

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

**APPLICATION OF DEVON ENERGY PRODUCTION
COMPANY, L.P. FOR LEASE COMMINGLING,
EDDY COUNTY, NEW MEXICO.**

Case No. 13,869

AFFIDAVIT REGARDING NOTICE

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

James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of eighteen, and have personal knowledge of the matters stated herein.

2. I am an attorney for Devon Energy Production Company, L.P.

3. Devon Energy Production Company, L.P. has conducted a diligent, good faith effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.

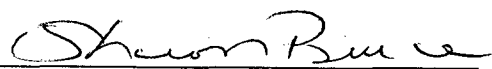
4. Notice of the application was provided to the interest owners at their correct addresses by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.

5. Devon Energy Production Company, L.P. has complied with the notice provisions of Division Rules.


James Bruce

SUBSCRIBED AND SWORN TO before me this 31st day of January, 2007, by James Bruce.

My Commission Expires: 3/14/09


Notary Public

Oil Conservation Division
Case No. _____
Exhibit No. 8

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruce@aol.com

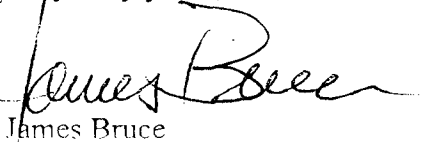
January 11, 2007

To: Persons listed on Exhibit A

Devon Energy Production Company, L.P. has filed an application (copy enclosed) with the New Mexico Oil Conservation Division seeking an exception to Division Rule 19.15.5.303A NMAC to authorize the surface commingling of production from the Ingle Wells-Delaware Pool originating from its wells located on Federal Oil and Gas Leases NM 0418220-A and NM 0405444-A, which collectively comprise all of Section 26, Township 23 South, Range 31 East, N.M.P.M. Applicant also seeks an exception to the metering requirements of Rule 19.15.5.303B(4)(a) NMAC to authorize the allocation of production from these diversely-owned wells on the basis of periodic well tests. All production from these wells is to be stored at the Todd "26" Tank Battery, located in the SW/4NE/4 of Section 26. This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 1, 2007 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in one or both of the leases, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a latter date.

If you intend to appear at the hearing, you must notify the Division and the undersigned, in writing, by Thursday, January 25, 2007.

Very truly yours,



James Bruce

Attorney for Devon Energy Production Company, L.P.

EXHIBIT A

EXHIBIT A

Working Interest Owners

Bascom L. Mitchell
No. 1 Live Oak
Midland, TX 79705

Joe N. Gifford
P. O. Box 51187
Midland, TX 79710-1187

Mary Patricia Dougherty Trust
c/o Northern Bank of Texas
2701 Kirby
Houston, TX 77098
Attn: David J. Parker

Obie & Company
c/o JPMorgan Chase Bank
600 Travis Street, 3rd Floor
Houston, TX 77252
Attn: Greg Crow

Thomas E. Kelly
TEK Properties, Ltd.
The Highlands
Seattle, WA 98177

Otto E. Schroeder
2015 Channing Park
Arlington, TX 76013

Catherine M. Grace
c/o Dan Serna & Company
6031 W. I-20, Suite 251
Arlington, TX 76017

Mary Margaret Olson Trust
Leonard B. Olson, Trustee
c/o Dan Serna & Company
6031 W. I-20, Suite 251
Arlington, TX 76017

L. Edward Innerarity, Jr.
P. O. Box 2113
Midland, TX 79702

Miranda Energy Corp.
24 Smith Road, Suite 601
Midland, TX 79705-4403

Mabee Flynt Least Trust
11010 Crestmore
Houston, TX 77096

Nortex Corporation
1415 Louisiana, Suite 3100
Houston, TX 77002
Attn: Robert Kent

Marathon Oil Company
Southern Business Unit
P. O. Box 3487
Midland, TX 79702
Attn: Paul J. Tauscher

Royalty Owner

Minerals Management Service
Royalty Management Program
P. O. Box 5510
Denver, CO 80217-5810

Overriding Royalty Owners

Osborne B. Cowles
First Prosperity Bank
P. O. Box 308
West Columbia, TX 77486

Georgia B. Bass
26 N. Copperknoll
Woodlands, TX 77381

Joe N. Gifford
P. O. Box 51187
Midland, TX 79710-1187

Douglas Abell Denton
1501 Princeton Avenue
Midland, TX 79701

Patricia Kay Lorenz
9809 US Highway 59 N. #E11
Victoria, TX 77905-5690

Dorothy J. Keenom
P. O. Box 470605
Fort Worth, TX 76147-0605

Richard C. Gibson
P. O. Box 3817
Midland, TX 79702

Thomas R. Smith
1409 S. County Road 1130
Midland, TX 79706

L. E. Opperman
500 W. Texas, Suite 830
Midland, TX 79701

L. Edward Innerarity, Jr.
P. O. Box 2113
Midland, TX 79702

John E. Cassidy
P. O. Box 177
Dripping Spring, TX 78620

Mary Lou Cassidy
1609 Humble
Midland, TX 79701

Alice H. Giles
2600 Escondido Cove
Austin, TX 78703-1610

Bascom L. Mitchell
No. 1 Live Oak
Midland, TX 79705

George Karabatosos

2230 Bering Drive, #30

Houston, TX 77057

Figure 4 Investment Trust

11010 Crestmore

Houston, TX 77096

Houston & Emma Hill Trust Estate

James Robert Hill, Virginia Glenn Hill Lattimore

and John A. Styrsky, Trustees

500 West Seventh Street, Suite 1802

Fort Worth, TX 76201-4740

Thomas Hill Puff Trust

Dorothy Jean Keenom Trustee

1320 Lake Street

Fort Worth, TX 76147-0605

Hill Trusts

Kenneth Waltrip & Patsy Waltrip, Co-Trustees

3343 Locke Avenue, Suite 103

Fort Worth, TX 76107-5702

Patricia B. Young Mgmt. Trust

1st National Bank & Trust Co. of Okmulgee

P. O. Box 1037

Okmulgee, OK 74447

Linda Kay Neighbors

1711 Douglas

Midland, TX 79701

Alfred Giles IV

P. O. Box 50360

Austin, TX 78763

John Geoffrey Giles

2600 Escondido Cove

Austin, TX 78703-1610

Marcella B. Christensen

P. O. Box 3790

Midland, TX 79702

Hill Investments, Ltd.

P. O. Box 1568

Cedar Park, TX 78630-1568

H-S Minerals & Realty Ltd.

P. O. Box 27284

Austin, TX 78755-2284

Mickey Gibson

P. O. Box 590

Cave Creek, AZ 85327

Richard Donald Jones, Jr.

200 N. Gaines Road

Cedar Creek, TX 78612

James R. Hill Family Ltd. Partnership

A Texas Limited Partnership

500 W. 7th Street, Unit 16, Suite 1802

Fort Worth, TX 76102-4772

Glenn Lattimore Family LP

A Texas Limited Partnership

500 W. 7th Street Unit 16, Suite 1802

Fort Worth, TX 76102-4772

Angela Leigh Simpson Starrett Trust

3000 E. 17th Avenue, Suite 100, Denver, CO 80202

OGM Operations-AU 10291

P. O. Box 5383

Denver, CO 80217

Esther Abell Denton Estate

Bill Wiggins, Administrator

P. O. Box 24

Midland, TX 79702

JADT Minerals, Ltd.

P. O. Box 190229

Dallas, TX 75219-0229

Merle T. Franklin

One Hideaway Circle

Houston, TX 77074

Patricia Boyle Young

P. O. Box 1639

Solana Beach, CA 92075

Lorraine L. Johnson Living Trust

c/o Compass Bank & Georgia L. Temple, Co-Trustees

P. O. Box 4886

Houston, TX 77210-4886

Trust U/W/O Mary Catherine Jones

Wells Fargo Bank Texas, NA, Trustee

F/B/O Angela Leigh Simpson Starrett

P. O. Box 5383

Denver, CO 80217

Gas Purchaser

Duke Energy Field Services

10 Desta Drive, Suite 400 West

Midland, TX 79705

Oil Purchaser

Chevron Products Company

Attn: Gary Moore

15 Smith Road

Claydesta Plaza

Midland, TX 79705

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**
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For delivery information, visit our website at www.usps.com

DALLAS TX 75219

Postage \$ **\$0.39**

Certified Fee **\$2.40**

Return Receipt Fee (Endorsement Required) **\$1.85**

Restricted Delivery Fee (Endorsement Required) **\$0.00**

Total Postage & Fees \$ **\$4.64**

Sent To
JADT Minerals, Ltd.
P. O. Box 190229
Dallas, TX 75219-0229

PS Form 3811, June 2002

6488 7277 8000 0977 5002

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so 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:

L. Edward Incentivity, Jr.
P. O. Box 2113
Midland, TX 79702

2. Article Number (Transfer from service label) **7005 1160 0003 1171 8107**

PS Form 3811, February 2004

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) **ED INCENTIVITY** C. Date of Delivery **JAN 1 2007**

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

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☐ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

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DALLAS TX 75219

Postage \$ **\$0.39**

Certified Fee **\$2.40**

Return Receipt Fee (Endorsement Required) **\$1.85**

Restricted Delivery Fee (Endorsement Required) **\$0.00**

Total Postage & Fees \$ **\$4.64**

Sent To
L. Edward Incentivity, Jr.
P. O. Box 2113
Midland, TX 79702

PS Form 3811, June 2002

2298 7277 8000 0977 5002

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so 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:

JADT Minerals, Ltd.
P. O. Box 190229
Dallas, TX 75219-0229

2. Article Number (Transfer from service label) **7005 1160 0003 1171 8107**

PS Form 3811, February 2004

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) **JO DENTON TUCK** C. Date of Delivery **1/24/07**

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

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☐ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Catherine M. Grace
c/o Dan Serna & Company
6031 W. J-20, Suite 251
Arlington, TX 76017

2. Article Number

(Transfer from service label)

7005 1160 0003 1171 8528

PS Form 3811, February 2004

Domestic Return Receipt D-5

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) S. Serna Date of Delivery 1/16/07

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

If YES, enter delivery address below.

3. Service Type

- ☒ Certified Mail
- ☐ Express Mail
- ☐ Registered
- ☐ Return Receipt for Merchandise
- ☐ Insured Mail
- ☐ C.O.D.
- ☐ Restricted Delivery? (Extra Fee) ☐ Yes

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ARLINGTON TX 76017

Postage	\$	\$0.39
Certified Fee		\$2.40
Return Receipt Fee (Endorsement Required)		\$1.85
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Catherine M. Grace
c/o Dan Serna & Company
6031 W. J-20, Suite 251
Arlington, TX 76017

PS Form 3800, June 2002

See Reverse

U.S. Postal ServiceTM
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MIDLAND TX 79701

Postage	\$	\$0.39
Certified Fee		\$2.40
Return Receipt Fee (Endorsement Required)		\$1.85
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Mary Lou Cassidy
1609 Humble
Midland, TX 79701

PS Form 3800, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return 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 Lou Cassidy
1609 Humble
Midland, TX 79701

2. Article Number

(Transfer from service label)

7005 1160 0003 1171 841

PS Form 3811, February 2004

Domestic Return Receipt D-5

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] Agent ☐ Addressee ☐

B. Received by (Printed Name) Mary Lou Cassidy Date of Delivery 1/25/07

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

If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail
- ☐ Express Mail
- ☐ Registered
- ☐ Return Receipt for Merchandise
- ☐ Insured Mail
- ☐ C.O.D.
- ☐ Restricted Delivery? (Extra Fee) ☐ Yes

4. Article Number

(Transfer from service label)

7005 1160 0003 1171 841

PS Form 3811, February 2004

Domestic Return Receipt D-5

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so 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:

Patricia B. Young Mgmt. Trust
1st National Bank & Trust Co. of Okmulgee
P. O. Box 1037
Okmulgee, OK 74447

A. Signature Don Halden
B. Received by (Printed Name) Don Halden
C. Is delivery address different from item 13? ☒ Yes ☐ No
D. Is delivery address different from item 13? ☒ Yes ☐ No

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

7005 1160 0003 1171 8757

Article Number (Transfer from service label) 7005 1160 0003 1171 8757

PS Form 3811, February 2004 Domestic Return Receipt D-5

COMPLETE THIS SECTION IF NON-DELIVERED

A. Signature Don Halden
B. Received by (Printed Name) Don Halden
C. Is delivery address different from item 13? ☒ Yes ☐ No
D. Is delivery address different from item 13? ☒ Yes ☐ No

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

7005 1160 0003 1171 8757

Article Number (Transfer from service label) 7005 1160 0003 1171 8757

PS Form 3811, February 2004 Domestic Return Receipt D-5

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SENTON TX 76201 CALIFORNIA

Postage	\$ \$0.63
Certified Fee	\$2.40
Return Receipt Fee (Endorsement Required)	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ \$4.88

Sent To
Houston & Emma Hill Trust Estate
James Robert Hill, Virginia Glenn Hill Lattimore
and John A. Strycky, Trustees
500 West Seventh Street, Suite 1802
Fort Worth, TX 76201-4740

PS Form 3809, June 2002 See Reverse Instructions

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Houston & Emma Hill Trust Estate
James Robert Hill, Virginia Glenn Hill Lattimore
and John A. Strycky, Trustees
500 West Seventh Street, Suite 1802
Fort Worth, TX 76201-4740

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Daniel
B. Received by (Printed Name) DANIELS
C. Date of Delivery 1/16/07
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

7005 1160 0003 1171 8757

Article Number (Transfer from service label) 7005 1160 0003 1171 8757

PS Form 3811, February 2004 Domestic Return Receipt D-5

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OKMULGEE OK 74447

Postage	\$ \$0.39
Certified Fee	\$2.40
Return Receipt Fee (Endorsement Required)	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ \$4.64

Sent To
Patricia B. Young Mgmt. Trust
1st National Bank & Trust Co. of Okmulgee
P. O. Box 1037
Okmulgee, OK 74447
City, State, Zip+4

7005 1160 0003 1171 8757

SENTON TX 76201 CALIFORNIA

PS Form 3809, June 2002 See Reverse Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired, so 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:

Article Number 7005 1160 0003 1171 8771

Domestic Return Receipt D-5

Form 3811, February 2004

102595-02-M-1540

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

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *1-20-07*

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

H.S. Minerals & Realty Ltd.
P. O. Box 27284
Austin, TX 78755-2284

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired, so 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:

Article Number 7005 1160 0003 1171 8771

Domestic Return Receipt D-5

Form 3811, February 2004

102595-02-M-1540

U.S. Postal Service
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For delivery information visit our website at www.usps.com

AUSTIN TX 78755

Postage \$ \$0.39
Certified Fee \$2.40
Return Receipt Fee (Endorsement Required) \$1.85
Restricted Delivery Fee (Endorsement Required) \$0.00
Total Postage & Fees \$ \$4.64

01/11/2007

Sent To H.S. Minerals & Realty Ltd.
Street, Apt. No., P. O. Box 27284
Austin, TX 78755-2284
City, State, ZIP+4

PS Form 3800, June 2002

0068 1211 0000 0911 5002

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

DENVER CO 80217

Postage \$ \$0.39
Certified Fee \$2.40
Return Receipt Fee (Endorsement Required) \$1.85
Restricted Delivery Fee (Endorsement Required) \$0.00
Total Postage & Fees \$ \$4.64

Sent To Trust UW/O Mary Catherine Jones
Wells Fargo Bank Texas, N.A., Trustee
F/B/O Angela Leigh Simpson Starrett
P. O. Box 5383
Denver, CO 80217
City, State, ZIP+4

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired, so 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:

Article Number 7005 1160 0003 1171 8771

Domestic Return Receipt D-5

Form 3811, February 2004

102595-02-M-1540

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

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

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *1/10/07*

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Sent To Trust UW/O Mary Catherine Jones
Wells Fargo Bank Texas, N.A., Trustee
F/B/O Angela Leigh Simpson Starrett
P. O. Box 5383
Denver, CO 80217
City, State, ZIP+4

PS Form 3800, June 2002

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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For delivery information visit our website at www.usps.com

MIDLAND TX 79701

Postage \$ **\$0.39**
Certified Fee \$ **\$2.40**
Return Receipt Fee \$ **\$1.85**
Restricted Delivery Fee \$ **\$0.00**
Total Postage & Fees \$ **\$4.64**

Sent To
 Linda Kay Neighbors
 1711 Douglas
 Midland, TX 79701
 City, State, ZIP+4

PS Form 3811, June 2002

0428 1271 0000 0911 5002

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Linda Kay Neighbors
 1711 Douglas
 Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
 B. Received by (Printed Name) ☐ Addressee
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee) ☐ Yes

Article Number 7005 1160 0003 1171 8825
 (Transfer from service label)
PS Form 3811, February 2004

Angela Leigh Simpson-Smart Trust
 c/o Wells Fargo Bank Texas, N.A. Trustee
 OGM Operations-A1 10291
 P.O. Box 5383
 Denver, CO 80217

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

DENVER CO 80217

Postage \$ **\$0.39**
Certified Fee \$ **\$2.40**
Return Receipt Fee \$ **\$1.85**
Restricted Delivery Fee \$ **\$0.00**
Total Postage & Fees \$ **\$4.64**

Sent To
 Angela Leigh Simpson-Smart Trust
 c/o Wells Fargo Bank Texas, N.A. Trustee
 OGM Operations-A1 10291
 P.O. Box 5383
 Denver, CO 80217
 City, State, ZIP+4

PS Form 3811, February 2004

5288 1271 0000 0911 5002

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Linda Kay Neighbors
 1711 Douglas
 Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
 B. Received by (Printed Name) ☐ Addressee
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee) ☐ Yes

Article Number 7005 1160 0003 1171 8741
 (Transfer from service label)
PS Form 3811, February 2004

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dorothy J. Keenom
P. O. Box 470605
Fort Worth, TX 76147-0605

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☒ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7005 1160 0003 1171 8696

PS Form 3811, February 2004

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed name) ☐ Date of Delivery
 C. Is delivery address different from item 1? ☐ Yes ☐ No
 D. If YES, enter delivery address below:

Nancy Jones 1-18-07

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only: No Insurance Coverage Provided)

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

FORT WORTH, TX 76147

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Dorothy J. Keenom
P. O. Box 470605
Fort Worth, TX 76147-0605

City, State, ZIP+4

PS Form 3800, June 2002

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Minerals Management Service
Royalty Management Program
P. O. Box 5810
Denver, CO 80217-5810

2. Article Number
(Transfer from service label)

7005 1160 0003 1171 8531

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) ☐ Date of Delivery
 C. Is delivery address different from item 1? ☐ Yes ☐ No
 D. If YES, enter delivery address below:

AMERICAN AUTOMATION
BUILDING SOLUTIONS
Agent for:
MINERAL MANAGEMENT SYSTEMS

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Restricted Delivery? (Extra Fee) ☐ Yes

7005 1160 0003 1171 8531

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so 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:

John Geoffrey Giles
2000 Escondido Cove
Austin, TX 78703-1610

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery (Extra Fee)

Article Number

(Transfer from service label)

PS Form 3811, February 2004

7005 1160 0003 1171 8733

Domestic Return Receipt

PS Form 3811-02-M-15-0

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

AUSTIN TX 78703

Postage	\$	\$0.39
Certified Fee		\$2.40
Return Receipt Fee (Endorsement Required)		\$1.85
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$4.64

Postmark Here
 JAN 11 2007

Sent To
 John Geoffrey Giles
 2000 Escondido Cove
 Austin, TX 78703-1610

City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lorraine L. Johnson Living Trust
 c/o Compass Bank & Georgia L. Temple, Co-Trustees
 P. O. Box 4886
 Houston, TX 77210-4886

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee)

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

7005 1160 0003 1171 8580

Domestic Return Receipt

PS Form 3811-02-M-15-0

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

HOUSTON TX 77210

Postage	\$	\$0.39
Certified Fee		\$2.40
Return Receipt Fee (Endorsement Required)		\$1.85
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$4.64

Postmark Here
 JAN 11 2007

Sent To
 Lorraine L. Johnson Living Trust
 c/o Compass Bank & Georgia L. Temple, Co-Trustees
 P. O. Box 4886
 Houston, TX 77210-4886

City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

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

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

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee)

7005 1160 0003 1171 8580

Domestic Return Receipt

PS Form 3811-02-M-15-0

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

MIDLAND, TX 79705

Postage \$ **\$0.39**

Certified Fee \$ **\$2.40**

Return Receipt Fee \$ **\$1.85**
(Endorsement Required)

Restricted Delivery Fee \$ **\$0.00**
(Endorsement Required)

Total Postage & Fees \$ **\$4.64**

Sent To
 Duke Energy Field Services
 10 Dista Drive, Suite 400 West
 Midland, TX 79705

City, State, ZIP+4

PS Form 3800, June 2002

7005 1160 0003 1171 8634

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name) John E. Cassidy

C. Date of Delivery 1/17/07

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

3. Service Type
☒ Certified Mail
☐ Express Mail
☐ Registered
☐ Return Receipt for Merchandise
☐ Insured Mail
☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

Article Number 7005 1160 0003 1171 8634

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt **D-5**

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

IRVING SPRINGS, TX 78620

Postage \$ **\$0.39**

Certified Fee \$ **\$2.40**

Return Receipt Fee \$ **\$1.85**
(Endorsement Required)

Restricted Delivery Fee \$ **\$0.00**
(Endorsement Required)

Total Postage & Fees \$ **\$4.64**

Sent To
 John E. Cassidy
 P.O. Box 177
 Dripping Spring, TX 78620

City, State, ZIP+4

PS Form 3800, June 2002

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name) John E. Cassidy

C. Date of Delivery 1/17/07

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

3. Service Type
☒ Certified Mail
☐ Express Mail
☐ Registered
☐ Return Receipt for Merchandise
☐ Insured Mail
☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

Article Number 7005 1160 0003 1171 8634

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt **D-5**

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

IRVING SPRINGS, TX 78620

Postage \$ **\$0.39**

Certified Fee \$ **\$2.40**

Return Receipt Fee \$ **\$1.85**
(Endorsement Required)

Restricted Delivery Fee \$ **\$0.00**
(Endorsement Required)

Total Postage & Fees \$ **\$4.64**

Sent To
 John E. Cassidy
 P.O. Box 177
 Dripping Spring, TX 78620

City, State, ZIP+4

PS Form 3800, June 2002

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name) John E. Cassidy

C. Date of Delivery 1/17/07

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

3. Service Type
☒ Certified Mail
☐ Express Mail
☐ Registered
☐ Return Receipt for Merchandise
☐ Insured Mail
☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

Article Number 7005 1160 0003 1171 8634

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt **D-5**

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so 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:

Sent To
Douglas Abell Denton
1501 Princeton Avenue
Midland, TX 79701

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ C.O.D.
☐ Express Mail
☐ Return Receipt for Merchandise
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number

(Transfer from service label)

Form 3811, February 2004

Domestic Return Receipt

D-5

7005 1160 0003 1171 8719

PS Form 3800, June 2002

U.S. Postal Service[™]
CERTIFIED MAIL[™] RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

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

Midland, TX 79701

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To
Douglas Abell Denton
1501 Princeton Avenue
Midland, TX 79701
City, State, Zip+4

PS Form 3800, June 2002

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent ☐ Addressee
 B. Received by (Printed Name)
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

5628 1211 0000 0911 5002

U.S. Postal Service[™]
CERTIFIED MAIL[™] RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

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

Cedar Creek, TX 78612

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To
Richard Donald Jones, Jr.
200 N. Gaines Road
Cedar Creek, TX 78612
City, State, Zip+4

PS Form 3800, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

Sent To
Richard Donald Jones, Jr.
200 N. Gaines Road
Cedar Creek, TX 78612

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name)
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ C.O.D.
☐ Express Mail
☐ Return Receipt for Merchandise
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number
 (Transfer from service label)
 7005 1160 0003 1171 8795

Form 3811, February 2004

Domestic Return Receipt

D-5

PS Form 3800, June 2002

See Reverse for Instructions

6728 1211 0000 0911 5002

U.S. Postal ServiceTM

CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

PS Form 3811, June 2002

Article Number

7005 1160 0003 1171 8894

Domestic Return Receipt

D-5

1. Article Addressed to:

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

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

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

2. Article Addressed to:

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

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

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

3. Service Type

☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee)

4. Restricted Delivery? (Extra Fee)

☐ Yes
☒ No

Postage

\$

\$0.39

Certified Fee

\$

\$2.40

Return Receipt Fee (Endorsement Required)

\$

\$1.85

Restricted Delivery Fee (Endorsement Required)

\$

\$0.00

Total Postage & Fees

\$

\$4.64

Sent To

Thomas Hill Puff Trust

Dorothy Jean Keenon Trustee

1320 Lake Street

Fort Worth, TX 76147-0605

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

1320 Lake Street

City, State, Zip+4

Fort Worth, TX 76147-0605

PS Form 3811, June 2002

See Reverse for Instructions

PS Form 3811, June 2002

See Reverse for Instructions

U.S. Postal ServiceTM

CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

PS Form 3811, June 2002

Article Number

7005 1160 0003 1171 8894

Domestic Return Receipt

D-5

1. Article Addressed to:

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

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

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

2. Article Addressed to:

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

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

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

3. Service Type

☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee)

4. Restricted Delivery? (Extra Fee)

☐ Yes
☒ No

Postage

\$

\$0.39

Certified Fee

\$

\$2.40

Return Receipt Fee (Endorsement Required)

\$

\$1.85

Restricted Delivery Fee (Endorsement Required)

\$

\$0.00

Total Postage & Fees

\$

\$4.64

Sent To

Thomas Hill Puff Trust

Dorothy Jean Keenon Trustee

1320 Lake Street

Fort Worth, TX 76147-0605

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

1320 Lake Street

City, State, Zip+4

Fort Worth, TX 76147-0605

PS Form 3811, June 2002

See Reverse for Instructions

PS Form 3811, June 2002

See Reverse for Instructions

U.S. Postal ServiceTM

CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

PS Form 3811, June 2002

Article Number

7005 1160 0003 1171 8894

Domestic Return Receipt

D-5

1. Article Addressed to:

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

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

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

2. Article Addressed to:

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

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

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

3. Service Type

☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee)

4. Restricted Delivery? (Extra Fee)

☐ Yes
☒ No

Postage

\$

\$0.39

Certified Fee

\$

\$2.40

Return Receipt Fee (Endorsement Required)

\$

\$1.85

Restricted Delivery Fee (Endorsement Required)

\$

\$0.00

Total Postage & Fees

\$

\$4.64

Sent To

Thomas Hill Puff Trust

Dorothy Jean Keenon Trustee

1320 Lake Street

Fort Worth, TX 76147-0605

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

1320 Lake Street

City, State, Zip+4

Fort Worth, TX 76147-0605

PS Form 3811, June 2002

See Reverse for Instructions

PS Form 3811, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ester Abel Denton Estate
Bill Wiggins, Administrator
P.O. Box 24
Midland, TX 79702

2. Article Number

7005 1160 0003 1171 8832

PS Form 3811, February 2004

Domestic Return Receipt D-5

02595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☒ Agent ☐ Addressee
- B. Received by (Printed Name) W. W. Wiggins Date of Delivery JAN 18 2004
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

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

FORT WORTH, TX 76107

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Hill Trusts
Kenneth Waltrip & Patsy Waltrip, Co-Trustees
3143 Locke Avenue, Suite 103
Fort Worth, TX 76107-5702

PS Form 3800, June 2002

See Reverse for Instructions

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

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

MIDLAND, TX 79702

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Ester Abel Denton Estate
Bill Wiggins, Administrator
P.O. Box 24
Midland, TX 79702

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hill Trusts
Kenneth Waltrip & Patsy Waltrip, Co-Trustees
3143 Locke Avenue, Suite 103
Fort Worth, TX 76107-5702

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☒ Agent ☐ Addressee
- B. Received by (Printed Name) K. A. Waltrip C. Date of Delivery 1-16-04
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label) 7005 1160 0003 1171 8948

PS Form 3811, February 2004

Domestic Return Receipt D-5

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so 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:

2. Article Number **7005 1160 0003 11 1 8863**
 (Transfer from service label)
 PS Form 3811, February 2004

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

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

Merle T. Franklin
 One Highway Circle
 Houston, TX 77074

5. Article Addressed to:

1. Article Addressed to:

Richard C. Gibson
 P. O. Box 3817
 Midland, TX 79702

PS Form 3800, June 2002

**U.S. Postal Service™
 CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)**

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

HOUSTON TX 77074

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To
 Merle T. Franklin
 One Highway Circle
 Houston, TX 77074

City, State, ZIP+4

PS Form 3800, June 2002

**U.S. Postal Service™
 CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)**

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

MIDLAND TX 79702

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To
 Richard C. Gibson
 P. O. Box 3817
 Midland, TX 79702

City, State, ZIP+4

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Richard C. Gibson
 P. O. Box 3817
 Midland, TX 79702

2. Article Number **7005 1160 0003 1171 8139**
 (Transfer from service label)
 PS Form 3811, February 2004

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

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

Merle T. Franklin
 One Highway Circle
 Houston, TX 77074

PS Form 3800, June 2002

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X** *Richard C. Gibson* ☐ Agent ☐ Addressee

B. Received by (Printed Name) **Richard C. Gibson** C. Date of Delivery **01/11/2007**

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

Merle T. Franklin
 One Highway Circle
 Houston, TX 77074

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so 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:

Marcella B. Christensen
P. O. Box 3790
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Marcella B. Christensen Agent ☐ Addressee ☐
- B. Received by (Printed Name) Marcella B. Christensen Date of Delivery 9/11/2007
- C. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

Return Receipt for Merchandise ☐ Registered ☐ Insured Mail ☐ C.O.D. ☐

3. Service Type

- ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. ☐

4. Restricted Delivery (Extra Fee) ☐ Yes ☐ No

Article Number

(Transfer from service label)

7005 1160 0003 1171 8726

PS Form 3811, February 2004

Domestic Return Receipt

PSN: 02-M-1540

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only: No Insurance Coverage Provided)

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

MIDLAND, TX 79702

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Marcella B. Christensen
P. O. Box 3790
Midland, TX 79702
City, State, ZIP+4

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Georgia B. Bass
26 N. Copperknoll
Woodlands, TX 77381

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Georgia B. Bass Agent ☐ Addressee ☐
- B. Received by (Printed Name) Georgia B. Bass C. Date of Delivery 9/11/2007
- D. Is delivery address different from item 1? ☐ Yes ☐ No

3. Service Type

- ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. ☐

4. Restricted Delivery (Extra Fee) ☐ Yes ☐ No

2. Article Number

(Transfer from service label)

7005 1160 0003 1171 8726

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only: No Insurance Coverage Provided)

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

SPRING TX 77381

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Georgia B. Bass
26 N. Copperknoll
Woodlands, TX 77381
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Otto E. Schroeder
2015 Channing Park
Arlington, TX 76013

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7005 1160 0003 1171 8501

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Otto E. Schroeder C. Date of Delivery 2/1/07
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☒ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

HOUSTON TX 77098

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Mary Patricia Dougherty Trust
c/o Northern Bank of Texas
2701 Kirby
Houston, TX 77098
Attn: David J. Parker

PS Form 3800, June 2002

See Reverse

Instructions

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

ARLINGTON TX 76013

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Otto E. Schroeder
2015 Channing Park
Arlington, TX 76013

City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return 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 Patricia Dougherty Trust
c/o Northern Bank of Texas
2701 Kirby
Houston, TX 77098
Attn: David J. Parker

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) ARON BABA C. Date of Delivery 2/1
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

7005 1160 0003 1171 8504

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7005 1160 0003 1171 8502

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so 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:

Alice H. Giles
2600 Escandido Cove
Austin, TX 78703-1610

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee)
 Yes ☐ No ☐

Article Number

(Transfer from service label)

Form 3811, February 2004

7005 1160 0003 1171 8764

Domestic Return Receipt D-5

PS Form 3800, June 2002

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
 (Domestic Mail Only: No Insurance Coverage Provided)

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

AUSTIN TX 78703

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Alice H. Giles
2600 Escandido Cove
Austin, TX 78703-1610
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee
 Received by (Printed Name)
 GILES
 Is delivery address different from item 1? Yes ☐ No ☒

If YES, enter delivery address below:

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee)
 Yes ☐ No ☐

Article Number

(Transfer from service label)

Form 3811, February 2004

7005 1160 0003 1171 8764

Domestic Return Receipt D-5

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

James R. Hill Family Ltd. Partnership
A Texas Limited Partnership
300 W. 7th Street, Unit 16, Suite 1802
Fort Worth, TX 76102-4772

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee
 Received by (Printed Name)
 EDANIELS
 Is delivery address different from item 1? Yes ☐ No ☒

3. Service Type
☐ Certified Mail
☐ Registered
☐ Insured Mail
☐ C.O.D.
☐ Express Mail
☐ Return Receipt for Merchandise
4. Restricted Delivery? (Extra Fee)
 Yes ☐ No ☒

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

7005 1160 0003 1171 8764

Domestic Return Receipt D-5

102595-02-M-1540

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
 (Domestic Mail Only: No Insurance Coverage Provided)

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

FORT WORTH TX 76102

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To
 James R. Hill Family Ltd. Partnership
 A Texas Limited Partnership
 300 W. 7th Street, Unit 16, Suite 1802
 Fort Worth, TX 76102-4772
 City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

James R. Hill Family Ltd. Partnership
A Texas Limited Partnership
300 W. 7th Street, Unit 16, Suite 1802
Fort Worth, TX 76102-4772

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee
 Received by (Printed Name)
 EDANIELS
 Is delivery address different from item 1? Yes ☐ No ☒

3. Service Type
☐ Certified Mail
☐ Registered
☐ Insured Mail
☐ C.O.D.
☐ Express Mail
☐ Return Receipt for Merchandise
4. Restricted Delivery? (Extra Fee)
 Yes ☐ No ☒

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

7005 1160 0003 1171 8764

Domestic Return Receipt D-5

102595-02-M-1540

R: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, on the front if space permits.

Article Addressed to:

Mickey Gibson
P.O. Box 590
Cave Creek, AZ 85327

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number 7005 1160 0003 1171 8818
 Transfer from service label
 Date 3811 February 2004
 Domestic Return Receipt D-5

102595-02-M-1540

U.S. Postal ServiceTM

CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

CAVE CREEK, AZ 85327

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64



Sent To
 Mickey Gibson
 P.O. Box 590
 Cave Creek, AZ 85327
 City, State, ZIP+4

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature]
 B. Received by (Printed Name) Glenn Latimore
 C. Date of Delivery 1/19/04
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number 7005 1160 0003 1171 8818
 Transfer from service label
 Date 3811 February 2004
 Domestic Return Receipt D-5

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Glenn Latimore Family LP
 A Texas Limited Partnership
 500 W. 7th Street Unit 16, Suite 1802
 Fort Worth, TX 76102-4772

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature]
 B. Received by (Printed Name) EDAVIES
 C. Date of Delivery 1/19/04
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number 7005 1160 0003 1171 8818
 Transfer from service label

PS Form 3811, February 2004

Domestic Return Receipt D-5

102595-02-M-1540

U.S. Postal ServiceTM

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(Domestic Mail Only; No Insurance Coverage Provided)

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

CAVE CREEK, AZ 85327

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To
 Glenn Latimore Family LP
 A Texas Limited Partnership
 500 W. 7th Street Unit 16, Suite 1802
 Fort Worth, TX 76102-4772
 City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature]
 B. Received by (Printed Name) EDAVIES
 C. Date of Delivery 1/19/04
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number 7005 1160 0003 1171 8818
 Transfer from service label

PS Form 3811, February 2004

Domestic Return Receipt D-5

102595-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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CEAR PARK TX 78630

Postage	\$	\$0.39
Certified Fee		\$2.40
Return Receipt Fee (Endorsement Required)		\$1.85
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$4.64

Postmark: JAN 19 2007

Sent To: Hill Investments, Ltd.
 P. O. Box 1568
 Cedar Park, TX 78630-1568
 City, State, ZIP+4

PS Form 3800, June 2002 See back for instructions

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name): *Hill Investments, Ltd.* ☐ Date of Delivery: *JAN 19 2007*

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

3. Service Type: ☒ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ Registered ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number: 7005 1160 0003 1171 8788
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Hill Investments, Ltd.
 P. O. Box 1568
 Cedar Park, TX 78630-1568

2. Article Number:
 (Transfer from service label) 7005 1160 0003 1171 8788

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

VICTORIA TX 77905

Postage	\$	\$0.39
Certified Fee		\$2.40
Return Receipt Fee (Endorsement Required)		\$1.85
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$4.64

Postmark: JAN 19 2007

Sent To: Patricia Kay Lorenz
 9809 US Highway 59 N. #E11
 Victoria, TX 77905-5690
 City, State, ZIP+4

PS Form 3800, June 2002 See back for instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Patricia Kay Lorenz
 9809 US Highway 59 N. #E11
 Victoria, TX 77905-5690

2. Article Number:
 (Transfer from service label) 7005 1160 0003 1171 8788

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

2005 1160 0003 1171 8788

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so 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:
 Patricia Kay Lorenz
 9809 US Highway 59 N. #E11
 Victoria, TX 77905-5690

A. Signature: *Patricia Kay Lorenz* ☐ Agent ☐ Addressee

B. Received by (Printed Name): *Patricia Kay Lorenz* ☐ Date of Delivery: *JAN 19 2007*

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

3. Service Type: ☒ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ Registered ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number: 7005 1160 0003 1171 8788
 (Transfer from service label)

Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, on the front if space permits.

Article Addressed to:

Nortex Corporation
1415 Louisiana, Suite 3100
Houston, TX 77002
Attn: Robert Kent

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number 7005 1160 0003 1171 8559
 Domestic Return Receipt PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

U.S. Postal Service CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage)

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

MIDLAND TX 79710

Postage	\$	\$0.39
Certified Fee		\$2.40
Return Receipt Fee (Endorsement Required)		\$1.85
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Joe N. Gifford
P.O. Box 51187
Midland, TX 79710-1187
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

U.S. Postal Service CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage)

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

HOUSTON TX 77002

Postage	\$	\$0.39
Certified Fee		\$2.40
Return Receipt Fee (Endorsement Required)		\$1.85
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Nortex Corporation
1415 Louisiana, Suite 3100
Houston, TX 77002
Attn: Robert Kent
City, State, ZIP+4

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Joe N. Gifford
P.O. Box 51187
Midland, TX 79710-1187

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number 7005 1160 0003 1171 8962

Domestic Return Receipt PS Form 3811, February 2004

D-5

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 ■ Print your name and address on the reverse so that we can return 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 E. Kelly
 TEK Properties, Ltd.
 The Highlands
 Seattle, WA 98177

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

D-5

10595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent☐ Addressee

B. Received by (Printed Name)

Mary Kelly

Date of Delivery

1/11/2007

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☒ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Return Receipt for Merchandise☐ Registered☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes☐ No

7005 1160 0003 1171 895

10595-02-M-1540

U.S. Postal ServiceTM
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 (Domestic Mail Only; No Insurance Coverage Provided)For delivery information visit our web site at www.usps.com

SEATTLE WA 98177

Postage	\$	\$0.39
Certified Fee		\$2.40
Return Receipt Fee (Endorsement Required)		\$1.85
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Thomas E. Kelly
 TEK Properties, Ltd.
 The Highlands
 Seattle, WA 98177

PS Form 3800, June 2002

See back for instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bascom L. Mitchell
 No. 1 Live Oak
 Midland, TX 79705

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

D-5

102595-02-M-1540

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?

If YES, enter delivery address below:

☐ Yes☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Return Receipt for Merchandise☐ Registered☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes☐ No

7005 1160 0003 1171 895

Domestic Return Receipt

D-5

102595-02-M-1540

U.S. Postal ServiceTM
 CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)For delivery information visit our website at www.usps.com

MIDLAND TX 79705

CERIFIED MAIL

Postage \$0.39

Certified Fee \$2.40

Return Receipt Fee (Endorsement Required) \$1.85

Restricted Delivery Fee (Endorsement Required) \$0.00

Total Postage & Fees \$4.64

Sent To

Bascom L. Mitchell

No. 1 Live Oak

Midland, TX 79705

City, State, ZIP+4

PS Form 3800, June 2002

See back for instructions

7005 1160 0003 1171 895

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Obie & Company
c/o JPMorgan Chase Bank
600 Travis Street, 3rd Floor
Houston, TX 77252
Attn: Greg Crow

2. Article Number

(Transfer from service label)

7005 1160 0003 1171 8496

PS Form 3811, February 2004

Domestic Return Receipt D

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

B. Received by (Printed Name) M. Bell Date of Delivery JAN 19 2004

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

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

MIDLAND, TX 79705

Postage \$ \$0.39
Certified Fee \$2.40
Return Receipt Fee (Endorsement Required) \$1.85
Restricted Delivery Fee (Endorsement Required) \$0.00
Total Postage & Fees \$ \$4.64

Sent To

Miranda Energy Corp.
24 Smith Road, Suite 601
Midland, TX 79705-4403
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

HOUSTON, TX 77252

Postage \$ \$0.39
Certified Fee \$2.40
Return Receipt Fee (Endorsement Required) \$1.85
Restricted Delivery Fee (Endorsement Required) \$0.00
Total Postage & Fees \$ \$4.64

Sent To

Obie & Company
c/o JPMorgan Chase Bank
600 Travis Street, 3rd Floor
Houston, TX 77252
Attn: Greg Crow

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Miranda Energy Corp.
24 Smith Road, Suite 601
Midland, TX 79705-4403

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee
B. Received by (Printed Name) C. Bradley C. Date of Delivery 1/16-7
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7005 1160 0003 1171 8573

PS Form 3811, February 2004

Domestic Return Receipt D-5

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return 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 Margaret Olson Trust
Leonard B. Olson, Trustee
c/o Dan Serna & Company
6031 W. 120, Suite 251
Arlington, TX 76017

2. Article Number

(Transfer from service label)

7005 1160 0003 1171 8975

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

George Karabatosos

D. Is delivery address different from item 1?

If YES, enter delivery address below.

☐ Yes
☐ No

3. Service Type

☒ Certified Mail

☐ Registered Mail

☐ Insured Mail

☐ Restricted Delivery (Extra Fee)

☐ Yes

☐ Express Mail

☐ Return Receipt for Merchandise

☐ C.O.D.

☐ Yes

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ARLINGTON TX 76017

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

01/11/2007

Sent To

Mary Margaret Olson Trust
Leonard B. Olson, Trustee
c/o Dan Serna & Company
6031 W. 120, Suite 251
Arlington, TX 76017

62768 1171 0000 0971 5002

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HOUSTON TX 77057

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

George Karabatosos
2220 Boring Drive, #30
Houston, TX 77057

City, State, ZIP+4

PS Form 3800, June 2002

See back for instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

George Karabatosos
2220 Boring Drive, #30
Houston, TX 77057

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

George Karabatosos

D. Is delivery address different from item 1?

If YES, enter delivery address below.

☐ Yes
☐ No

3. Service Type

☒ Certified Mail

☐ Registered Mail

☐ Insured Mail

☐ Restricted Delivery (Extra Fee)

☐ Yes

Article Number

(Transfer from service label)

7005 1160 0003 1171 885

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so 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:

Thomas R. Smith
1409 S. County Road 1130
Midland, TX 79706

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
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery (Extra Fee)
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.
☐ Yes

Article Number 7005 1160 0003 1171 8658
(Transfer from service label)

PS Form 3811, February 2004 D-S Domestic Return Receipt

U.S. Postal Service CERTIFIED MAIL™ RECEIPT (Domestic Mail Only: No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com
MIDLAND TX 79706

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64

Sent To

Thomas R. Smith
1409 S. County Road 1130
Midland, TX 79706

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

L. Edward Inerranty, Jr.
P.O. Box 2113
Midland, TX 79702

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
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Restricted Delivery for Merchandise
☐ C.O.D.
☐ Yes

4. Restricted Delivery? (Extra Fee)

Article Number 7005 1160 0003 1171 8658
(Transfer from service label)

PS Form 3811, February 2004 D-S Domestic Return Receipt

102595-02-M-1540

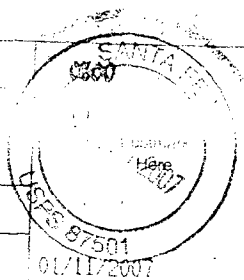
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☐ Agent ☒ Addressee <i>Leota Johnson</i> B. Received by (Printed Name) C. Date of Delivery 11/16/07 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
1. Article Addressed to: Chevron Products Company Attn: Gary Moore 15 Smith Road Claydesta Plaza Midland, TX 79705	3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7005 1160 0003 1171 8917 (Transfer from service label)	
PS Form 3811, February 2004 Domestic Return Receipt <i>D-5</i> 102595-02-M-1540	

7005 1160 0003 1171 8917

U.S. Postal Service

REGISTERED MAIL PERMIT NO. 87501

MIDLAND TX 79705

Postage	\$ 0.79	
Room Through Fee (Endorsement Required)	\$1.85	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 4.64	

Sent To: Chevron Products Company

Attn: Gary Moore

Street, Apt. No., or PO Box No.: 15 Smith Road

City, State, ZIP+4: Midland, TX 79705

PS Form 3800, June 2002

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Label/Receipt Number: **7005 1160 0003 1171 8603**Status: **Delivered**

Your item was delivered at 9:58 AM on January 18, 2007 in SOLANA BEACH, CA 92075.

Track & Confirm

Enter Label/Receipt Number.

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7005 1160 0003 1171 8603

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

SOLANA BEACH CA 92075

Certified Fee	\$2.40
Return Receipt Fee (Endorsement Required)	\$1.65
Insured Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$4.64

Postmark: JAN 18 2007

Sent To: Patricia Boyle Young
P.O. Box 1639
Solana Beach, CA 92075

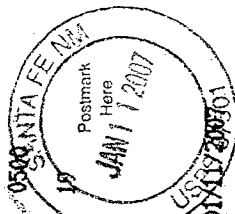
City, State, ZIP+4

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WEST COLUMBIA TX 77486

Postage	\$	\$0.39
Certified Fee	\$	\$2.40
Return Receipt Fee (Endorsement Required)	\$	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$4.64



Sent To
 Osborne B. Cowles
 First Prosperity Bank
 P. O. Box 308
 West Columbia, TX 77486

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

Rs Form 3800, June 2002 See Reverse for Instructions

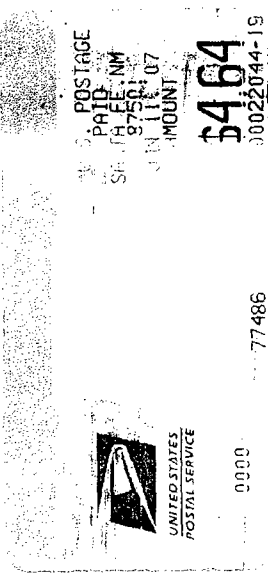
2658 1211 0000 1101 5005 7005

James Bruce
 P.O. Box 1056
 Santa Fe, New Mexico 87504

1-110
 1-110-1
 JAN 1 2007
 11:07 AM
 87504 NM

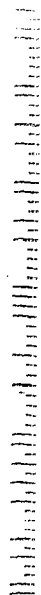
700 1160 0003 1171 8542

Osborne B. Cowles
 First Prosperity Bank
 P. O. Box 308
 West Columbia, TX 77486



NIXIE 779 1 10 01/11/07
 RETURN TO SENDER
 REFUSED
 UNABLE TO FORWARD

EC: 87504105555 *1855-01042-11-45




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Label/Receipt Number: **7005 1160 0003 1171 8870**
 Status: **Notice Left**

We attempted to deliver your item at 5:59 PM on January 16, 2007 in HOUSTON, TX 77096 and a notice was left. It can be redelivered or picked up at the Post Office. If the item is unclaimed, it will be returned to the sender. Information, if available, is updated every evening. Please check again later.

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7005 1160 0003 1171 8870

For delivery information visit our website at usps.com

HOUSTON TX 77096

Certified Fee	\$2.40
Return Receipt Fee (Endorsement Required)	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$4.64

Postmark Here

01/11/2007

Sent To

Street, Apt. No., or PO Box No. Figure 4 Investment Trust
11010 Crestmore

City, State, ZIP+4 Houston, TX 77096

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Label/Receipt Number: **7005 1160 0003 1171 8566**
 Status: **Notice Left**

We attempted to deliver your item at 5:59 PM on January 16, 2007 in HOUSTON, TX 77096 and a notice was left. It can be redelivered or picked up at the Post Office. If the item is unclaimed, it will be returned to the sender. Information, if available, is updated every evening. Please check again later.

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7005 1160 0003 1171 8566

U.S. Postal Service
CERTIFIED MAIL, RECEIPT
Cashable Mail only. No Insurance. Signature Required.

HOUSTON, TX 77096

Postage	\$	\$0.39
Certified Fee		\$2.40
Return Receipt Fee (Endorsement Required)		\$1.85
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$4.64

0500
 JAN 16 2007
 Postmark Here
 01/16/2007

Sent To

Street, Apt. No.,
 or PO Box No. Mabey Flynt Least Trust
 11010 Cresmore
 Houston, TX 77096

City, State, ZIP+4

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Label/Receipt Number: 7005 1160 0003 1171 8450

Status: **Acceptance**

Your item was accepted at 2:06 PM on January 11, 2007 in SANTA FE, NM 87501. No further information is available for this item.

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7005 1160 0003 1171 8450

U.S. Postal Service

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OFFICIAL USE

Postage	\$ 40.39
Certified Fee	\$2.40
Return Receipt Fee (Endorsement Required)	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 44.64

SANTA FE NM 87501
19 Postmark
JAN 11 2007
USPS 87501
01/11/2007

Sent To	Marathon Oil Company Southern Business Unit P. O. Box 3487 Midland, TX 79702 Attn: Paul J. Tauscher
Street, Apt. No., or PO Box No.	
City, State, ZIP+4	

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Label/Receipt Number: **7005 1160 0003 1171 8672**Status: **Acceptance**

Your item was accepted at 2:39 PM on January 11, 2007 in SANTA FE, NM 87501. No further information is available for this item.

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Enter Label/Receipt Number.

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7005 1160 0003 1171 8672

CERTIFIED MAIL RECEIPT
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For delivery information visit our website at www.usps.com

MIDLAND TX 79701

Postage	\$0.39
Certified Fee	\$2.40
Return Receipt Fee (Endorsement Required)	\$1.85
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$4.64

0500
19
Postmark Here
JAN 11 2007

Sent To:

Street, Apt. No.,
or PO Box No. L. E. Opperman
500 W. Texas, Suite 830
City, State, ZIP+4 Midland, TX 79701

PS Form 3800, June 2002. See Reverse for Instructions