre-Hearing Statement, which in this matter must be filed no later than Thursday, June 1, 2017. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: the name of the party and the party's attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate amount of time the party will need to present the party's case; and an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to me.

Thank you for your attention to this matter.

Very truly yours,


Gary W. Larson

GWL:sm
Enclosure

PO BOX 10
ROSWELL, NEW MEXICO 88202
575-622-6510
(FAX) 575-623-9332

PO BOX 1720
ARTESIA, NEW MEXICO 88210
575-622-6510
(FAX) 575-746-6316

PO BOX 2068
SANTA FE, NEW MEXICO 87504
505-982-4554
(FAX) 505-982-8623

OCD Case No. 15713
SPECIAL ENERGY CORP.
Jenna #1-H
Exhibit #4

Jenna 1-H Offset List
Lea County, New Mexico
April 26, 2017

1. Alice McCoy Anderson
9747 Edgepine Drive
Dallas, TX 75238
2. Alma L. Tisher and Kelly B. Tisher, wife
and husband
P.O. Box 533
Littleton, CO 80160
3. Amber Smith
307 Baethge Boulevard
Fredricksburg, TX 78624
4. Anne Goldston
5908 Auden
Houston, TX 77005
5. Apache Corporation
2000 Post Oak Boulevard, Suite 100
Houston, Texas 77056-4400
6. Bank of America, as Agent for Mark
Pittman Marshall
P.O. Box 2546
Fort Worth, TX 76113
7. Barbara Lennon Williams
3 Ferrington Road
Pittsboro, NC 27312
8. Barry Antweil
6830 North Eldridge Parkway #409
Houston, TX 77041
9. Bergman Mineral Holdings, LLC
P.O. Box 813
Midland, TX 79702
10. Betty Anderson Haisten
18415 Blue Springs Road
Fayetteville, AR 72703
11. Betty L. Pagan
5875 Friars Road, #4316
San Diego, CA 92110
12. Blasco, LLC
6235 Savannah Way
Colorado Springs, CO 80919
13. Boldrick Family Properties, LP
c/o Boldrick Management Company,
LLCP.O. Box 10648
Midland, TX 79702
14. Bonnie Carr
16 Four Mile Branch Lane
Spartanburg, SC 29302
15. Bradford A. Stevenson
P.O. Box 2646
Overgaard, AZ 85933
16. Bradly Earnest Marr
11135 River Road
Havre, MT 59501
17. Buckhead Energy, LLC
P.O. Box 471288
Fort Worth, TX 76147
18. Bud & Mary Lou Flocchini Family
Partnership
1330 Capital Boulevard
Reno, NV 89502
19. C.E.S. Bellows, IV
6 Ashlin Drive
Midland, TX 79705
20. Cal Partee, Jr.
P.O. Box 667
Magnolia, AR 71753
21. Caprock Energy, LLC
P.O. Box 7172165
Stateline, NV 89449
22. Carlos Dean Alexander
604 East McDonald Road
Lovington, NM 88260
23. Charles A. Stokes
34 Wilshire Drive
Delmar, NY 12054
24. Charles E. Breslin
5409 Angels Breath Drive
Tuscon, AZ 85757

Jenna 1-H Offset List
Lea County, New Mexico
April 26, 2017

25. Charles Peter Crouch, Jr.
Address Unknown
26. Charles V. Beasley and Edwina D. Beasley
350 Mt Union Cutoff
El Dorado, AR 71730
27. Chatfield Company, LLC
3070 Cherry Creek Drive, Unit C
Denver, CO 80209
28. Christa L. Leavell, Custodian for Michelle C. Leavell
P.O. Box 470
Robinson, IL 62454
29. Christa L. Leavell, dealing in her sole and separate property
P.O. Box 470
Robinson, IL 62454
30. Christopher R. F. Eckels
P.O. Box 30
Cedaredge, CO 81413
31. Cirrus Minerals, LLC
c/o Fortis Minerals
1111 Bagby Street, Suite 2150
Houston, TX 77002
32. Citadel Oil & Gas Corporation
P.O. Box 3052
Denver, CO 80201
33. Clayton Hubbard
412 Candlelight Circle
Fredericksburg, TX 78624
34. Coby Burrow
131 Columbia Road 462
Magnolia, AR 71753
35. Connie Goldston
6107 A Bullard Drive
Austin, TX 78757
36. ConocoPhillips
P.O. Box 2197
Houston, TX 77252-2197
37. Craig Hubbard
P.O. Box 3282
Midland, TX 79702
38. David Higgs
11 Rivermist Lane
Savannah, GA 31410
39. David Mapes, Sr.
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
40. Dean Kinsolving, d/b/a KINCO
P.O. Box 325
Tatum, NM 88267
41. Dena G. Northrup
2613 W. 26th Avenue
Amarillo, TX 79101
42. Don Looney
P.O. Box 117
Alpine, TX 79734
43. Donald Leon Moore, Jr.
2205 New Garden Road, #3304
Greensboro, NC 27410
44. Dorothy Looney
2606 Briargrove, Apartment 28
San Angelo, TX 76904
45. Doug Brazil
P.O. Box 624
Fulshear, TX 77441
46. Edward Graham Gallagher, Trustee U/W of Elmer E. Batzell, deceased
810 American Security Building
730 15th Street Northwest
Washington, D. C. 20005
47. Elizabeth Jane Kay, Trustee of the Elizabeth Jane Kay Family Trust
P.O. Box 9602
Colorado Springs, CO 80932
48. Elizabeth Lawton Mellon, a/k/a, Elizabeth T. Mellon
2321 Northeast 35th Street
Lighthouse Point, FL 33064

Jenna 1-H Offset List
Lea County, New Mexico
April 26, 2017

49. Estate of William Ray Montgomery,
deceased
c/o Bryan C. Birkeland, Independent
Executor
3712 Fairfax Avenue
Dallas TX 75209-6214
50. Evanil Oil Company
1000 Green Pond Road
Newfoundland, NJ 07435
51. Fall River Resources, Inc.
P.O. Box 13456
Denver, CO 80201
52. FFF, Inc.
P.O. Box 8874
Denver, CO 80201
53. Frances A. Hannifin
730 17th Street, Suite 325
Denver, CO 80202
54. George M. O'Brien
P.O. Box 1743
Midland, TX 79702
55. Gibson F. Anderson Jr.
135 Wyndham Drive
Portola Valley, CA 94028
56. Gold Struck Investments, LP
c/o Wells Fargo Bank, NA, as Agent
705 E. Mulberry Avenue, Suite 402
San Antonio, TX 78212
57. Goldston Oil Corporation
1819 Saint James Place
Houston, TX 77056
58. Harle, Inc.
c/o David S. Harle, President
7625 Southwest Middle Greens Road
Wilsonville, OR 97070-9418
59. Harriet Cutler Bellows Crockard
6 Ashlin Drive
Midland, TX 79705
60. Helen Elizabeth Bellows
6 Ashlin Drive
Midland, TX 79705
61. Hugh Robert Frenzel
7010 Lake Louise Drive
Arlington, TX 76016
62. Iris Goldston Trust for Nancy Zoe
Goldston Herpin
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
63. J. Fred Jordan, Trustee of the R.G.
Lawton Trust No. 5
Box 628
Magnolia, AR 71753
64. J.C. Batchelor
4909 Stoneridge Drive
Raleigh, NC 27612
65. Jack H. Mayfield Jr.
P.O. Box 570365
Houston, TX 77257
66. Jack H. Mayfield, III
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
67. Jacqueline C. Williams, Trustee of the
RMW Trust, dated November 18, 2004
5 Dovekie Court
Nantucket, MA 02554
68. Jan C. Dodson-Ice
P.O. Box 7366
Covington, WA 98042
69. Janie D. Corley, as Trustee of the Janie D.
Corley Trust Declaration,
dated September 6, 2013
P.O. Box 914
Belen, NM 87002
70. Janis Foster McCoy
P.O. Box 2463
Boerne, TX 78006
71. JBC Interests, Ltd.
303 W. Wall Street, Suite 602
Midland, TX 79701

Jenna 1-H Offset List
Lea County, New Mexico
April 26, 2017

72. Jeannie McCraw
1104 West Avenue I
Lovington, NM 88260
73. Joe Goldston
226 Forest Road
Lumberton, NC 28358
74. John A. Lennon
c/o Department of Music, Emory
University
535 Kilgo Circle
Atlanta, GA 30322
75. Jolene Wojinski
23910 West Interstate 10, Apt. 2104
San Antonio, TX 78257
76. Jonathan S. Roderick, Trustee of the
Jonathan S. Roderick Living Trust, dated
February 8, 2007
P.O. Box 7961
Boulder, CO 80306
77. Juliet Lawton Miller
2426 20th Avenue North
Texas City, TX 77500
78. Keely Meyer
772 Canterbury Road
Fayetteville, AR 72701
79. Kelly Anne Marr
P.O. Box 72
Andrews, TX 79714
80. Kent H. Wallace & Suzan Jill Wallace, Co-
Trustees of the 2008 Kent H. Wallace
Trust Agreement, dated October 10,
2008
2447 Hidden River Lane
Franklin, TN 37069
81. Kevin H. Tripp & Linda K. Tripp, as Co-
Trustees of The Kevin H. Tripp and Linda
K. Tripp Family Trust, dated November
1, 2005
9290 E. Thompson Peak Parkway
Scottsdale, AZ 85255
82. King Oil & Gas of Texas, Ltd.
800 Bering , Suite 305
Houston, TX 77057
83. Known and unknown heirs of Anna Ray
Joyner, deceased
c/o Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224
84. Known and unknown heirs of Anna Ray
Joyner, deceased
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
85. Known and unknown heirs of Betty Rae
Nelson Breslin, deceased
c/o Charles E. Breslin
5409 Angels Breath Drive
Tuscon, AZ 85757
86. Known and unknown heirs of Betty Rae
Nelson Breslin, deceased
c/o Charles E. Breslin
5409 Angels Breath Drive
Tuscon, AZ 85757
87. Known and unknown heirs of Charlene
Alexander Marr, deceased
c/o Kelly Anne Marr
P.O. Box 72
Andrews, TX 79714
88. Known and unknown heirs of E. M.
Anderson, deceased
c/o Betty Anderson Haisten
18415 Blue Springs Road
Fayetteville, AR 72703
89. Known and unknown heirs of Jane P.
Burrow, deceased
c/o Coby Burrow
131 Columbia Road 462
Magnolia, AR 71753
90. Known and unknown heirs of John
Henry Latham, deceased
c/o Edith Latham
1321 Park Bayou Drive
Houston, TX 77077

Jenna 1-H Offset List
Lea County, New Mexico
April 26, 2017

91. Known and unknown heirs of Nancy Dodds, deceased
c/o Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224
92. Known and unknown heirs of Nancy Dodds, deceased
c/o Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224
93. Known and unknown heirs of Nell Joyner Mapes, deceased
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
94. Known and unknown heirs of Nell Joyner Mapes, deceased
c/o Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
95. Known and unknown heirs of R.G. Lawton, deceased
c/o Elizabeth Lawton Mellon
2321 Northeast 35th Street
Lighthouse Point, FL 33064
96. Known and unknown heirs of Vance and Ray Beth Foster, deceased
c/o Janis Foster McCoy
P.O. Box 2463
Boerne, TX 78006
97. Known and unknown heirs of W.C. Hubbard, deceased
c/o Craig Hubbard
P.O. Box 3282
Midland, TX 79701
98. Kristy Trueheart
3810 Katy Hockley Road
Katy, TX 77493
99. Larry Burrow
131 Columbia Road 462
Magnolia, AR 71753
100. Larry Hunnicutt, as Custodian for Justin Travis Hunnicutt and Grady Paul Hunnicutt, minors
14275 Midway Road, Suite 220
Addison, TX 75001
101. Laura Dena Moore Lee
3313 Stable Court
Greensboro, NC 27410
102. Lavaca Minerals Company
P.O. Box 476
Barker, TX 77413
103. Lazy S Minerals, LLC
P.O. Box 100493
Fort Worth, TX 76185
104. Leslie Diane Beckmann
2017 Diamond Ridge Drive
Carrollton, TX 75010
105. Loretta D. Lowe
1200 Barton Creek Boulevard, #2
Austin, TX 78735
106. Louis A. Oswald, III
P.O. Box 280969
Lakewood, CO 80228
107. Louis A. Oswald, III, Trustee of the Oswald Family Trust, dated April 27, 1998
P.O. Box 280969
Lakewood, CO 80228
108. Lucy Anderson Rose
1469 Cattle Baron Court
Fairview, TX 75069
109. Lydia Mayfield Abbott 1999 Trust
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
110. Margaret Wallace Eaton
7921 NW 38th Street
Bethany, OK 73008
111. Mark Antweil
P.O. Box 365
Larchmont, NY 10538

Jenna 1-H Offset List
Lea County, New Mexico
April 26, 2017

112. Mark Caldwell and Bonnie Caldwell,
husband and wife
3512A Shell
Midland, TX 79707
113. Mark Dodds
P.O. Box 2801
Crested Butte, CO 81224
114. Martha Castillo
406 Spindrift Circle
Richmond, TX 77469
115. Martha Jean Cordes
2 Broughton Circle
Bluffton, SC 29910
116. Mary E.M. Mooney
107 Linden Street
Plymouth, NC 27926
117. Mary Frances Antweil
5410 Ledgestone Drive
Fort Worth, TX 76132
118. Mary Gail Hentzen
29571 Via Val Verde
Laguna Niguel, CA 92677
119. Mary Hood
142 Stillwater Road
Waco, TX 76708
120. Maurine M. Massie
4110 Larchmont
Wichita Falls, TX 76302
121. Megan Goldston, Trustee of the Bill
Goldston Family Trust
c/o Wells Fargo Bank, NA, as Agent
705 E. Mulberry Avenue, Suite 402
San Antonio, TX 78212
122. Michael J. Sheridan
350 N. LaSalle Street, Suite 800
Chicago, IL 60610
123. Morrie Nelson
360 Lake Manor Trace
Alpharetta, GA 30022
124. MW Oil Investment Company, Inc.
730 17th Street, Suite 325
Denver, CO 80202
125. Nancy Zoe Herpin
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
126. Natasha Dees
P.O. Box 3644
Killeen, TX 76549
127. Nearburg Exploration Company, L.L.C.
P.O. Box 823085
Dallas, TX 75382
128. Pamela Anne Wallace Pruitt
1501 South 3rd Street
Midlothian, TX 76065
129. Patricia Moore Stewart
106 Oakview Drive
Lexington, VA 24450
130. Pauline Couch Slack
Address Unknown
131. Pauline Deeme Couch
Address Unknown
132. PEP II Management, LLC
330 Marshall Street, Suite 300
Shreveport, LA 71101
133. Pumpkin Buttes, LLC
P.O. Box 1989
Casper, WY 82602
134. RAM Energy, LLC
5100 E. Skelly Drive, Suite 600
Tulsa, OK 74135
135. Ramsey Petroleum, L.P.
511 W. Ohio
Midland, TX 79701
136. Raney Forbes
5510 Bryant Place
Springdale, AR 72764
137. RCPTX, Ltd.
401 Congress Avenue, Suite 1510
Austin, TX 78701

Jenna 1-H Offset List
Lea County, New Mexico
April 26, 2017

138. Reef Oil Corporation
12 Rue Maison Drive
Abilene, TX 79605
139. Ribble Investment Company, LLC
P.O. Box 9
Magnolia, AR 71754
140. Richard C. Lawton III
18415 SE 244th Street
Covington, WA 98042
141. Richard Clem Moore
1224 Shirley Road
Lynchburg, VA 24502
142. Robert D. Wallace and Sheila G. Wallace,
Individually and as Trustees of the Sheila
G. Wallace Revocable Trust dated the
15th day of July, 2008
3504 Thompkins
Bethany, OK 73009
143. Robert Edward Alexander
718 Ashleigh Lane
Lantana, TX 76226
144. Robert Edward Eckels, Jr., LLC
P.O. Box 1093
Cedaredge, CO 81413
Circa: 2009
145. Robert Henry Joyner
19403 Dickson Park Drive
Spring, TX 77373
146. Robert Owen Joyner
6324 Station Mill Drive
Norcross, GA 30092
147. Ronald Alan Dunlap
5801 Pleasant Wood Trail
Arlington, TX 76016
148. Ronald Dal Alexander
2806 Alexander Road
Lovington, NM 88260
149. Ronald Gene Stevenson and Kathy
Stevenson
P.O. Box 123
Grants, NM 87020
150. Sandra Ann Alexander
2806 Alexander Road
Lovington, NM 88260
151. Source Energy Partners, LLC, f/k/a
Source Minerals, LLC
Attn: Brandon Benson
4311 Oak Lawn Avenue Suite 450
Dallas, TX 75219
152. Stephens Production Company
623 Garrison Ave
Fort Smith, AR 72901
153. Steven Chase, Trustee of the Chase
Family Trust
1303 West Kansas Avenue
Midland, TX 79701
154. Strata Land Acquisition, LP
100 Club Drive
Midland, TX 79701
155. Summer Resources, LLC
1605 Wheaton Terrace
Fort Smith, AR 72908
156. Susan Mayfield 1997 Marital Trust, Jack
H. Mayfield, Trustee
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
157. T.J. Raney & Sons
c/o Morgan Keegan Company
50 Front Street
Memphis, TX 38103
158. Terry A. Currie
413 Mamie Street
Hattiesburg, MS 39401
159. Terry Stokes McConaughy
100 Newbury Court Suite 312
Concord, MA 01742
160. Terry Stokes McConaughy
100 Newbury Court, Suite 4420
Concord, MA 01742

Jenna 1-H Offset List
Lea County, New Mexico
April 26, 2017

161. The Taegen J. Carter Living Trust dated
November 9, 2011
c/o Taegen Jon Carter
7010 Island Village Drive
Long Beach, CA 90803
162. The William K. Warren Foundation
P.O. Box 470372
Tulsa, OK 74147
163. Thomas L. Pool, Trustee of the Thomas
and Donda Pool Trust dated December
18, 2007, as amended
Via E. Miscia 19
66034 Lanciano, Italy
164. Thomas R. Anderson
1425 Neeley Drive
Houston, TX 77055
165. Thomas R. Anderson
1425 Neeley Drive
Houston, TX 77055
166. Titanium Energy Partners, LP
2100 McKinney Avenue, #1770
Dallas, TX 75201
167. Toles-Com-Ltd., LLC
P.O. Box 1300
Roswell, NM 88202
168. Tracy Knifong
518 Woodland Drive
Benton, AR 72015
169. W.C. Partee, Jr.
P.O. Box 667
Magnolia, AR 71754
170. Wadi Petroleum, Inc.
4355 Sylvanfield Drive, Suite 200
Houston, TX 77014
171. Walter E. Batchelor
218 Dogwood Drive
Mount Holly, NC 28120
172. Walter Goldston Mayfield
c/o Goldston Oil Corporation, Nominee
P.O. Box 570365
Houston, TX 77257-0365
173. Walter Herbert Moore
1617 Country Club Road
Reidsville, NC 27320
174. Walter K. Graham
1504 Soplo Road Southeast
Albuquerque, NM 87123
175. Wanda Jane Alexander, Trustee of the U.
S. Alexander Family Trust, dated
February 22, 1989
14 East Leman Road
Lovington, NM 88260
176. William Gerald Dean
P.O. Box 430
Capitan, NM 88316
177. William N. Heiss and Susan E. Heiss, Co-
Trustees of the William N. Heiss Profit
Sharing Plan
P.O. Box 2944
Casper, WY 82602
178. Wyotex Oil Company
P.O. Box 280969
Lakewood, CO 80228

7017 0660 0000 6478 0608

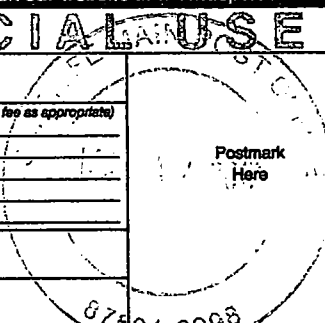
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
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OFFICIAL USE	
Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy) \$ _____	
☐ Return Receipt (electronic) \$ _____	
☐ Certified Mail Restricted Delivery \$ _____	
☐ Adult Signature Required \$ _____	
☐ Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To Barbara Lennon Williams 3 Ferrington Road Pittsboro, NC 27312	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

7017 0660 0000 6478 0615

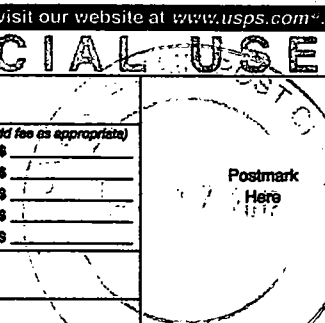
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy) \$ _____	
☐ Return Receipt (electronic) \$ _____	
☐ Certified Mail Restricted Delivery \$ _____	
☐ Adult Signature Required \$ _____	
☐ Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To Barry Antweil 6830 North Eldridge Pkwy #409 Houston, TX 77041	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

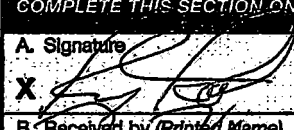
SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) JUDY BLASKOWSKI C. Date of Delivery 5-9-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
1. Article Addressed to: Blasco, LLC 6235 Savannah Way Colorado Springs, CO 80919		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	
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0622		Restricted Delivery	

7017 0660 0000 6478 0547

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Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy) \$	
☐ Return Receipt (electronic) \$	
☐ Certified Mail Restricted Delivery \$	
☐ Adult Signature Required \$	
☐ Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To Alma L. & Kelly B. Tisher	
Street and Apt. No., or PO Box No. P.O. Box 533	
City, State, ZIP+4® Littleton, CO 80160	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

7017 0660 0000 6478 0585

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
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Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy) \$	
☐ Return Receipt (electronic) \$	
☐ Certified Mail Restricted Delivery \$	
☐ Adult Signature Required \$	
☐ Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To Anne Goldston	
Street and Apt. No., or PO Box No. 5908 Auden	
City, State, ZIP+4® Houston, TX 77005	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Apache Corporation 2000 Post Oak Boulevard, Suite 100 Houston, Texas 77056-4400 9590 9402 2589 6336 9491 47 2. Article Number (Transfer from service label) 7017 0660 0000 6478 0592	A. Signature  ☒ Agent ☐ Addressee B. Received by (Printed Name) K. P. K. K. C. Date of Delivery 5-21-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Priority Mail® Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Bud & Mary Lou Flocchini Family Partnership 1330 Capital Boulevard Reno, NV 89502 9590 9402 2589 6336 9492 15 2. Article Number (Transfer from service label) 7017 0660 0000 6478 0660	A. Signature X <i>Tony Bitter</i> ☐ 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 JUN 13 2017 3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☒ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Insured Mail

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Cal Partee, Jr. P.O. Box 667 Magnolia, AR 71753 9590 9402 2589 6336 9492 22 2. Article Number (Transfer from service label) 7017 0660 0000 6478 0677	A. Signature X <i>Cal Partee</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) Cal Partee C. Date of Delivery MAY 23 2017 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No USPS 3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☒ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Insured Mail

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

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. Caprock Energy, LLC P.O. Box 7172165 Stateline, NV 89449 9590 9402 2349 6225 8220 50 2. Article Number (Transfer from service label) 7017 0660 0000 6478 0684	A. Signature X <i>M. Crosby</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) Mary Ann Crosby C. Date of Delivery 5/22/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No 3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☒ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Insured Mail

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

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 X <i>Richard W Carr</i> ☐ Agent ☒ Addressee	
1. Article Addressed to: Bonnie Carr 16 Four Mile Branch Lane Spartanburg, SC 29302		B. Received by (Printed Name) RICHARD W CARR C. Date of Delivery 5/20/17	
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0639		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		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 X <i>Brad Marr</i> ☐ Agent ☒ Addressee	
1. Article Addressed to: Bradley Earnest Marr 11135 River Road Havre, MT 59501		B. Received by (Printed Name) Brad Marr C. Date of Delivery 5/20/17	
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0646		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		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 X <i>[Signature]</i> ☐ Agent ☒ Addressee	
1. Article Addressed to: Buckhead Energy, LLC P.O. Box 471288 Fort Worth, TX 76147		B. Received by (Printed Name) J. Delaney C. Date of Delivery 5/20/17	
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0653		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

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

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

Postage

\$

Total Postage and Fees

\$

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Carlos Dean Alexander
 604 East McDonald Road
 Lovington, NM 88260

Postmark
 Here

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

See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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Certified Mail Fee

\$

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

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

Postage

\$

Total Postage and Fees

\$

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Chatfield Company, LLC
 3070 Cherry Creek Drive, Unit C
 Denver, CO 80209

Postmark
 Here

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:
 Christa L. Leavell
 P.O. Box 470
 Robinson, IL 62454

9590 9402 2349 6225 8220 81

2. Article Number (Transfer from service label)

7017 0660 0000 6478 0714

A. Signature

*Michelle Leavell ☒ Agent ☐ Addressee

B. Received by (Printed Name)

Michelle Leavell

C. Date of Delivery

5-23-17

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

3. Service Type

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

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

Restricted Delivery

SENDER COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Christa L. Leavell, Custodian for Michelle C. Leavell P.O. Box 470 Robinson, IL 62454 9590 9402 2874 7069 5543 20 2. Article Number (Transfer from service label) 7017 0660 0000 6478 1131	A. Signature X <i>Michelle C. Leavell</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery Michelle Leavell 5-23-17 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

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

SENDER COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Christopher R. F. Eckels P.O. Box 30 Cedaredge, CO 81413 9590 9402 2349 6225 8220 98 2. Article Number (Transfer from service label) 7017 0660 0000 6478 0721	A. Signature X <i>C. Eckels</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) C. Date of Delivery C. Eckels 5-22-17 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

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

SENDER COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Citadel Oil & Gas Corporation P.O. Box 3052 Denver, CO 80201 9590 9402 2349 6225 0221 01 2. Article Number (Transfer from service label) 7017 0660 0000 6478 0738	A. Signature X <i>Douglas J. ...</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery ... 5-23-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ 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

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:

Craig Hubbard
P.O. Box 3232
Midland, TX 79702

9590 9402 2703 6351 7665 36

2. Article Number (Transfer from service label)

7017 0660 0000 6478 0776

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Craig Hubbard

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Hubbard

C. Date of Delivery

5/20/17

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

*POB 3232
79702*

3. Service Type

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

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

Restricted Delivery

SENDER COMPLETE THIS SECTION

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

1. Article Addressed to:

David Higgs
11 River Street, Lanc
Savannah, GA 31410

9590 9402 2703 6351 7665 43

2. Article Number (Transfer from service label)

7017 0660 0000 6478 0783

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

David Higgs

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/20/17

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

3. Service Type

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

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

Restricted Delivery

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

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

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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., or PO Box

Dena G. Northrup
2613 W. 26th Avenue
Amarillo, TX 79101

City, State, ZIP+4®

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

7017 0660 0000 6478 0790

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Clayton Hubbard 412 Candlelight Circle Fredericksburg, TX 78624 9590 9402 2349 6225 8221 11 2. Article Number (Transfer from service label) 7017 0660 0000 6478 0745	A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) Clayton Hubbard C. Date of Delivery MAY 11 2017 FREDERICKSBURG, VA D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No 3. Service Type <table style="width: 100%; font-size: small;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table> Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery
☐ Adult Signature	☐ Priority Mail Express®												
☐ Adult Signature Restricted Delivery	☐ Registered Mail™												
☒ Certified Mail®	☐ Registered Mail Restricted Delivery												
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise												
☐ Collect on Delivery	☐ Signature Confirmation™												
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery												

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

7017 0660 0000 6478 0752

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

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

OFFICIAL USE

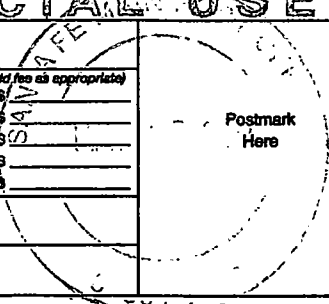
Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	
\$	
Total Postage and Fees	
\$	
Sent To	
Street and Apt. No., or PO Box	
City, State, ZIP+4®	
Connie Goldston 6107 A Bullard Drive Austin, TX 78757	

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

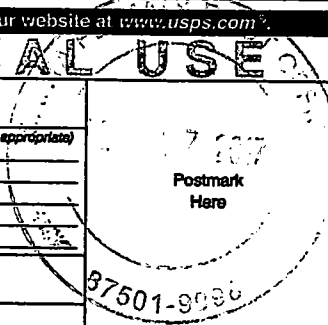
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: ConocoPhillips P.O. Box 2197 Houston, TX 77252-2197 9590 9402 2703 6351 7665 29 2. Article Number (Transfer from service label) 7017 0660 0000 6478 0769	A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery MAY 11 2017 SAM HOUSTON, TX D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No 3. Service Type <table style="width: 100%; font-size: small;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table> Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery
☐ Adult Signature	☐ Priority Mail Express®												
☐ Adult Signature Restricted Delivery	☐ Registered Mail™												
☒ Certified Mail®	☐ Registered Mail Restricted Delivery												
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise												
☐ Collect on Delivery	☐ Signature Confirmation™												
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery												

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

7017 0660 0000 6478 0806

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee \$	
Extra Services & Fees (check box, add 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	Don Looney
Street and Apt. No., or PO Box No.	P.O. Box 117
City, State, ZIP+4®	Alpine, TX 79734
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

7017 0660 0000 6478 0813

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee \$	
Extra Services & Fees (check box, add 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	Donald Leon Moore, Jr.
Street and Apt. No., or PO Box No.	2205 New Garden Road, #3304
City, State, ZIP+4®	Greensboro, NC 27410
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:

Doug Brazil
P.O. Box 624
Fulshear, TX 77441

9590 9402 2703 6351 7665 50

2. Article Number (Transfer from service label)

7017 0660 0000 6478 0820

COMPLETE THIS SECTION ON DELIVERY**A. Signature:**

X

☐ Agent☐ Addressee**B. Received by (Printed Name)**

Doug Brazil

C. Date of Delivery

5/30/17

D. Is delivery address different from item 1?☐ Yes

If YES, enter delivery address below:

☐ No**3. Service Type**

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

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

Restricted Delivery

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: Elizabeth Jane Kay, Trustee of the Elizabeth Jane Kay Family Trust P.O. Box 9602 Colorado Springs, CO 80932	B. Received by (Printed Name) J. N. KAY C. Date of Delivery 5/22/17
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0837	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 ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

SENDER: COMPLETE THIS SECTION	COMPLETE 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: Elizabeth Lawton Mellon 2321 Northeast 35th Street Lighthouse Point, FL 33064	B. Received by (Printed Name) Elizabeth Mellon C. Date of Delivery 5/22/17
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0844	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®	
OFFICIAL USE	
Certified Mail Fee \$ _____	Postmark Here MAY 17 2017
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 Estate of William Ray Montgomery 3712 Fairfax Avenue Dallas TX 75209-6214	
Street and Apt. No., or PO Box No.	
City, State, ZIP+4®	

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

SENDER - COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☐ Complete items 1, 2, and 3. ☐ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Fall River Resources, Inc. P.O. Box 13456 Denver, CO 80201	A. Signature ☐ Agent ☐ Addressee B. Received by (Printed Name) Robert Desma C. Date of Delivery May 23, 2017 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0868	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 ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

SENDER - COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☐ Complete items 1, 2, and 3. ☐ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: FFF, Inc. P.O. Box 8874 Denver, CO 80201	A. Signature ☐ Agent ☐ Addressee B. Received by (Printed Name) Harry L. C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0875	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

SENDER - COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☐ Complete items 1, 2, and 3. ☐ Print your name and address on the reverse so that we can return the card to you. ☐ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Frances A. Hannifin 730 17th Street, Suite 325 Denver, CO 80202	A. Signature ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery 5/19/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0882	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

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 ☒ <i>[Signature]</i> ☐ Agent ☐ Addressee	
1. Article Addressed to: George M. O'Brien P.O. Box 1743 Midland, TX 79702		B. Received by (Printed Name) <i>Bennie Ross</i> C. Date of Delivery <i>5/23/17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
2. Article Number (Transfer from service label) 9590 9402 2691 6351 8891 32 7017 0660 0000 6478 0899		3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☒ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Insured Mail ☐ Signature Confirmation Restricted Delivery	

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

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 ☒ <i>[Signature]</i> ☐ Agent ☐ Addressee	
1. Article Addressed to: Gold Struck Investments, LP c/o Wells Fargo Bank, NA, as Agent 705 E. Mulberry Avenue, Suite 402 San Antonio, TX 78212		B. Received by (Printed Name) <i>PEGGY JONES</i> C. Date of Delivery <i>5-22-17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
2. Article Number (Transfer from service label) 9590 9402 2691 6351 8891 49 7017 0660 0000 6478 0905		3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☒ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Insured Mail ☐ Signature Confirmation Restricted Delivery	

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

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 ☒ <i>[Signature]</i> ☐ Agent ☒ Addressee	
1. Article Addressed to: Harle, Inc. c/o David S. Harle, President 7625 Southwest Middle Greens Rd Wilsonville, OR 97070-9418		B. Received by (Printed Name) <i>David S. Harle</i> C. Date of Delivery <i>5-22-17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
2. Article Number (Transfer from service label) 9590 9402 2874 7069 5541 08 7017 0660 0000 6478 0912		3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☒ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Insured Mail ☐ Signature Confirmation Restricted Delivery	

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

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

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

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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., or PO Box No.

City, State, ZIP+4®

Janis Foster McCoy

P.O. Box 2463

Boerne, TX 78006

Postmark
Here

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

See Reverse for Instructions.

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

For delivery information, visit 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., or PO Box No.

City, State, ZIP+4®

Joe Goldston

226 Forest Road

Lumberton, NC 28358

Postmark
Here

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:

John A. Lennon
c/o Department of Music,
Emory University
535 Kilgore Circle
Atlanta, GA 30322

9590 9402 2691 6351 8884 70

2. Article Number (Transfer from service label)

7017 1000 0001 0525 9378

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X **RECEIVED** Agent
Addresssee

B. Received by (Printed Name) Date of Delivery

MAY 22 2017

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

By

By

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Restricted Delivery

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

Domestic Return Receipt

7017 0660 0000 6478 0943

U.S. Postal Service™
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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
 J.C. Batchelor
 Street and Apt. No., or PO Box No. 4909 Stoneridge Drive
 City, State, ZIP+4® Raleigh, NC 27612

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

7017 0660 0000 6478 1216

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

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

OFFICIAL USE

Certified Mail Fee
 \$ _____

Extra Services & Fees (check box, add 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
 Trustee of the RMW Trust
 Street and Apt. No., or PO Box No. 5 Dovekie Court
 City, State, ZIP+4® Nantucket, MA 02554

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:

Jan C. Dodson-Ice
 P.O. Box 7366
 Covington, WA 98042

2. Article Number (Transfer from sender label)

9590 9402 2874 7069 5541 46

7017 0660 0000 6478 0950

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

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 Delivery	

Domestic Return Receipt

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 B. Received by (Printed Name) Jonathan S. Roderick C. Date of Delivery MAY 24 2007 BOULDER CO	
1. Article Addressed to: Jonathan S. Roderick, Trustee of the Jonathan S. Roderick Living Trust, dated February 8, 2007 P.O. Box 7961 Boulder, CO 80306		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0981		3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	

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

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

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

OFFICIAL USE

Certified Mail Fee
 \$

Extra Services & Fees (check box, add 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
 Kelly Anne Marr
 P.O. Box 7201-9555
 Andrews, TX 79714

Street and Apt. No., or PO Box No.
 City, State, ZIP+4®

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

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature ☒ Agent ☒ Addressee B. Received by (Printed Name) Sandra Hill C. Date of Delivery	
1. Article Addressed to: King Oil & Gas of Texas, Ltd. 77057		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
2. Article Number (Transfer from service label) 7017 0660 0000 6478 1018		3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Heirs of Anna Ray Joyner c/o Mark Dodds P.O. Box 2801 Crested Butte, CO 81224	A. Signature ☒ Agent ☒ Addressee B. Received by (Printed Name) Mark Dodds C. Date of Delivery 8/22/11 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0561	3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

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

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

OFFICIAL USE

Certified Mail Fee \$ Extra Services & Fees (check box, add 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 Heirs of Charlene Alexander Marr P.O. Box 7207 Andrews, TX 79714 Street and Apt. No., or P.O. Box City, State, ZIP+4®	Postmark Here
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PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Heirs of John Henry Latham c/o Edith Latham 1321 Park Bayou Drive Houston, TX 77077	A. Signature ☐ Agent ☐ Addressee B. Received by (Printed Name) D. Burton C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
2. Article Number (Transfer from service label) 7017 0660 0000 6478 0936	3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

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 B. Received by (Printed Name) <u>Hubbard</u> C. Date of Delivery <u>7/11/15</u> D. Is delivery address different from item 1? <u>Yes</u> If YES, enter delivery address below: <u>POB 3282 Midland TX 79702</u>	
1. Article Addressed to: Heirs of W.C. Hubbard c/o Craig Hubbard P.O. Box 3282 Midland, TX 79701		3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	
2. Article Number (Transfer from service label) 7017 0660 0000 6478 1315			

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

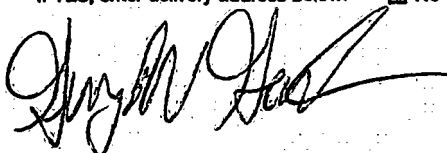
Domestic Return Receipt

7017 0660 0000 6478 0998

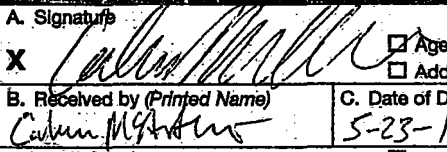
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy) \$	
☐ Return Receipt (electronic) \$	
☐ Certified Mail Restricted Delivery \$	
☐ Adult Signature Required \$	
☐ Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To	
Street and Apt. No., or PO Box No.	Justin & Grady Paul Hunnicutt 14275 Midway Road, Suite 220 Addison, TX 75001
City, State, ZIP+4®	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

7017 0660 0000 6478 1025

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee \$	
Extra Services & Fees (check box, add 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., or PO Box No.	Laura Dena Moore Lee 3313 Stable Court Greensboro, NC 27410
City, State, ZIP+4®	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER - COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature X  ☐ Agent ☐ Addressee
1. Article Addressed to: Lavaca Minerals Company P.O. Box 476 Barker, TX 77413	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
2. Article Number (Transfer from service label) 7017 0660 0000 6478 1032	3. Service Type ☒ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

SENDER - COMPLETE THIS SECTION	COMPLETE 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 X  ☐ Agent ☐ Addressee
1. Article Addressed to: Lazy S Minerals, LLC P.O. Box 100493 Fort Worth, TX 76185	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
2. Article Number (Transfer from service label) 7017 0660 0000 6478 1049	3. Service Type ☒ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

U.S. Postal Service™
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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., or PO Box No. _____

City, State, ZIP+4® _____

Loretta D. Lowe
1200 Barton Creek Blvd., #2
Austin, TX 78735

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete Items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☒ <i>[Signature]</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>5/31/17</i> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:
1. Article Addressed to: Louis A. Oswald, III P.O. Box 280969 Lakewood, CO 80228	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 Delivery
Article Number (Transfer from service label) 7017 0660 0000 6478 1063	

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

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 ☒ <i>[Signature]</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>5/31/17</i> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:
1. Article Addressed to: Louis A. Oswald, III, Trustee of the Oswald Family Trust P.O. Box 280969 Lakewood, CO 80228	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 Delivery
2. Article Number (Transfer from service label) 7017 0660 0000 6478 1162	

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

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

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

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add 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., or PO Box #
 City, State, ZIP+4®

Mark Antweil
 P.O. Box 365
 Larchmont, NY 10538

87501-9998

PS Form 3800, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Mark Caldwell and Bonnie Caldwell 3512A Shell Midland, TX 79707	A. Signature ☒ Agent ☒ Addressee B. Received by (Printed Name) _____ C. Date of Delivery <u>5/7/15</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No		
2. Article Number (Transfer from service label) 7017 0660 0000 6478 1070	3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table> Restricted Delivery	☐ 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
☐ 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		

9590 9402 2874 7069 5542 69

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

7017 0660 0000 6478 1094

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

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

OFFICIAL USE

Certified Mail Fee \$ _____ Extra Services & Fees (check box, add 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 \$ _____	
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Sent To Martha Jean Cordes, 9990

Street and Apt. No., or PO Box No. 2 Broughton Circle

City, State, ZIP+4® Bluffton, SC 29910

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

7017 0660 0000 6478 1100

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

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

OFFICIAL USE

Certified Mail Fee \$ _____ Extra Services & Fees (check box, add 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 \$ _____	
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Sent To Mary E.M. Mooney

Street and Apt. No., or PO Box No. 107 Linden Street

City, State, ZIP+4® Plymouth, NC 27926

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:

Mary Frances Antweil
 5410 Ledgestone Drive
 Fort Worth, TX 76132

9590 9402 2874 7069 5543 06

2. Article Number (Transfer from service label)

7017 0660 0000 6478 1117

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)

C. Date of Delivery

5/22

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

3. Service Type

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

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

all 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:

Mary Hood
 142 Stillwater Road
 Waco, TX 76708

9590 9402 2874 7069 5543 13

2. Article Number (Transfer from service label)

7017 0660 0000 6478 1124

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)

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

all 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:

Bill Goldston Family Trust
 c/o Wells Fargo Bank, NA, as Agent
 705 E. Mulberry Avenue, Suite 402
 San Antonio, TX 78212

9590 9402 2874 7069 5549 86

2. Article Number (Transfer from service label)

7017 0660 0000 6477 9374

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)

P. EGGY JONES

C. Date of Delivery

5-22-17

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

3. Service Type

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

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

all Restricted Delivery
 (over \$500)

SENDER COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Pumpkin Buttes, LLC P.O. Box 1989 Casper, WY 82602	A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) <u>J. L. Spillers</u> C. Date of Delivery <u>5/21/17</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
2. Article Number (Transfer from service label) 7017 0660 0000 6478 1186	3. Service Type <table style="width: 100%; border: none;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

9590 9402 2874 7069 5543 75

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

7017 0660 0000 6477 9398

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

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

OFFICIAL USE

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add 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 <u>Ramsey Petroleum, LP</u>	
Street and Apt. No., or PO Box No. <u>5th W Ohio</u>	
City, State, ZIP+4® <u>Midland TX 79701</u>	

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

7017 0660 0000 6478 1193

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

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

OFFICIAL USE

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add 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 <u>Reef Oil Corporation</u>	
Street and Apt. No., or PO Box No. <u>12 Rue Maison Drive</u>	
City, State, ZIP+4® <u>Abilene, TX 79605</u>	

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

7017 0660 0000 6478 1209

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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., or PO Box No.

City, State, ZIP+4®

Richard Glenn Moore
1224 Shirley Road
Lynchburg, VA 24502

PS Form 3800, April 2015 PSN 7530-02-000-90-7

See Reverse for Instructions

7017 0660 0000 6478 1223

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

Certified Mail Fee

\$

Extra Services & Fees (check box, add 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., or PO Box No.

City, State, ZIP+4®

Robert Edward Alexander
718 Ashleigh Lane
Lantana, TX 76226

PS Form 3800, April 2015 PSN 7530-02-000-90-7

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:

Robert Edward Eckels, Jr., LLC
P.O. Box 1093
Cedaredge, CO 81413
Circa: 2009

9590 9402 2874 7069 5544 29

2. Article Number (Transfer from service label)

7017 0660 0000 6478 1230

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Laurel Eckels☒ Agent☐ Addressee

B. Received by (Printed Name)

Laurel Eckels

C. Date of Delivery

5-23-09D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☒ No

CEDALEDGE, CO
MAY 23 2009

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

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Ronald Dal Alexander 2806 Alexander Road Lovington, NM 88260 9590 9402 2874 7069 5544 36 2. Article Number (Transfer from service label) 7017 0660 0000 6478 1247	A. Signature <i>X [Signature]</i> ☐ 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 <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> </table> Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Insured Mail	
☐ Adult Signature	☐ Priority Mail Express®														
☐ Adult Signature Restricted Delivery	☐ Registered Mail™														
☒ Certified Mail®	☐ Registered Mail Restricted Delivery														
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise														
☐ Collect on Delivery	☐ Signature Confirmation™														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Insured Mail															

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Sandra Ann Alexander 2806 Alexander Road Lovington, NM 88260 9590 9402 2874 7069 5544 43 2. Article Number (Transfer from service label) 7017 0660 0000 6478 1254	A. Signature <i>X [Signature]</i> ☐ 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 <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> </table> Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Insured Mail	
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☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise														
☐ Collect on Delivery	☐ Signature Confirmation™														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Insured Mail															

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Terry Stokes McConaughy 100 Newbury Court Suite 312 Concord, MA 01742 9590 9402 2874 7069 5544 01 2. Article Number (Transfer from service label) 7017 0660 0000 6478 1278	A. Signature <i>X [Signature]</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>Karen Wollam</i> C. Date of Delivery <i>5/20/17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> </table> Restricted Delivery	☐ Adult Signature	☐ Priority Mail Express®	☐ Adult Signature Restricted Delivery	☐ Registered Mail™	☒ Certified Mail®	☐ Registered Mail Restricted Delivery	☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise	☐ Collect on Delivery	☐ Signature Confirmation™	☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery	☐ Insured Mail	
☐ Adult Signature	☐ Priority Mail Express®														
☐ Adult Signature Restricted Delivery	☐ Registered Mail™														
☒ Certified Mail®	☐ Registered Mail Restricted Delivery														
☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise														
☐ Collect on Delivery	☐ Signature Confirmation™														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
☐ Insured Mail															

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete Items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: The Taejen J. Carter Living Trust c/o Taejen Jon Carter 7010 Island Village Drive Long Beach, CA 90803 9590 9402 2874 7069 5544 50 2. Article Number (Transfer from service label) 7017 0660 0000 6478 1261	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) _____ C. Date of Delivery _____ D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete Items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Titanium Energy Partners, LP 2100 McKinney Avenue, #1770 Dallas, TX 75201 9590 9402 2874 7069 5544 74 2. Article Number (Transfer from service label) 7017 0660 0000 6478 1285	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) T. Jackson C. Date of Delivery 5/22/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete Items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Toles-Com-Ltd., LLC P.O. Box 1300 Roswell, NM 88202 9590 9402 2874 7069 5544 81 2. Article Number (Transfer from service label) 7017 0660 0000 6478 1292	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) Debra Franks C. Date of Delivery 5/22/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Wadi Petroleum, Inc. 4355 Sylvanfield Drive, Suite 200 Houston, TX 77014 2. Article Number (Transfer from service label): 7017 0660 0000 6478 1322	A. Signature X <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery 5-22-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☒ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Walter E. Batchelor 218 Dogwood Drive Mount Holly, NC 28120 2. Article Number (Transfer from service label): 7017 0660 0000 6478 1339	A. Signature X <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery 5-22-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☒ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation™ ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

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

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

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

OFFICIAL USE

Certified Mail Fee \$ _____ Extra Services & Fees (check box, add 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., or PO Box City, State, ZIP+4®	Postmark Here <i>[Postmark]</i> Walter Herbert Moore 1617 Country Club Road Reidsville, NC 27320
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PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
☒ Complete items 1, 2, and 3. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Wanda Jane Alexander, Trustee of the U. S. Alexander Family Trust 14 East Leman Road Lovington, NM 88260 9590 9402 2874 7069 5544 98 2. Article Number (Transfer from service label) 7017 0660 0000 6478 1308	A. Signature X <i>[Signature]</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>[Signature]</i> 5/31/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

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☒ 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 N. Heiss and Susan E. Heiss, Co-Trustees of the William N. Heiss Profit Sharing Plan P.O. Box 2944 Casper, WY 82602 9590 9402 2874 7069 5549 62 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9350	A. Signature X <i>[Signature]</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery Heather Butler 5/30/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

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☒ 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: Wyotex Oil Company P.O. Box 280969 Lakewood, CO 80228 9590 9402 2874 7069 5549 79 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9367	A. Signature X <i>[Signature]</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery PCCODE 5/31/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA

I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated
May 23, 2017
and ending with the issue dated
May 23, 2017.



Publisher

Sworn and subscribed to before me this
23rd day of May 2017.



Business Manager

My commission expires

January 29, 2019

(Seal)

OFFICIAL SEAL
GUSSIE BLACK

Notary Public
State of New Mexico

My Commission Expires 1-29-19

This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said

LEGAL NOTICE
May 23, 2017

PUBLICATION NOTICE

This is to notify all interested parties, including Alice McCoy Anderson, Alma L. Tisher, Kelly B. Tisher, Amber Smith, Anne Goldston, Apache Corporation, Bank of America, as Agent for Mark Pittman Marshall, Barbara Lennon Williams, Barry Antweil, Bergman Mineral Holdings, LLC, Betty Anderson Haisten, Betty L. Pagan, Blake Dodds, Blasco, LLC, Boldrick Family Properties, LP, Bonnie Carr, Bradford A. Stevenson, Bradley Earnest Marr, Buckhead Energy, LLC, Bud & Mary Lou Flocchini Family Partnership, C.E.S. Bellows, IV, Cal Partee, Jr., Caprock Energy, LLC, Carlos Dean Alexander, Cassidy Dodds, Charles A. Stokes, Charles E. Breslin, Charles Peter Crouch, Jr., Charles V. Beasley, Edwin D. Beasley, Chatfield Company, LLC, Christa L. Leavell, Custodian for Michelle C. Leavell, Christa L. Leavell, Christopher R.F. Eckels, Cirrus Minerals, LLC, Citadel Oil & Gas Corporation, Clayton Hubbard, Coby Burrow, Connie Goldston, Conoco Phillips, Craig Hubbard, David Higgs, David Mapes, Jr., David Mapes, Sr., Dean Kinsolving, d/b/a KINCO, Dena G. Northrup, Don Looney, Donald Leon Moore, Jr., Dorothy Looney, Doug Brazil, Edward Graham Gallagher, Trustee U/W of Elmer E. Batzell, Elizabeth Jane Kay, Trustee of the Elizabeth Jane Kay Family Trust, Elizabeth Lawton Mellon, a/k/a Elizabeth T. Mellon, Estate of William Ray Montgomery, Evanil Oil Company, Fall River Resources, Inc., FFF, Inc., Frances A. Hannifin, George M. O'Brien, Janie D. Corley, as Trustee of the Janie D. Corley Trust Declaration, Janis Foster McCoy, JBC Interests, Ltd., Jeannie McCraw, Joe Goldston, John A. Lennon, Jolene Wojinski, Jonathan S. Roderick, Trustee of the Jonathan S. Roderick Living Trust, Juliet Lawton Miller, Keely Meyer, Kelly Anne Marr, Kent H. Wallace & Suzan Jill Wallace, Co-Trustees of the 2008 Kent H. Wallace Trust Agreement, Kevin H. Tripp & Linda K. Tripp, as Co-Trustees of the Kevin H. Tripp and Linda K. Tripp Family Trust, Gibson F. Anderson Jr., Gold Struck Investments, LP, Goldston Oil Corporation, Harle, Inc., Harriet Cutler Bellows Crockard, Helen Elizabeth Bellows, Hugh Robert Frenzel, Iris Goldston Trust for Nancy Zoe Goldston Herpin, J. Fred Jordan, Trustee of the R.G. Lawton Trust No. 5, J.C. Batchelor, Jack H. Mayfield Jr., Jack H. Mayfield, III, Jacqueline C. Williams, Trustee of the RMW Trust, Jan C. Dodson-Ice, King Oil & Gas of Texas, Ltd, Heirs of Anna Ray Joyner, Heirs of Betty Rae Nelson Breslin, Heirs of Charlene Alexander Marr, Heirs of E.M. Anderson, Heirs of Jane P. Burrow, Heirs of John Henry Latham, Heirs of Nancy Dodds, Heirs of Nell Joyner Mapes, Heirs of R.G. Lawton, Heirs of Vance and Ray Beth Foster, Heirs of W.C. Hubbard, Kristy Trueheart, Larry Burrow, Larry Hunnicutt, as Custodian for Justin Travis Hunnicutt and Grady Paul Hunnicutt, Laura Dena Moore Lee, Lavaca Minerals Company, Lazy S Minerals, LLC, Leslie Diane Beckmann, Loretta D. Lowe, Louis A. Oswald, III, Individually and as Trustee of the Oswald Family Trust, Lucy Anderson Rose, Lydia Mayfield Abbott 1999 Trust, Margaret Wallace Eaton, Mark Antweil, Mark Caldwell and Bonnie Caldwell, Mark Dodds, Martha Castillo, Martha Jean Cordes, Mary E.M. Mooney, Mary Frances Antweil, Mary Gail Hentzen, Mary Hood, Maurine M. Massie, Megan Goldston, Trustee of the Bill Goldston Family Trust, Michael J. Sheridan, Morrie Nelson, MW Oil Investment Company, Inc., Nancy Zoe Herpin, Natasha Dees, Nearburg Exploration Company, L.L.C., Pamela Anne Wallace Pruitt, Patricia Moore Stewart, Pauline Couch Slack, Pauline Deeme Couch, PEP II Management, LLC, Pumpkin Buttes, LLC, R.G. Lawton, RAM Energy, LLC, Ramsey Petroleum, L.P., Raney Forbes, RCPTX, Ltd., Reef Oil Corporation, Ribble Investment Company, LLC, Richard C. Lawton III, Richard Clem Moore, Robert D. Wallace and Sheila G. Wallace, Individually and as Trustees of the Sheila G. Wallace Revocable Trust, Robert Edward Alexander, Robert Edward Eckels, Jr., LLC, Robert Henry Joyner, Robert Owen Joyner, Ronald Alan Dunlap, Ronald Dai Alexander, Ronald Gene Stevenson and Kathy Stevenson, Sandra Ann Alexander, Source Energy Partners, LLC, 1/k/a Source Minerals, LLC, Stephens Production Company, Steven Chase, Trustee of the Chase Family Trust, Strata Land Acquisition, LP, Summer Resources, LLC, Susan Mayfield 1987 Marital Trust, Jack H. Mayfield, Trustee, T.J. Raney & Sons, Terry A. Currie, Terry Stokes McConaughy, The Taegen J. Carter Living Trust, The William K. Warren Foundation, Thomas L. Pool, Trustee of the Thomas and Donda Pool Trust, Thomas R. Anderson, Titanium Energy Partners, LP, Toles-Com-Ltd., LLC, Tracy Knifong, W.C. Hubbard, W.C. Partee, Jr., Wadi Petroleum, Inc. Walter E. Batchelor, Walter Goldston Mayfield, Walter Herbert Moore, Walter K. Graham, Wanda Jane Alexander, Trustee of the U.S. Alexander Family Trust, William Dee Wallace, William Gerald Dean, William N. Heiss and Susan E. Heiss, Co-Trustees of the William N. Heiss Profit Sharing Plan, and Wyotex Oil Company, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Special Energy Corporation (Case No. 15713) at 8:15 a.m. on June 8, 2017 in Porter Hall at 1220 South St. Francis Drive, Santa Fe, New Mexico. Special Energy seeks an order (i) approving a 160-acre, non-standard spacing and proration unit in the W/2 E/2 of Section 31, Township 11 South, Range 38 East, Lea County, New Mexico, and (ii) pooling all uncommitted mineral interests in the San Andres formation. The project area is to be dedicated to the Jenna #1-H well, which will be horizontally drilled from a surface location in Unit O of Section 30, Township 11 South, Range 38 East to a bottom hole location in Unit O of Section 31, Township 11 South, Range 38 East. Also to be considered will be the cost of drilling and completing the well and the allocation of the cost, the designation of Special Energy as the operator of the well, and a 200% charge for the risk involved in drilling and completing the well. The proposed project area is located approximately nine miles east of Tatum, New Mexico.

#31795

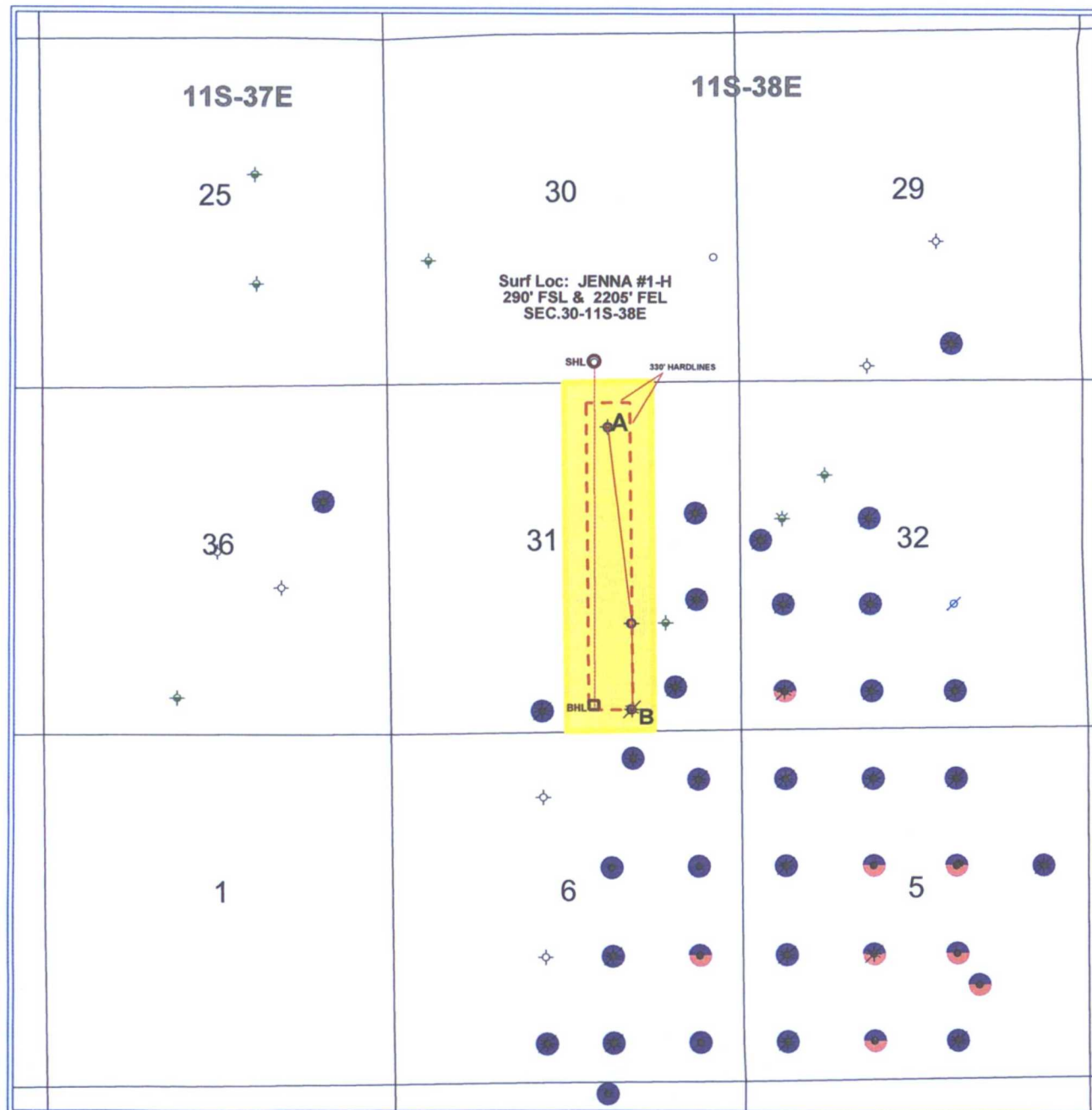
02107475

00193844

HINKLE, HENSLEY, SHANOR & MARTIN, LLP
PO BOX 2068
SANTA FE, NM 87504

OCD Case No. 15713
SPECIAL ENERGY CORP.
Jenna #1-H
Exhibit #5

ESTIMATED COST*



LOCATION MAP

SAN ANDRES HORIZONTAL

OCD Case #

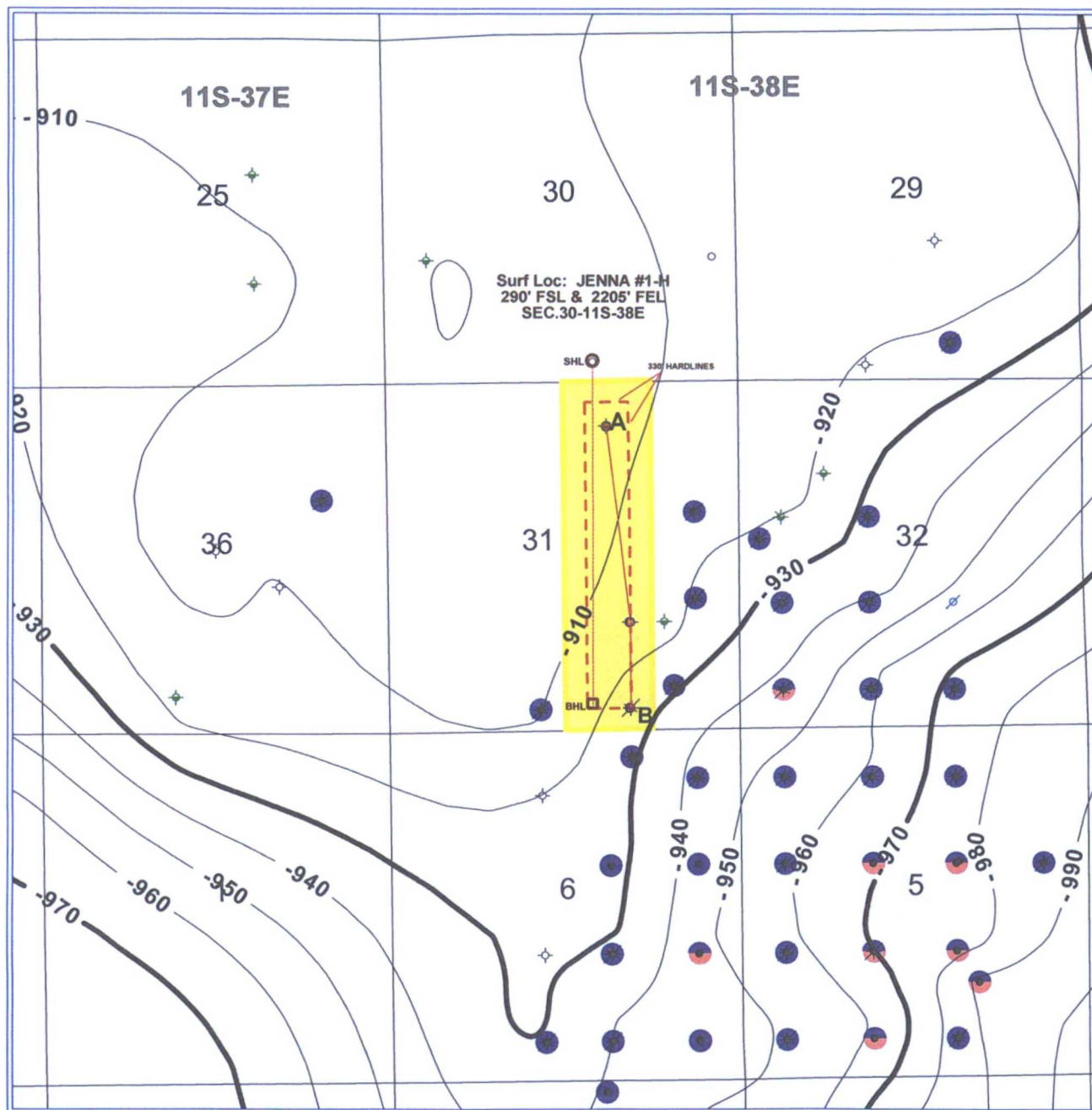
EXHIBIT #



ATTRIBUTE MAP



OCD Case No. 15713
SPECIAL ENERGY CORP.
Jenna #1-H
Exhibit #7



SAN ANDRES P1 MARKER

STRUCTURE MAP

CI = 10'

OCD Case #

EXHIBIT #



ATTRIBUTE MAP

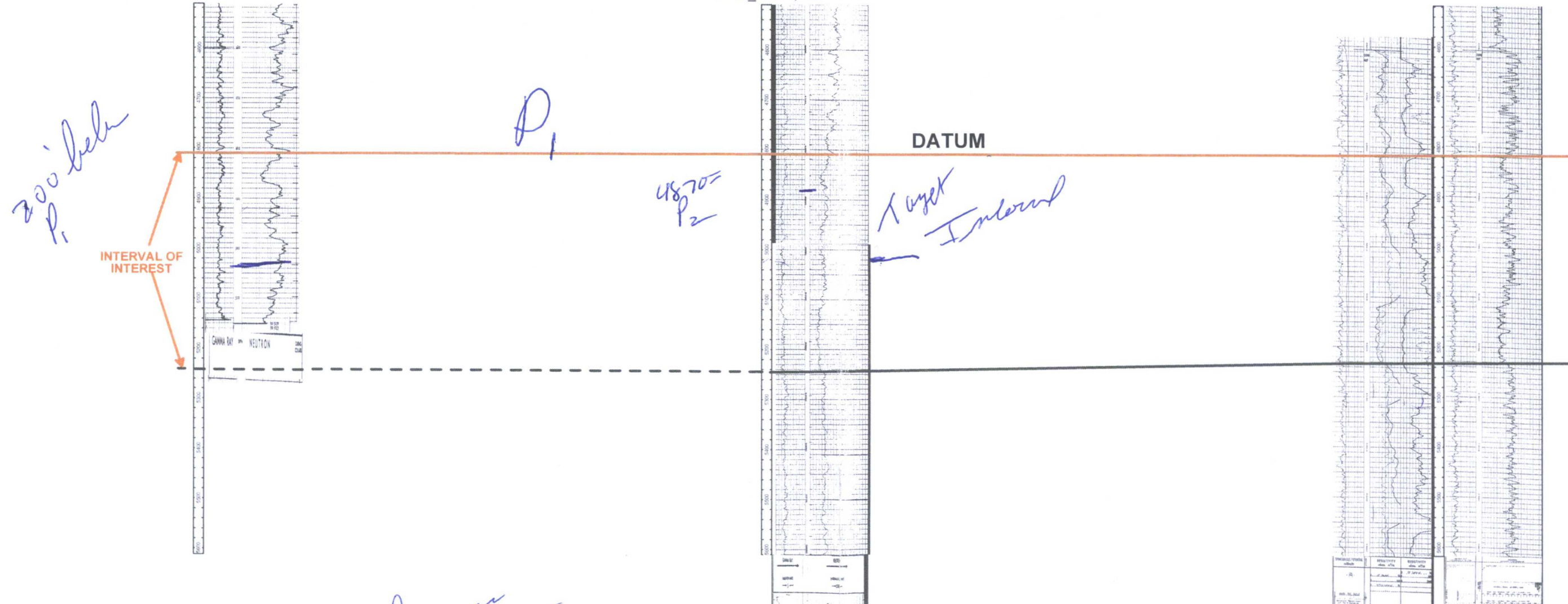


OCD Case No. 15713
SPECIAL ENERGY CORP.
Jenna #1-H
Exhibit #8

A
HANSON & ALLEN INC
WALLACE DD
T11S R38E S31
660 FNL 1980 FEL
TD : 5,160
ELEV_KB : 3,904

SPECIAL ENERGY CORPORATION
WALLACE
T11S R38E S31
1650 FSL 1650 FEL
WELL MBO : 610.1
TD : 11,995
ELEV_KB : 3,895

B
UNION OIL
MJ WALLACE
T11S R38E S31
330 FSL 1650 FEL
WELL MBO : 739.9
TD : 12,026



By Alyssa



Stratigraphic Xsec A---B