

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

APPLICATION OF PURVIS OPERATING CO.
FOR COMPULSORY POOLING, LEA COUNTY,
NEW MEXICO.

Case No. 13,992

AFFIDAVIT OF NOTICE

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

D. Briggs Donaldson, being duly sworn upon his oath, deposes and states:

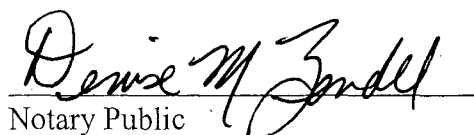
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am the landman for Purvis Operating Co.
3. Purvis Operating Co. has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application 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. Applicant has complied with the notice provisions of Division Rule 1207.



D. Briggs Donaldson

SUBSCRIBED AND SWORN TO before me this 20th day of September, 2007 by
D. Briggs Donaldson.

My Commission Expires: 1-9-08


Notary Public

Oil Conservation Division
Case No. _____
Exhibit No. 6

PURVIS OPERATING CO.

3101 N. Pecos St, 79705

P. O. Box 51990
Midland, Texas 79710-1990
Phone (432) 682-7346
Fax (432) 683-9584
e-mail: land@purvisop.com

August 30, 2007

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons Listed on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Purvis Operating Co., regarding the E $\frac{1}{2}$ NE $\frac{1}{4}$ of Section 34, Township 12 South, Range 37 East, N.M.P.M., Lea County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Thursday, September 20, 2007, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well unit, 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 later date.

You are required to notify the Division by Thursday, September 13, 2007 if you intend to participate in the hearing.

Very truly yours,

Purvis Operating Co.



D. Briggs Donaldson, CPL, CPLTA, CDOA

EXHIBIT

A

EXHIBIT A - APPLICATION FOR COMPULSORY POOLING AND NOTICE OF HEARING ON SEPTEMBER 20, 2007

OWNER NAME	ADDR1	ADDR2	ADDR3	CITY	ST	ZIP
Bill Bratton	P.O. Box 22463			Hot Springs	AR	71903
Roy E. Crocker	108 Jack Little Drive			Ruidoso	NM	88345
Sidney Roger Davis	P.O. Box 29330			Austin	TX	78755
DEBCO, LLC	P.O. Box 608			Roswell	NM	88202-0608
Gordon Smith Foster, Jr.	12900 Preston Rd, Ste. 550			Dallas	TX	75230
Goldston Oil Corporation agent	1993 Nominee Agmt	P.O. Box 570365		Houston	TX	77257-0365
W. L. Goldston Trust	c/o The Northern Trust Bank	P.O. Box 226270		Dallas	TX	75222-6270
Richard L. Hight	P.O. Box 2676			Bellaire	TX	77402-2676
Walter Joel Hight	1528 E. 10th			Odessa	TX	79761
Jimmy Frank Hight	1528 E. 10th			Odessa	TX	79761
Marsha Nadine Powell	7908 Inverton Rd # 302			Annandale	VA	22003
Hailey Lowe	226 E. 6th St, Apt. C			New York	NY	10003
Kelly Lowe Read	207 Cottonwood			Levelland	TX	79836
Ron P. Lowe	P.O. Box 1381			Wollforth	TX	79382-1381
Augusta G. MacDonald	P.O. Box 5870			Ketchum	ID	83340
Louisa J. Modisette	Augusta G. MacDonald	Attorney-in-fact	P.O. Box 5870	Ketchum	ID	83340
Bradley Steven Murph	P.O. Box 78			New Deal	TX	79350-0078
Russell Wayne Murph	2306 Chesterfield Dr.			Maryville	TN	37803
David Cyle Murph	P.O. Box 445			Sundown	TX	79372
P1 Oil & Gas, LLC	409 N. Vine St.			Magnolia	AR	71753
Tracy Knifong	518 Woodland Dr.			Benton	AR	72015
Kristy Trueheart	22114 Glen Arden Lane			Katy	TX	77450
Keely Meyer	97 Hollymead			The Woodlan	TX	77381
Raney Forbes	1142 E. Oaks Manor Dr.			Fayetteville	AR	72703
Coby Burrow	131 Columbia Rd #462			Magnolia	AR	71753
Purnell Morrow Company	1116 One Energy Square	4925 Greenville Ave.		Dallas	TX	75206
Walton Short Life Estate	Remainder Diane Smith Short	1718 Foster Drive		Magnolia	AR	71753

PURVIS OPERATING CO.

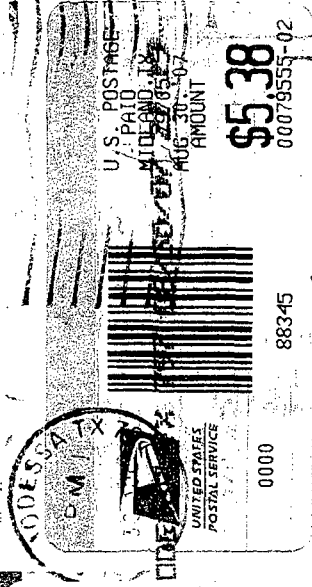
P.O. Box 51990
MIDLAND, TEXAS 79710-1990

DEFERRED MAIL

7003 1680 0006 6360 2033

**RETURN RECEIPT
REQUESTED**

Roy E. Crocker
108 Jack Little Drive
Ruidoso, NM 88345



Return to Sender 9/10

NIXTE 871 SE 1 10 09/07/07

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

BC: 79710199090 *1110-05512-00-42

88345+7900-79710199090

SEP 19, 2007 03:58P

page 2

OPERATING CO.

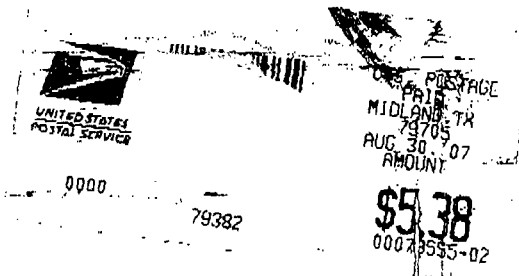
P.O. Box 51990

D, TEXAS 79710-1990

7003 1680 0006 6360 2101

JRN RECEIPT
EQUESTED

Ron P. Lowe
P.O. Box 1381
Wofforth, TX 79382-1381

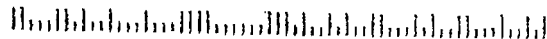


NIXIE 760 DE 1 00 09/15/07

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

DC: 79710199090 *2810-19283-00-08

79382-1381
797101990



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>Danielle W. Murph</i> B. Received by (Printed Name) ☒ C. Date of Delivery <i>DANIELLE W. MURPH</i> <i>9-12-07</i> D. Is delivery address different from item 1? ☒ Yes If YES, enter delivery address below: ☐ No <i>95 Eagle Crest Loop</i> <i>Canon City, CO 81212</i>
1. Article Addressed to: Russell Wayne Murph 2306 Chesterfield Dr. Maryville, TN 37803	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)	7003 1680 0006 6360 2125
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-11	

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>FL Forbes</i> B. Received by (Printed Name) ☒ C. Date of Delivery <i>FL Forbes</i> <i>9-12-07</i> D. Is delivery address different from item 1? ☒ Yes If YES, enter delivery address below: ☐ No <i>2148 Meandering</i> <i>Fayetteville AR 72701</i>
1. Article Addressed to: Randy Forbes 1147 E. Oaks Manor Dr. Fayetteville, AR 72704	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)	7003 1680 0006 6360 2156
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-11	

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete 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.

Addressed to:

O, LLC
Box 608
JL, NM 88202-0608

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee
B. Received by (Printed Name) D. Gofuske C. Date of Delivery 8-21-07
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

Number 7003 1680 0006 6360 2040 102595-02-M-1540
PS Form 3811, February 2004 Domestic Return Receipt

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete 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.

Addressed to:

Illey Steven Murph
Box 78
Deal, TX 79350-0078

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee
B. Received by (Printed Name) Bradley S. Murph C. Date of Delivery 9/1/07
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

Number 7003 1680 0006 6360 1975 102595-02-M-1540
PS Form 3811, February 2004 Domestic Return Receipt

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:

Bill Bratton
P.O. Box 22463
Hot Springs, AR 71903

2. Article Number
(Transfer from service label) 7003 1680 0006 6360 1883

PS Form 3811, February 2004 Domestic Return Receipt

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:

Jimmy Frank Hight
1528 E. 10th
Odessa, TX 79761

2. Article Number
(Transfer from service label) 7003 1680 0006 6360 1937

PS Form 3811, February 2004 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee
B. Received by (Printed Name) Bill Bratton C. Date of Delivery 9-11-07
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

Number 7003 1680 0006 6360 1883 102595-02-M-1540
PS Form 3811, February 2004 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee
B. Received by (Printed Name) W. S. Hight C. Date of Delivery 8-31-07
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

Number 7003 1680 0006 6360 1937 102595-02-M-1540
PS Form 3811, February 2004 Domestic Return Receipt

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete 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:

Walton Short Life Estate
Remainder Diane Smith Short
1718 Foster Drive
Magnolia, AR 71753

1. Article Addressed to:

2. Article Number (Transfer from service label) 7003 1680 0006 6360 2149

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) *W. Short* C. Date of Delivery *9-1-07*

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

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete 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:

Walton Short Life Estate
Remainder Diane Smith Short
1718 Foster Drive
Magnolia, AR 71753

1. Article Addressed to:

2. Article Number (Transfer from service label) 7003 1680 0006 6360 2149

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) *W. Short* C. Date of Delivery *9-1-07*

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

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete 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:

Walton Short Life Estate
Remainder Diane Smith Short
1718 Foster Drive
Magnolia, AR 71753

1. Article Addressed to:

2. Article Number (Transfer from service label) 7003 1680 0006 6360 2026

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) *W. Short* C. Date of Delivery *9-1-07*

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

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete 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:

Walton Short Life Estate
Remainder Diane Smith Short
1718 Foster Drive
Magnolia, AR 71753

1. Article Addressed to:

2. Article Number (Transfer from service label) 7003 1680 0006 6360 2026

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) *W. Short* C. Date of Delivery *9-1-07*

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

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Items 1, 2, and 3. Also complete Restricted Delivery is desired.		A. Signature ☒ Agent ☐ Addressee	
Print your name and address on the reverse so that we can return the card to you.		B. Received by (Printed Name) C. Date of Delivery	
Attach this card to the back of the mailpiece, or on the front if space permits.		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		4. Restricted Delivery? (Extra Fee) ☐ Yes	
Number 7003 1680 0006 6360 2163		102595-02-M-1540	
3811, February 2004 Domestic Return Receipt			

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.		A. Signature ☐ Agent ☐ Addressee	
Print your name and address on the reverse so that we can return the card to you.		B. Received by (Printed Name) C. Date of Delivery	
Attach this card to the back of the mailpiece, or on the front if space permits.		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		4. Restricted Delivery? (Extra Fee) ☐ Yes	
Number 7003 1680 0006 6360 1968		102595-02-M-1540	
PS Form 3811, February 2004 Domestic Return Receipt			

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.		A. Signature ☐ Agent ☐ Addressee	
Print your name and address on the reverse so that we can return the card to you.		B. Received by (Printed Name) C. Date of Delivery	
Attach this card to the back of the mailpiece, or on the front if space permits.		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		4. Restricted Delivery? (Extra Fee) ☐ Yes	
Number 7003 1680 0006 6360 1968		102595-02-M-1540	
PS Form 3811, February 2004 Domestic Return Receipt			

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Items 1, 2, and 3. Also complete Restricted Delivery is desired.		A. Signature ☒ Agent ☐ Addressee	
Print your name and address on the reverse so that we can return the card to you.		B. Received by (Printed Name) C. Date of Delivery	
Attach this card to the back of the mailpiece, or on the front if space permits.		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		4. Restricted Delivery? (Extra Fee) ☐ Yes	
Number 7003 1680 0006 6360 1951		102595-02-M-1540	
811, February 2004 Domestic Return Receipt			

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.		A. Signature ☐ Agent ☐ Addressee	
Print your name and address on the reverse so that we can return the card to you.		B. Received by (Printed Name) C. Date of Delivery	
Attach this card to the back of the mailpiece, or on the front if space permits.		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		4. Restricted Delivery? (Extra Fee) ☐ Yes	
Number 7003 1680 0006 6360 2118		102595-02-M-1540	
PS Form 3811, February 2004 Domestic Return Receipt			

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.		A. Signature ☐ Agent ☐ Addressee	
Print your name and address on the reverse so that we can return the card to you.		B. Received by (Printed Name) C. Date of Delivery	
Attach this card to the back of the mailpiece, or on the front if space permits.		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		4. Restricted Delivery? (Extra Fee) ☐ Yes	
Number 7003 1680 0006 6360 2118		102595-02-M-1540	
PS Form 3811, February 2004 Domestic Return Receipt			

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
1. Article Addressed to: Coby Burrow 131 Columbia Rd #462 Magnolia, AR 71753		A. Signature <i>Coby Burrow</i> ☒ Agent ☐ Addressee	
2. Article Number (Transfer from service label) 7003 1680 0006 6360 2019		B. Received by (Printed Name) <i>Coby Burrow</i> C. Date of Delivery <i>9-10-07</i>	
3. Service Type ☐ Certified Mail ☐ Registered ☐ Insured Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ C.O.D.		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below:	
4. Restricted Delivery? (Extra Fee) ☐ Yes			
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
1. Article Addressed to: Tracy Knitong 518 Woodland Dr. Benton, AR 72015		A. Signature <i>Tracy Knitong</i> ☒ Agent ☐ Addressee	
2. Article Number (Transfer from service label) 7003 1680 0006 6360 2019		B. Received by (Printed Name) <i>Tracy Knitong</i> C. Date of Delivery <i>9-6-07</i>	
3. Service Type ☐ Certified Mail ☐ Registered ☐ Insured Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ C.O.D.		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below:	
4. Restricted Delivery? (Extra Fee) ☐ Yes			
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
1. Article Addressed to: Roger Davis 29330 X 78755		A. Signature <i>Roger Davis</i> ☒ Agent ☐ Addressee	
2. Article Number (Transfer from service label) 7003 1680 0006 6360 1690		B. Received by (Printed Name) <i>Roger Davis</i> C. Date of Delivery <i>9-10-07</i>	
3. Service Type ☐ Certified Mail ☐ Registered ☐ Insured Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ C.O.D.		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below:	
4. Restricted Delivery? (Extra Fee) ☐ Yes			
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
1. Article Addressed to: Y Meyer ollymead Woodlands, TX 77381		A. Signature <i>Y Meyer</i> ☒ Agent ☐ Addressee	
2. Article Number (Transfer from service label) 7003 1680 0006 6360 2002		B. Received by (Printed Name) <i>Y Meyer</i> C. Date of Delivery <i>9-10-07</i>	
3. Service Type ☐ Certified Mail ☐ Registered ☐ Insured Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ C.O.D.		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: <i>492 E. FAIRWAY LN FAY. AR. 72701 72701</i>	
4. Restricted Delivery? (Extra Fee) ☐ Yes			
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.

1. Article Addressed to:

P1 Oil & Gas, LLC
409 N. Vine St.
Magnolia, AR 71753

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
[Signature] ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
SAM SHARP *9.6.07*

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

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)

7003 1680 0006 6360 2132

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540