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

APPLICATION OF APACHE CORPORATION FOR STATUTORY UNITIZATION, LEA COUNTY, NEW MEXICO.

Case No. 14,125

AFFIDAVIT OF NOTICE

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

James Bruce, 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 an attorney for Apache Corporation.

3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the royalty and overriding royalty 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 1210.

James Bruce

SUBSCRIBED AND SWORN TO before me this 12th day of May, 2008 by James Bruce.

My Commission Expires: 3/14/09

Notary Public

Oil Conservation Division
Case No. 14
Exhibit No. 1

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)

jamesbruc@aol.com

April 23, 2008

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for statutory unitization, filed with the New Mexico Oil Conservation Division by Apache Corporation, regarding parts of Sections 4, 8, 9, 16, 17, and 21, Township 21 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, May 15, 2008, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As a royalty or overriding royalty interest owner in the unit area, 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 (in writing) the Division, and the undersigned, by Thursday, May 8, 2008 if you intend to participate in the hearing.

Very truly yours,

James Bruce

Attorney for Apache Corporation

EXHIBIT A

BOYS & GIRLS CLUBS OF AMERICA
SVP FINANCIAL SERVICES
1275 PEACHTREE ST NE
ATLANTA, GA 30309-3506

CECILE MARIE DREESSEN
PO BOX 1696
POULSBO, WA 98370

CHARLES R HAWK
6466 262ND RD
EFFINGHAM, KS 66023-4186

Chosen People Ministries, Inc.
241 E. 51st Street
New York, NY 10022
Attn: Dr. Mitch Glaser

DAVID MCINTOSH
PO BOX 12019
AUSTIN, TX 78711-2019

DIANA J SOLARSKI
6320 KALE DR
AMARILLO, TX 79109

DIANE PATRICK TIPTON
1505 W CUTHBERT AVE
MIDLAND, TX 79701

DION LOWE
2306 CYPRESS PT W
AUSTIN, TX 78746

EDWARD T DREESSEN JR
PO BOX 830
PALO CEDRO, CA 96073

ELLIOTT INDUSTRIES
PO BOX 3300
ROSWELL, NM 88202

Fairway Oil & Gas Company
P.O. Box 845
Sparta, New Jersey 07871

FOREST HOME INC
C/O DAVID CARLSON CFO
40000 VALLEY OF THE FALLS
FOREST FALLS, CA 92339

GERALD DALE HIGLEY
13521 GREEN CEDAR LN
OKLAHOMA CITY, OK 73131

GUNSMOKE ENERGY COMPANY
6608 BRYANT TRVIN RD
FORT WORTH, TX 76135

HIEN THI NGO NGUYEN
13109 RUSSET LEAF LN
SAN DIEGO, CA 92129

A L CONE PARTNERSHIP
P O BOX 3457
LUBBOCK, TX 79452

KATHERINE A KECK
1801 AVE OF THE STARS STE 446
LOS ANGELES, CA 90067-6906

KATHRYN ANN PRICE
1148 BRIARCLIFF
WICHITA, KS 67207

KAY LOWE ATCHESON
3513 105 TH ST
LUBBOCK, TX 79423

KELLY LOWE READ
207 COTTONWOOD
LEVELLAND, TX 79336

NEW MEXICO BOYS & GIRLS RANCHES INC
6209 HENDRIX NE
ALBUQUERQUE, NM 87110

NM O&G LTD
JIM CONE GENERAL PARTNER
PO BOX 10217
LUBBOCK, TX 79408

R JANE EPPES
BOX 962
FLIPPIN, AR 72634

ROBERT KNIGHT
C/O J ROBERT SHINE POA
PO BOX 1407
NEW ALBANY, IN 47151-1407

ROBERT T HARTLEY
P O BOX 1024
CLOVIS, NM 88102-1024

ROBERTA BUCKELEW
2510 W WATER ST
YUMA, AZ 85364

RONNY P LOWE
P O BOX 1381
WOLFFORTH, TX 79382

SABINE ROYALTY TRUST
BANK OF AMERICA NA ESCROW AGENT
LBX 840887
DALLAS, TX 75284-0887

SALLY RODGERS
152B ARROYO HONDO ROAD
SANTA FE, NM 87508

EXHIBIT A

JESSICA GRANT FRIDAY
3750 ROSEMEAD PKWY STE 2218
DALLAS, TX 75287

JOANN P KRUCKEBERG
6320 BROOKVIEW AVE
EDINA, MN 55424

JOHN REDFERN III
P O BOX 50890
MIDLAND, TX 79710

JONES-DAUBE MINERAL COMPANY
BOX 1169
DUNCAN, OK 73534

JOSHUA SONGER
312 FRANKFORD AVENUE #216
LUBBOCK, TX 79416

JULIA BENHAM TESTAMENTARY TRST
ALLEN W VILLEMARETTE TRUSTEE
6765 CORPORATE BLVD UNIT 6307
BATON ROUGE, LA 70809

JUNE D SPEIGHT
C/O F J DANGLADE PROPERTIES
PO DRAWER 1687
LOVINGTON, NM 88260-1687

SUE SAUNDERS GRAHAM
P O BOX 987
ROSWELL, NM 88202-0987

KATHERINE LYNNE MEIER
5630 ANN ARBOR DR
BOKEELIA, FL 33922

SOUTHWESTERN BAPTIST
THEOLOGICAL SEMINARY
1601 ELM ST STE 1700
DALLAS, TX 75201-4741

RANDY LEE CONE
PO BOX 552
JAY, OK 74346

KENNETH G CONE TRUSTEE
KATHERINE SHAPERA POA
P O BOX 11310
MIDLAND, TX 79702

KERRY PORTER
HC 73 BOX 41-1
HARTSHORNE, OK 74547

LORRAINE S BLACK TRUST
B ROBERT K BLACK TRUSTEE
6608 N WESTERN #262
OKLAHOMA CITY, OK 73116

MARJORIE JEAN NAGLE
5322 JUDALON LANE
HOUSTON, TX 77056-7221

MICHELLE SONGER SPENCE
709 FOREST RIDGE
GARLAND, TX 75042

MILWARD KENT MILLER
204 RIVERHILL BLVD
KERRVILLE, TX 78028

RALPH J PRESTON
6201 NEWCASTLE DR
BELLAIRE, TX 77401-3813

NOBLE E FLENNIKEN
4132 KILLION DRIVE
DALLAS, TX 75229-6227

OPAL DENSON
CHARLES R FULKS POA
PO BOX 829
SNYDER, TX 79550-0829

POGO PRODUCING COMPANY
700 MILAM STE 3100
HOUSTON, TX 77002

TEXACAL OIL AND GAS INC
4299 MACARTHUR BLVD 207
NEWPORT BEACH, CA 92660

TEXAS TECHNOLOGICAL UNIVERSITY
P O BOX 45025
LUBBOCK, TX 79409-5025

THE LONG TRUSTS
P O BOX 1336
KILGORE, TX 75662

THE NATIONAL REGULATORY PROPERTY
MANAGEMENT DIVISION
53 W 11TH AVE
COLUMBUS, OH 43201

THE TOLES COMPANY
P O BOX 1300
ROSWELL, NM 88202-1300

TOM CONE CHILDRENS TRUST UW OF
KATHLEEN CONE
C/O BANK OF OKLA SUCC TRUSTEE
PO BOX 1588
TULSA, OK 74101-1588

TOM R CONE
P O BOX 778
JAY, OK 74346-0778

WAIKIKI PARTNERS LP
P O BOX 2127
MIDLAND, TX 79702-2127

WEST TEXAS STATE UNIVERSITY
A&M SYSTEM BUILDING SUITE 3000
200 TECHNOLOGY WAY
COLLEGE STATION, TX 77845-3424

B P AMERICA PRODUCTION CO
501 WESTLAKE PARK BLVD.
HOUSTON, TX 77079
ATTN: CHARLIE HILL

SHRINERS HOSPITALS FOR CHILDREN C/O
THE NORTHERN TRUST BK OF TX
PO BOX 226270
DALLAS, TX 75222-6270

STANLEY WHITE
3789 CHAPALA
YUMA, AZ 85365

TEDDY L HARTLEY
PO BOX 845
CLOVIS, NM 88102-0845

HINKLE INVESTMENT CO
P O BOX 967
KING CITY, CA 93930-2967

UNIVERSITY OF NEW MEXICO REGENTS
C/O DIRECTOR OF REAL ESTATE
1712 LAS LOMAS NE
ALBUQUERQUE, NM 87131

Kenneth G. Cone
P.O. Box 11310
Midland, Texas 79702

WILBUR C HIGLEY JR
PO BOX 12019
AUSTIN, TX 78711-2019

HERD PARTNERS LTD
P O BOX 130
MIDLAND, TX 79702-0130

ALLISON SONGER
6523 SANTA FE AVENUE
DALLAS, TX 75223

AUVENSHINE CHILDRENS TEST. TRUST
PO BOX 507
DRIPPING SPRINGS, TX 78620

HELEN R GENTRY
7059 DAWSON RD #96
CINCINNATI, OH 45243-2554

BARBARA STOCK
18742 WOOD GLEN LN
HOUSTON, TX 77084

BILLIE JUNE GILMORE
C/O DIANA L SHEFIELD
3603 HANCOCK ST
AMARILLO, TX 79109-4138

HELEN JANE CHRISTMAS BARBY
P O BOX 426
OKARCHE, OK 73762

CANDY CHRISTMAS
PO BOX 771272
OCALA, FL 34477-1272

CATHERINE ROACH TRUST
C/O JPMORGAN CHASE BANK NA
PO BOX 99084
FORT WORTH, TX 76199-0084

CATHIE MCCOWN
P O BOX 658
DRIPPING SPRINGS, TX 78620-0658

DANIEL W CODER
24920 E. Roxbury Place
Aurora, CO 80016

GENE L DUKE & CLEBBIE F DUKE
1813 GILLHAM DR
BROWNFIELD, TX 79316-6013

Myles Lyndon Collins II
1405 Haverford Street
McKinney, Texas 75701

DEVON ENERGY PRODUCTION CO LP
PO BOX 843559
DALLAS, TX 75284-3559

DR RICHARD B LANGER
PO BOX 166
KUALAPUU MOLOKA, HI 96757

Diane Patrick Tipton
Profit Sharing Plan
1505 West Cuthbert Ave.
Midland, Texas 79701

7007 3020 0001 2490 6162

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

APR 23 2008

SANTA FE NM 87501

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

DION LOWE
2306 CYPRESS PT W
AUSTIN, TX 78746

PS Form ... 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:

FAIRWAY OIL & GAS COMPANY
P.O. BOX 845
SPARTA, ~~NM~~ NM 07871

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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)* 7007 3020 0001 2490 6179

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:

DION LOWE
2306 CYPRESS PT W
AUSTIN, TX 78746

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

HILLS BR AUSTIN, TX MAY 3 2008 WESTLAKE USPS

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)* 7007 3020 0001 2490 6162

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

7007 3020 0001 2490 6179

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Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

APR 8 2008

SANTA FE NM 87501

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

FAIRWAY OIL & GAS COMPANY
P.O. BOX 845
SPARTA, ~~NM~~ NM 07871

PS Form ... Instructions

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Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here: SANTA FE NM APR 23 2008 87501

Sent To
Street, Apt or PO Box
City, State,

WEST TEXAS STATE UNIVERSITY
A&M SYSTEM BUILDING SUITE 3000
200 TECHNOLOGY WAY
COLLEGE STATION, TX 77845-3424

PS Form 3

7007 3020 0001 2490 6537

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:

SUE SAUNDERS GRAHAM
P O BOX 987
ROSWELL, NM 88202-0987

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Jimi S. Gadzia ☐ Agent ☐ Addressee

B. Received by (Printed Name) JIMI S. GADZIA
C. Date of Delivery 5-5-08

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) 7007 3020 0001 2490 6360

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-15

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:

WEST TEXAS STATE UNIVERSITY
A&M SYSTEM BUILDING SUITE 3000
200 TECHNOLOGY WAY
COLLEGE STATION, TX 77845-3424

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Edum Davis ☐ Agent ☐ Addressee

B. Received by (Printed Name) Edum Davis
C. Date of Delivery 5-5-08

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) 7007 3020 0001 2490 6537

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

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here: SANTA FE NM APR 23 2008 87501

Sent To
Street, Apt or PO Box
City, State,

SUE SAUNDERS GRAHAM
P O BOX 987
ROSWELL, NM 88202-0987

PS Form

7007 3020 0001 2490 6360

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

SANTA FE NM
Postmark Here
APR 23 2008
USPS 87501

Sent To: THE NATIONAL REGULATORY PROPERTY MANAGEMENT DIVISION
Street, Apt. No., or PO Box No.: 53 W 11TH AVE
City, State, ZIP+4: COLUMBUS, OH 43201

PS Form ... Instructions

7007 3020 0001 2490 6322

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:

UNIT – RI & ORRI OWNERS LIST – RAT

JOANN P KRUCKEBERG
6320 BROOKVIEW AVE
EDINA, MN 55424

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X JoAnn P Kruckeberg ☐ Agent ☐ Addressee

B. Received by (Printed Name): JoAnn P Kruckeberg
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 ☐ 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)* 7007 3020 0001 2490 6346

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:

THE NATIONAL REGULATORY PROPERTY
MANAGEMENT DIVISION
53 W 11TH AVE
COLUMBUS, OH 43201

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name): C. Date of Delivery: 4/28/08

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

APR 28 2008
USPS - 43201

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)* 7007 3020 0001 2490 6322

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

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

SANTA FE NM
Postmark Here
APR 23 2008

UNIT – RI & ORRI OWNERS LIST – RA

Sent To
Street, Apt. No., or PO Box No.: JOANN P KRUCKEBERG 6320 BROOKVIEW AVE
City, State, ZIP+4: EDINA, MN 55424

PS Form ... Instructions

7007 3020 0001 2490 6346

7007 3020 0001 2490 6063

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

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APR 23 2008

DIANE PATRICK TIPTON
1505 W CUTHBERT AVE
MIDLAND, TX 79701

PS F … 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:

Diane Patrick Tipton
Profit Sharing Plan
1505 West Cuthbert Ave.
Midland, Texas 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 4-25-08

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) 7007 3020 0001 2490 5233

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:

DIANE PATRICK TIPTON
1505 W CUTHBERT AVE
MIDLAND, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 4-25-08

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 lab) 7007 3020 0001 2490 6063

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

7007 3020 0001 2490 5233

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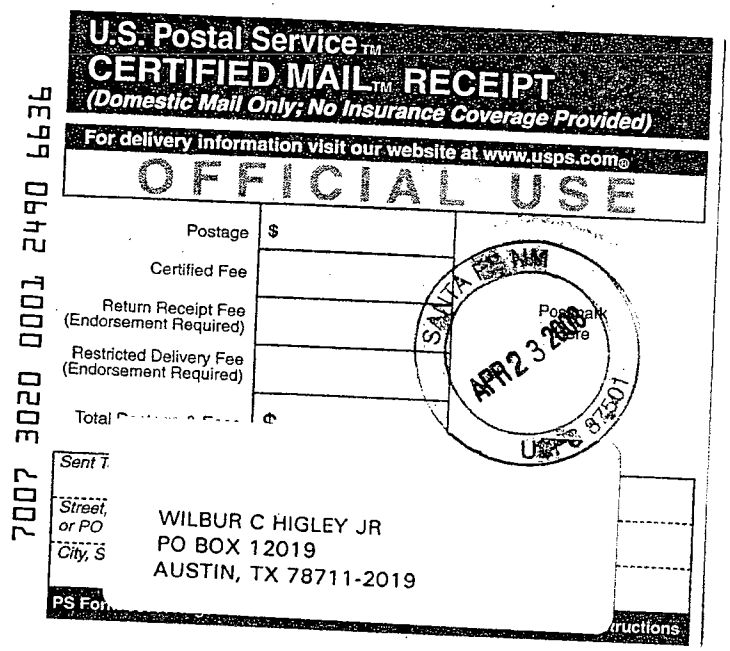
MIDLAND TX 79701 OFFICIAL USE

Postage	$ $5.30
Certified Fee	$2.65
Return Receipt Fee (Endorsement Required)	$2.15
Restricted Delivery Fee (Endorsement Required)	$0.00
Total Postage & Fees	$ $10.10

SANTA FE NM 19 Postmark APR 22 2008 04/22/2008

Sent To: Diane Patrick Tipton
Street, Apt. No.; or PO Box No.: Profit Sharing Plan 1505 West Cuthbert Ave.
City, State, ZIP+4: Midland, Texas 79701

PS Form 3800, August 2006 See Reverse for Instructions



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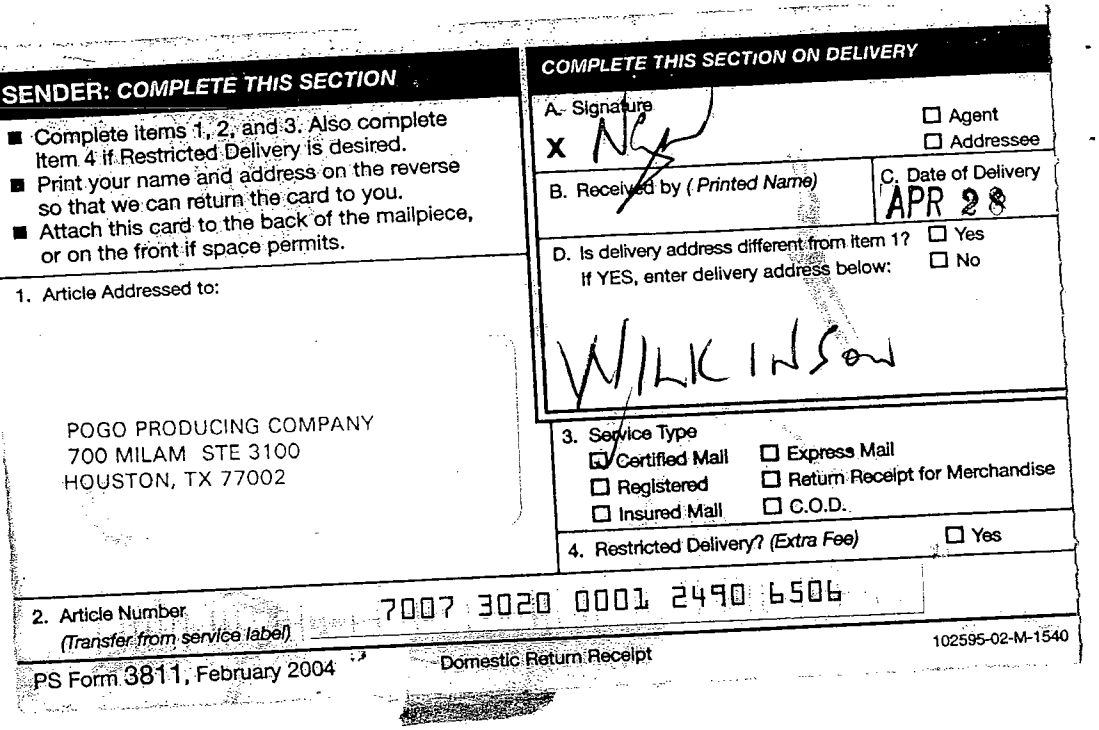
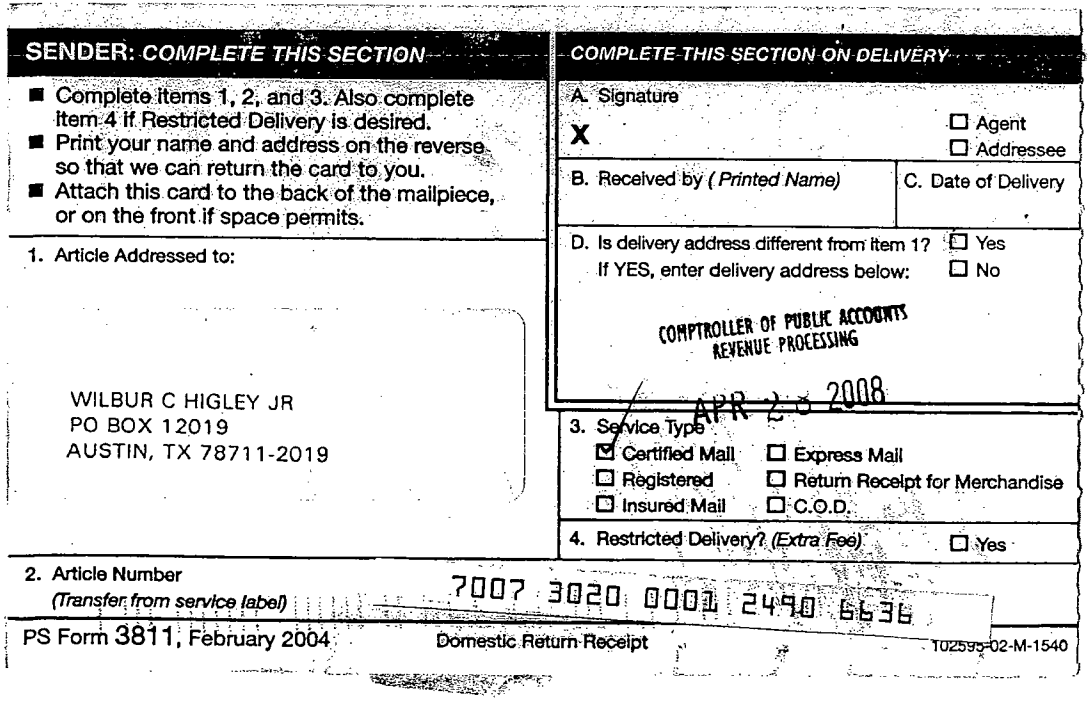
Postage $
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $
Postmark Here
SANTA FE NM
APR 23 2008
87501
Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4
WILBUR C HIGLEY JR
PO BOX 12019
AUSTIN, TX 78711-2019
PS Form 3800, August 2006 See Reverse for Instructions
7007 3020 0001 2490 6636



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:
POGO PRODUCING COMPANY
700 MILAM STE 3100
HOUSTON, TX 77002

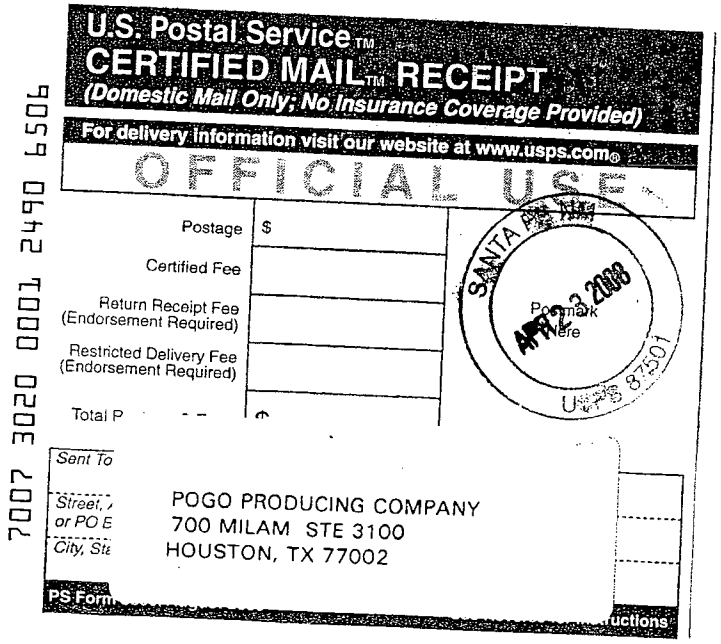
COMPLETE THIS SECTION ON DELIVERY
A. Signature
X
☐ Agent
☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery
APR 28
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
WILKINSON
3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7007 3020 0001 2490 6506
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:
WILBUR C HIGLEY JR
PO BOX 12019
AUSTIN, TX 78711-2019

COMPLETE THIS SECTION ON DELIVERY
A. Signature
X
☐ Agent
☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
COMPTROLLER OF PUBLIC ACCOUNTS
REVENUE PROCESSING
APR 25 2008
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) 7007 3020 0001 2490 6636
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



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Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $
Postmark Here
SANTA FE NM
APR 23 2008
87501
Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4
POGO PRODUCING COMPANY
700 MILAM STE 3100
HOUSTON, TX 77002
PS Form 3800, August 2006 See Reverse for Instructions
7007 3020 0001 2490 6506

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

APR 23 2008 — Postmark Here

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

GERALD DALE HIGLEY
13521 GREEN CEDAR LN
OKLAHOMA CITY, OK 73131

PS Form 3800, August 2006 — See Reverse for Instructions

7007 3020 0001 2490 6087

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:

NM O&G LTD
JIM CONE GENERAL PARTNER
PO BOX 10217
LUBBOCK, TX 79408

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Jim Cone ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery
APR 28 2008

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) ☐

2. Article Number (Transfer from service label) 7007 3020 0001 2490 6117

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:

GERALD DALE HIGLEY
13521 GREEN CEDAR LN
OKLAHOMA CITY, OK 73131

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery
4/28

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) 7007 3020 0001 2490 6087

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

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Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

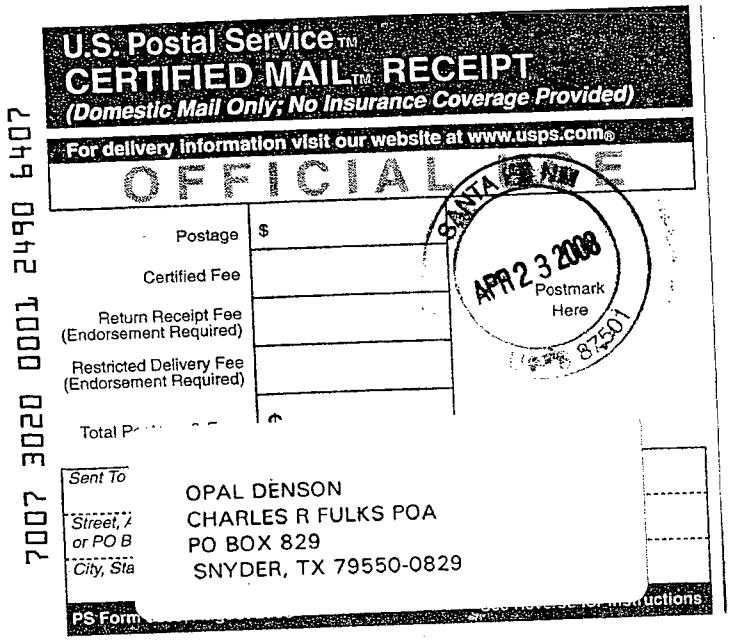
APR 23 2008 — Postmark Here

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

NM O&G LTD
JIM CONE GENERAL PARTNER
PO BOX 10217
LUBBOCK, TX 79408

PS Form 3800, August 2006 — See Reverse for Instructions

7007 3020 0001 2490 6117



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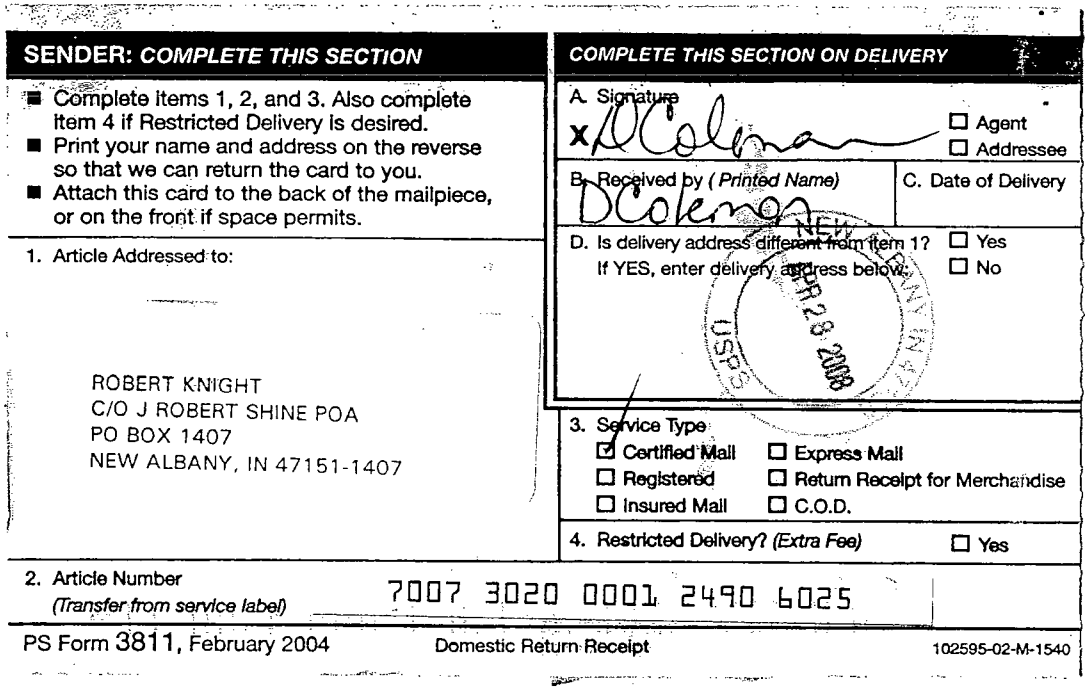
Total P
SANTA FE NM
APR 23 2008
Postmark Here
87501
Sent To
Street, or PO B
City, Sta
OPAL DENSON
CHARLES R FULKS POA
PO BOX 829
SNYDER, TX 79550-0829
PS Form
7007 3020 0001 2490 6407



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:

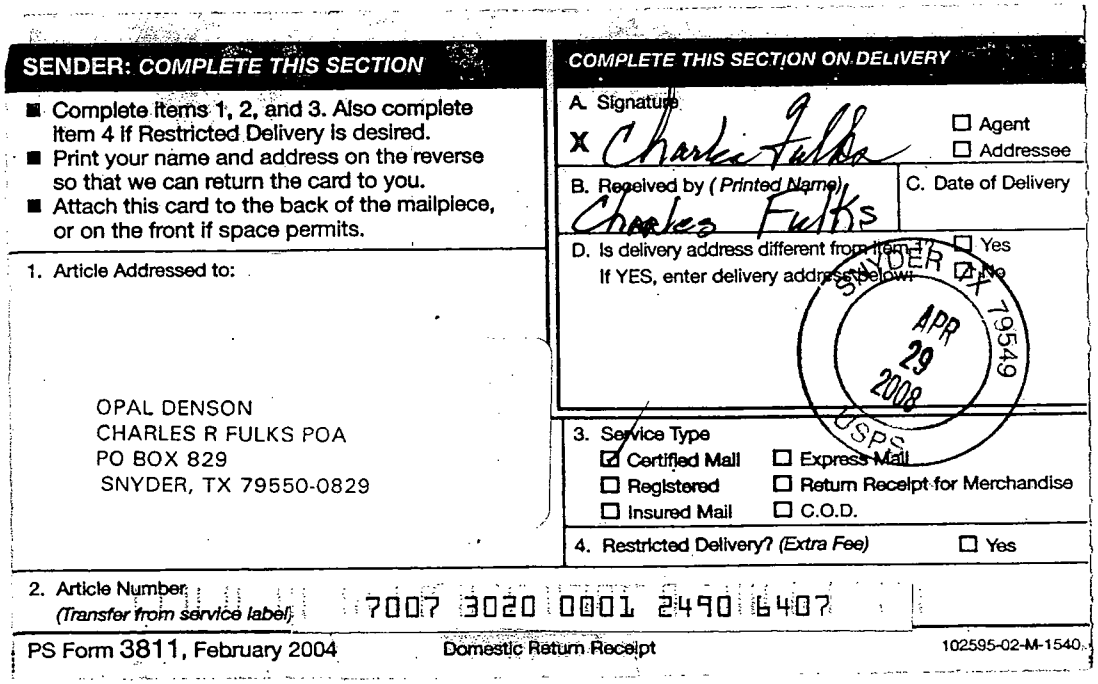
ROBERT KNIGHT
C/O J ROBERT SHINE POA
PO BOX 1407
NEW ALBANY, IN 47151-1407

COMPLETE THIS SECTION ON DELIVERY
A. Signature
X DColeman
☐ Agent ☐ Addressee
B. Received by (Printed Name) DColeman
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
NEW ALBANY IN
APR 29 2008
USPS

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) 7007 3020 0001 2490 6025

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:

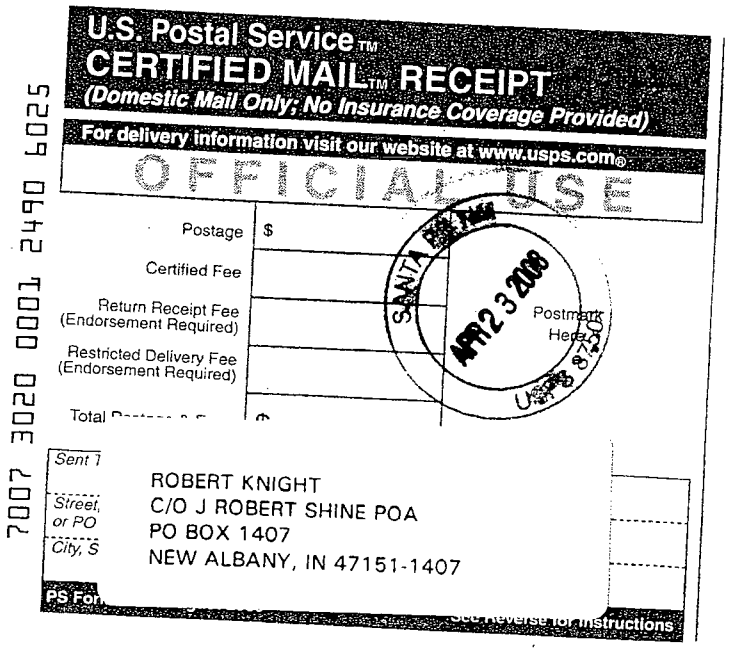
OPAL DENSON
CHARLES R FULKS POA
PO BOX 829
SNYDER, TX 79550-0829

COMPLETE THIS SECTION ON DELIVERY
A. Signature
X Charles Fulks
☐ Agent ☐ Addressee
B. Received by (Printed Name) Charles Fulks
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
SNYDER TX 79549
APR 29 2008
USPS

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) 7007 3020 0001 2490 6407

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



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87501
Sent T
Street, or PO
City, S
ROBERT KNIGHT
C/O J ROBERT SHINE POA
PO BOX 1407
NEW ALBANY, IN 47151-1407
PS For
7007 3020 0001 2490 6025

7007 3020 0001 2490 6513

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

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Sent To
Street, Apt. or PO Box
City, State

THE LONG TRUSTS
P O BOX 1336
KILGORE, TX 75662

PS Form ... 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:

WAIKIKI PARTNERS LP
P O BOX 2127
MIDLAND, TX 79702-2127

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Shirley Choate ☐ Agent ☐ Addressee

B. Received by (Printed Name) Shirley Choate
C. Date of Delivery 4-29-08

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)* 7007 3020 0001 2490 6438

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:

THE LONG TRUSTS
P O BOX 1336
KILGORE, TX 75662

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Carol Davis ☐ Agent ☐ Addressee

B. Received by (Printed Name) CAROL DAVIS
C. Date of Delivery 4-29-08

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)* 7007 3020 0001 2490 6513

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

7007 3020 0001 2490 6438

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

SANTA FE NM
APR 23 2008
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USPS 87501

Sent To
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City, State

WAIKIKI PARTNERS LP
P O BOX 2127
MIDLAND, TX 79702-2127

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

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APR 22 2008
USPS

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

DR RICHARD B LANGER
PO BOX 166
KUALAPUU MOLOKA, HI 96757

PS Form ... Instructions

7007 3020 0001 2490 5066

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:

MILWARD KENT MILLER
204 RIVERHILL BLVD
KERRVILLE, TX 78028

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Marcel J. Miller
C. Date of Delivery 4/28/08

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)* 7007 3020 0001 2490 6391

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:

DR RICHARD B LANGER
PO BOX 166
KUALAPUU MOLOKA, HI 96757

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) Richard Langer
C. Date of Delivery 4/28/08

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)* 7007 3020 0001 2490 5066

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

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

SANTA FE NM 87501
Postmark Here
APR 22 2008

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

MILWARD KENT MILLER
204 RIVERHILL BLVD
KERRVILLE, TX 78028

PS Form 3800, August 2006 ... Instructions

7007 3020 0001 2490 6391

7007 3020 0001 2490 6445

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

SANTA FE NM APR 23 2008 Postmark Here

FICATIONS NOT RETURNED

Sent To
Street, Apt. or PO Box: JOHN REDFERN III
P O BOX 50890
City, State: MIDLAND, TX 79710

PS Form 3800, August 2006 ... 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:

KATHERINE A KECK
1801 AVE OF THE STARS STE 446
LOS ANGELES, CA 90067-5906

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery
[illegible] 4-30-08

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) 7007 3020 0001 2490 6193

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:

FICATIONS NOT RETURNED

JOHN REDFERN III
P O BOX 50890
MIDLAND, TX 79710

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) | C. Date of Delivery
[illegible] 4-30-08

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) 7007 3020 0001 2490 6445

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

7007 3020 0001 2490 6193

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

SANTA FE NM APR 23 2008 Postmark Here

Sent To
Street, Apt. or PO Box: KATHERINE A KECK
1801 AVE OF THE STARS STE 446
City, State: LOS ANGELES, CA 90067-5906

PS Form 3800 ... tions

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Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

SANTA FE NM 87501 APR 2 2008 Postmark Here USPS

Sent To: HERD PARTNERS LTD
Street, Apt. No., or PO Box No.: P O BOX 130
City, State, ZIP+4: MIDLAND, TX 79702-0130

PS Form 3800, August 2006 — See Reverse for Instructions

7007 3020 0001 2490 5097

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:

SOUTHWESTERN BAPTIST
THEOLOGICAL SEMINARY
1601 ELM ST STE 1700
DALLAS, TX 75201-4741

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) GZEL HAIZLIP — 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 ☐ 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)* 7007 3020 0001 2490 6278

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:

HERD PARTNERS LTD
P O BOX 130
MIDLAND, TX 79702-0130

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x P Burdett ☑ Agent ☐ Addressee

B. Received by (Printed Name) P Burdett — C. Date of Delivery 4-28-08

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)* 7007 3020 0001 2490 5097

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

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

SANTA FE NM 87501 APR 2 2008 Postmark Here

Sent To: SOUTHWESTERN BAPTIST
THEOLOGICAL SEMINARY
Street, Apt. No., or PO Box No.: 1601 ELM ST STE 1700
City, State, ZIP+4: DALLAS, TX 75201-4741

PS Form 3800 — See Reverse for Instructions

7007 3020 0001 2490 6278

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Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $

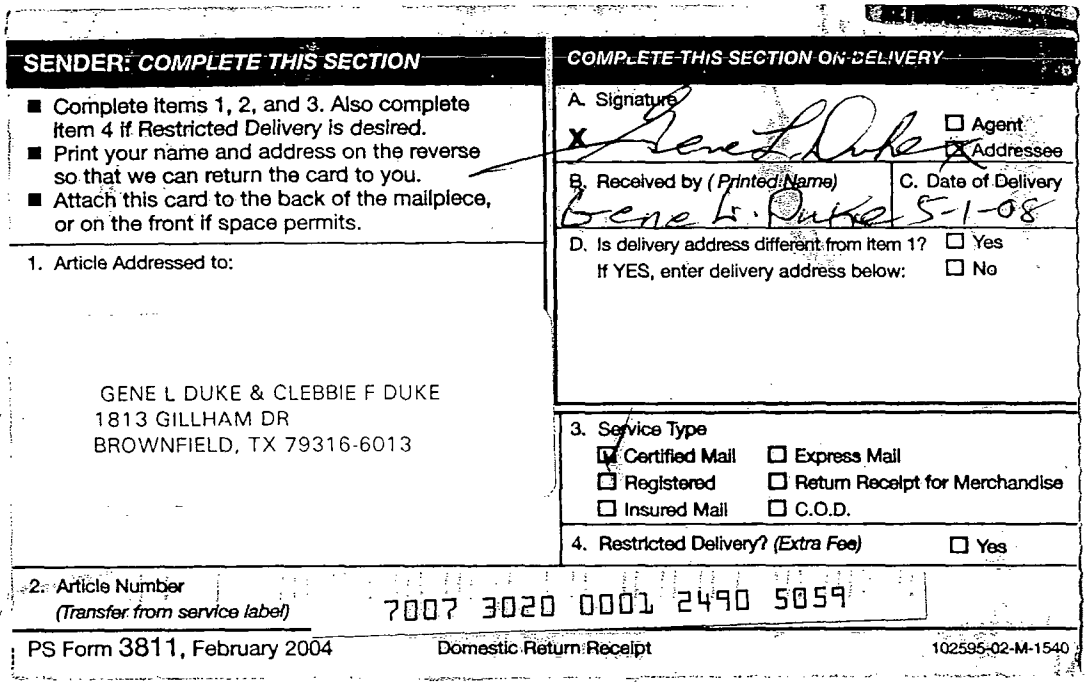
SANTA FE NM 87501
APR 2 2008
Postmark Here
USPS

Sent To
Street, Apt. or PO Box
City, State

CANDY CHRISTMAS
PO BOX 771272
OCALA, FL 34477-1272

PS Form ... Instructions

7007 3020 0001 2490 6582



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:

GENE L DUKE & CLEBBIE F DUKE
1813 GILLHAM DR
BROWNFIELD, TX 79316-6013

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Gene L Duke ☐ Agent ☒ Addressee

B. Received by (Printed Name) Gene L. Duke
C. Date of Delivery 5-1-08

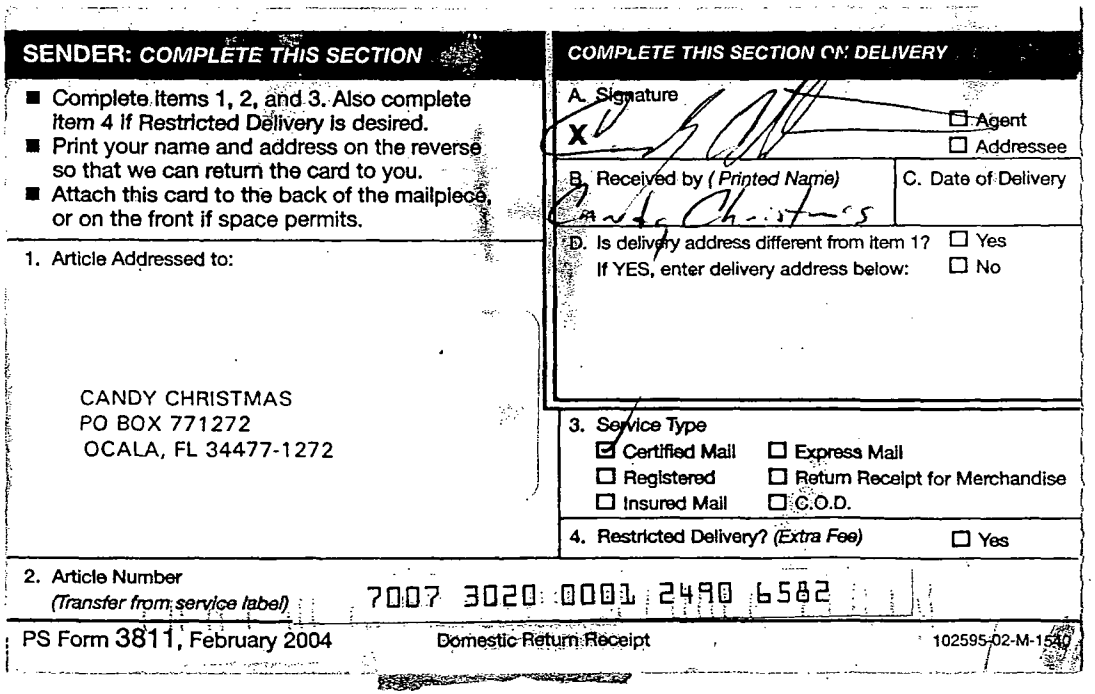
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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) 7007 3020 0001 2490 5059

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:

CANDY CHRISTMAS
PO BOX 771272
OCALA, FL 34477-1272

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

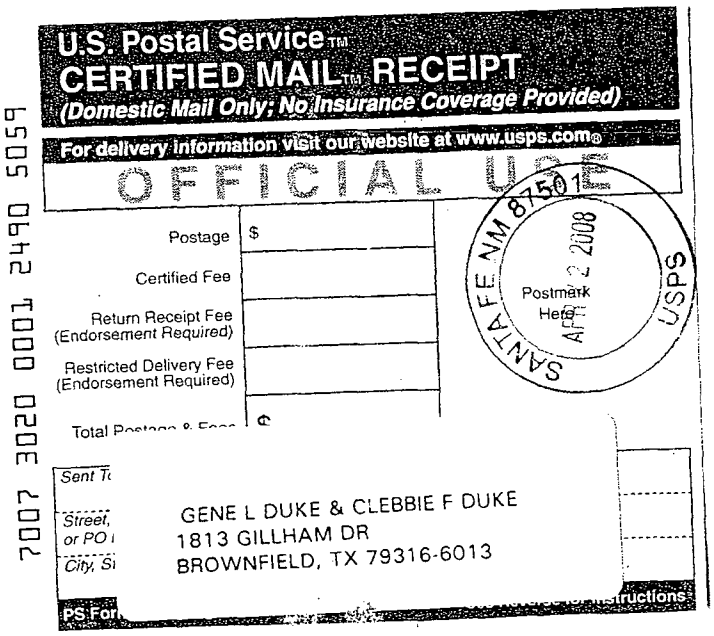
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ 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) 7007 3020 0001 2490 6582

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



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Restricted Delivery Fee (Endorsement Required)
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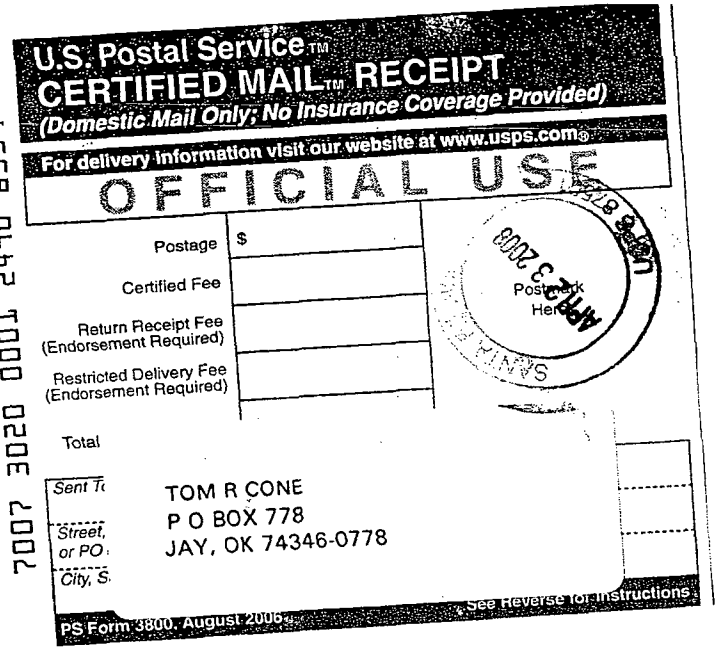
Sent To
Street, Apt. or PO Box
City, State

GENE L DUKE & CLEBBIE F DUKE
1813 GILLHAM DR
BROWNFIELD, TX 79316-6013

PS Form ... Instructions

7007 3020 0001 2490 5059



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Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total

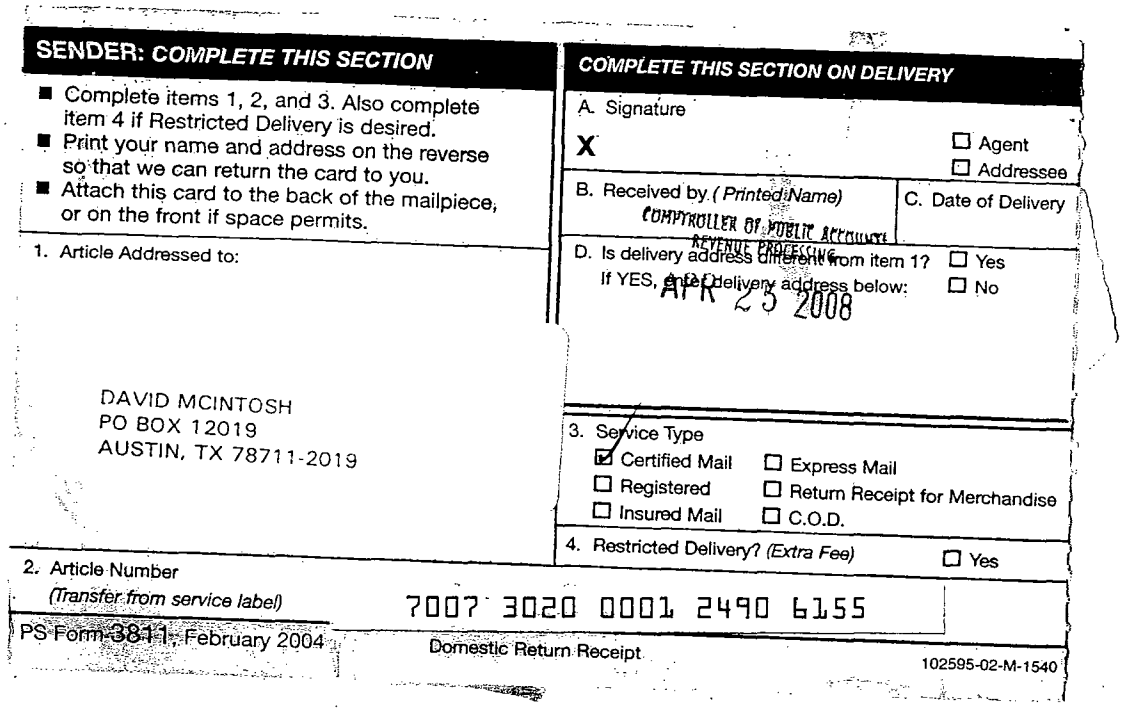
APR 23 2008 Postmark Here

Sent To
Street, or PO
City, S

TOM R CONE
P O BOX 778
JAY, OK 74346-0778

PS Form 3800, August 2006 See Reverse for Instructions

7007 3020 0001 2490 6339



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:

DAVID MCINTOSH
PO BOX 12019
AUSTIN, TX 78711-2019

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) COMPTROLLER OF PUBLIC ACCOUNTS REVENUE PROTECTION C. Date of Delivery

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

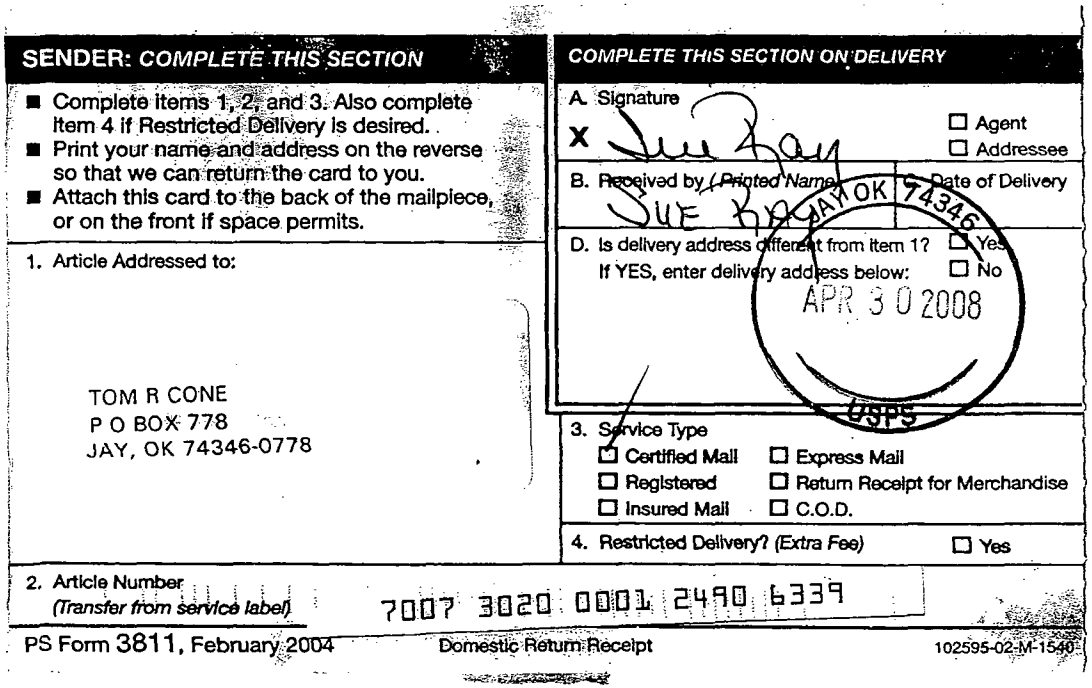
APR 25 2008

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) 7007 3020 0001 2490 6155

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:

TOM R CONE
P O BOX 778
JAY, OK 74346-0778

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sue Ray ☐ Agent ☐ Addressee

B. Received by (Printed Name) SUE RAY JAY OK 74346 C. Date of Delivery

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

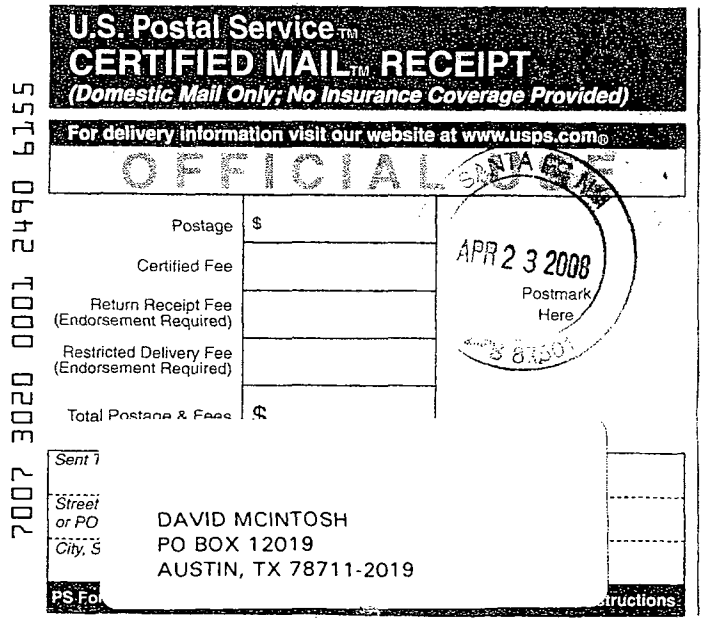
APR 30 2008 USPS

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) 7007 3020 0001 2490 6339

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



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Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $

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Sent To
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City, S

DAVID MCINTOSH
PO BOX 12019
AUSTIN, TX 78711-2019

PS Form ... See Reverse for Instructions

7007 3020 0001 2490 6155

7007 3020 0001 2490 6308

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

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Sent To
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NOBLE E FLENNIKEN
4132 KILLION DRIVE
DALLAS, TX 75229-6227

PS Form ... 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:

RANDY LEE CONE
PO BOX 552
JAY, OK 74346

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sue Ray ☐ Agent ☐ Addressee

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

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

APR 30 2008 USPS JAY OK 74346

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) 7007 3020 0001 2490 6377

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:

NOBLE E FLENNIKEN
4132 KILLION DRIVE
DALLAS, TX 75229-6227

DALLAS TX NORTHAVEN STATION 752299998 APR 30 2008 USPS

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Noble E. Flenniken ☐ Agent ☑ Addressee

B. Received by (Printed Name) Noble E. Flenniken C. Date of Delivery 4/30/2008

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) 7007 3020 0001 2490 6308

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

7007 3020 0001 2490 6377

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Restricted Delivery Fee (Endorsement Required)	
Total P...	$

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City, State, ZIP+4

RANDY LEE CONE
PO BOX 552
JAY, OK 74346

PS Form ... See Reverse for Instructions

7007 3020 0001 2490 6629

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Restricted Delivery Fee (Endorsement Required)	
Total Po	

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Sent To
Street, Ap or PO Box
City, State

HINKLE INVESTMENT CO
P O BOX 967
KING CITY, CA 93930-2967

PS Form 3800, August 2006 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:

BILLIE JUNE GILMORE
C/O DIANA L SHEFIELD
3603 HANCOCK ST
AMARILLO, TX 79109-4138

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

USPS APR 29 2008 AMARILLO, TX 79109-4138

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)* 7007 3020 0001 2490 6650

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:

HINKLE INVESTMENT CO
P O BOX 967
KING CITY, CA 93930-2967

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

KING CITY CA SEP 2 2008 USPS

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)* 7007 3020 0001 2490 6629

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

7007 3020 0001 2490 6650

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

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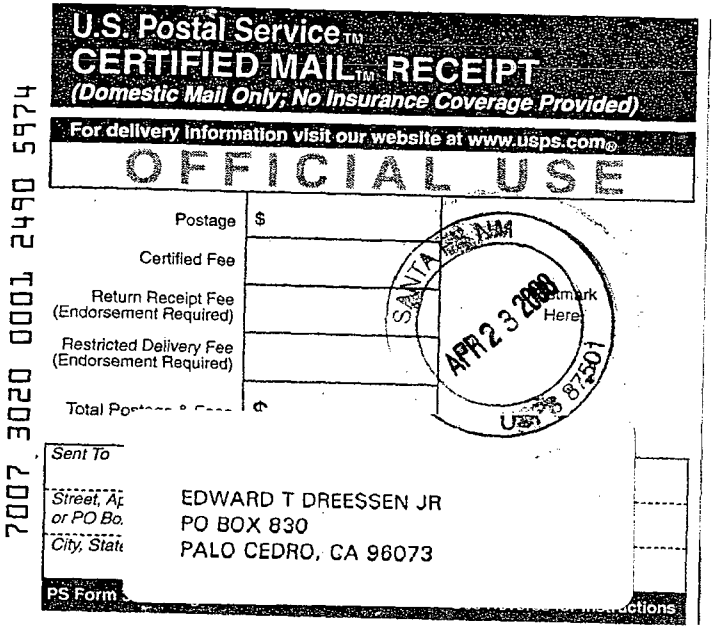
Sent To
Street, Apt. or PO Box
City, State

BILLIE JUNE GILMORE
C/O DIANA L SHEFIELD
3603 HANCOCK ST
AMARILLO, TX 79109-4138

PS Form 3800, August 2006 See Reverse for Instructions



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Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $

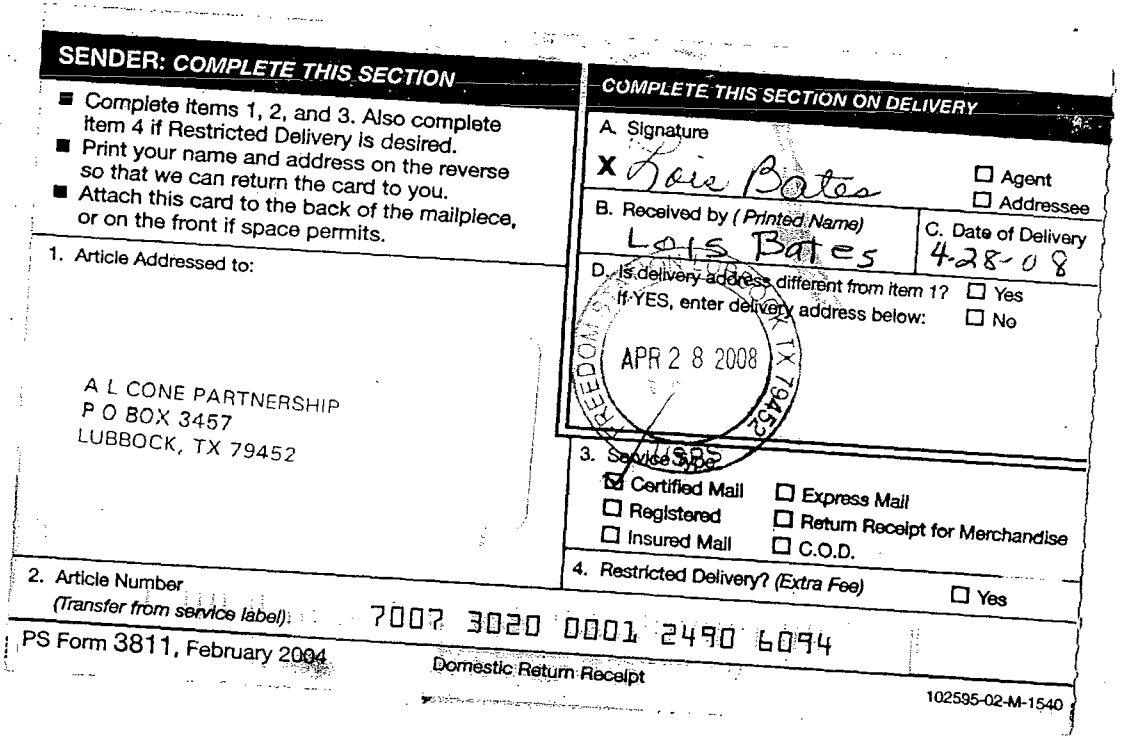
SANTA FE NM
APR 23 2008
Postmark Here
87501

7007 3020 0001 2490 5974

Sent To
Street, Apt. or PO Box
City, State

EDWARD T DREESSEN JR
PO BOX 830
PALO CEDRO, CA 96073

PS Form ... See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so 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:

A L CONE PARTNERSHIP
P O BOX 3457
LUBBOCK, TX 79452

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Lois Bates ☐ Agent ☐ Addressee

B. Received by (Printed Name) Lois Bates
C. Date of Delivery 4-28-08

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

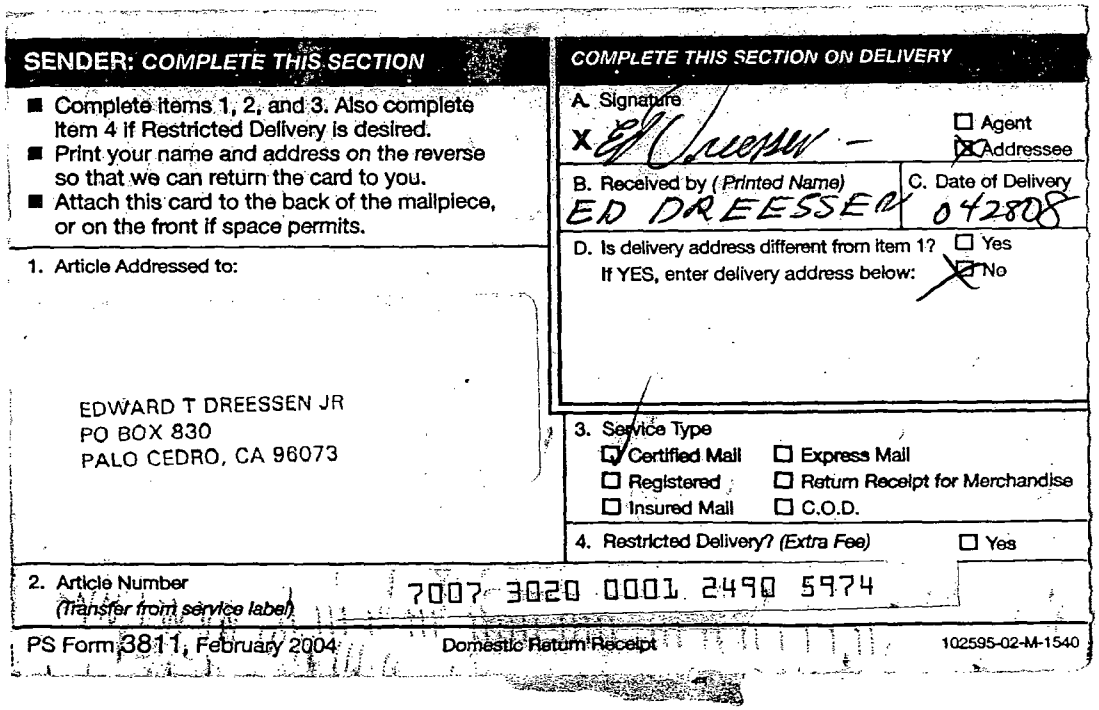
FREEDOM TX 79452
APR 28 2008
USPS

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) 7007 3020 0001 2490 6094

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:

EDWARD T DREESSEN JR
PO BOX 830
PALO CEDRO, CA 96073

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Ed Dreessen ☐ Agent ☒ Addressee

B. Received by (Printed Name) ED DREESSEN
C. Date of Delivery 042808

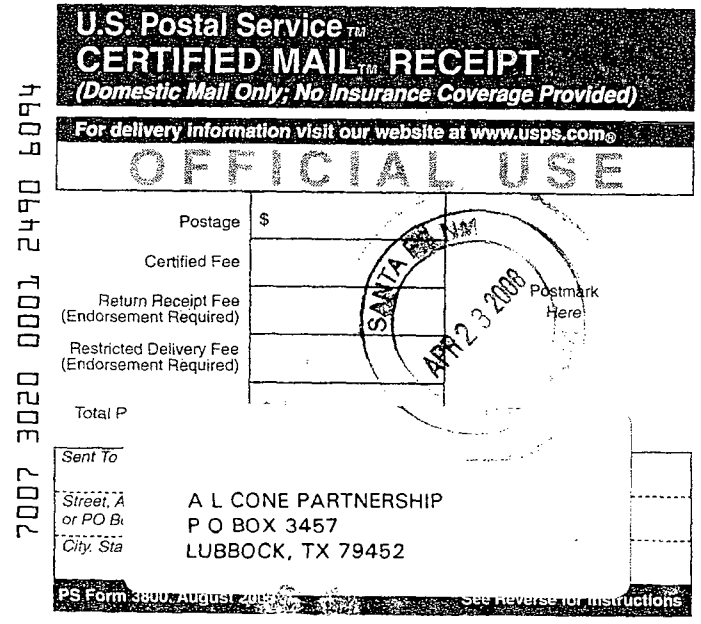
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

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) 7007 3020 0001 2490 5974

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



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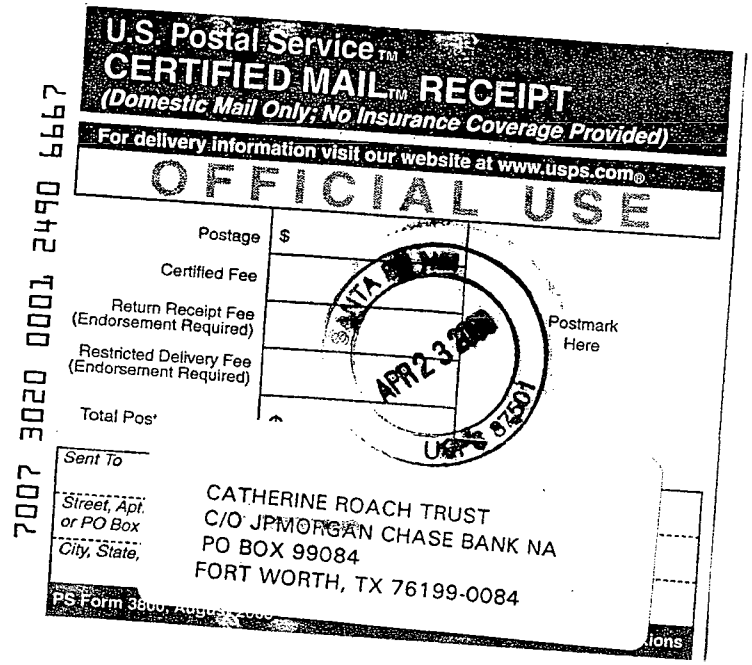
7007 3020 0001 2490 6094

Sent To
Street, A... or PO B...
City, Sta...

A L CONE PARTNERSHIP
P O BOX 3457
LUBBOCK, TX 79452

PS Form ... See Reverse for Instructions



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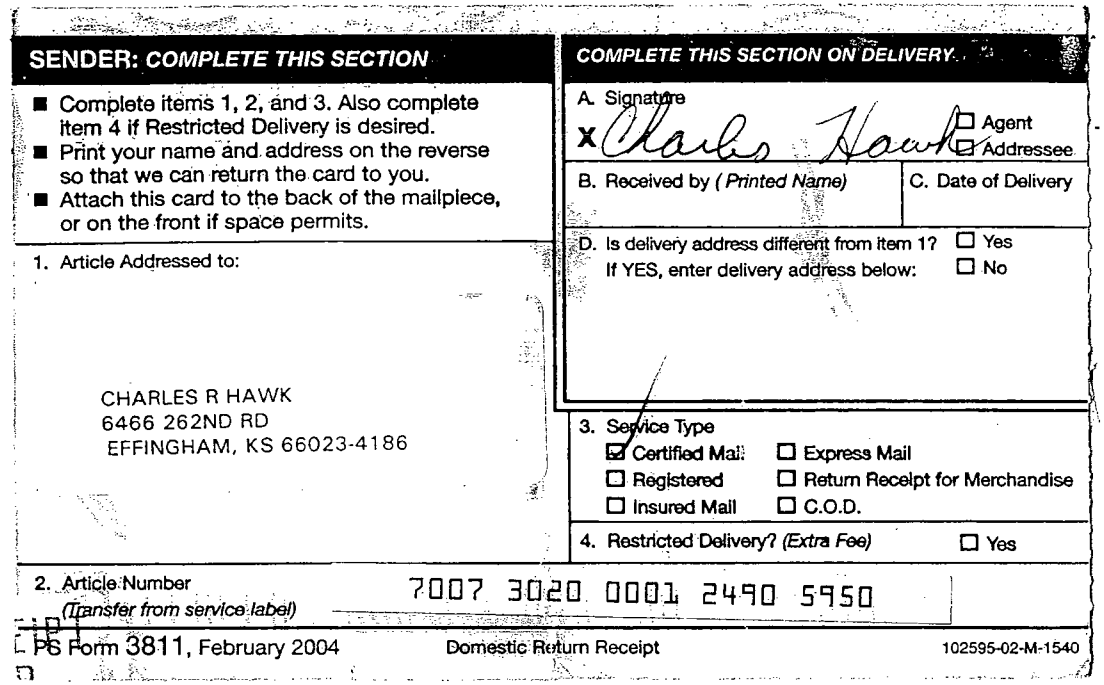
APR 23 2008
USPS 87501

7007 3020 0001 2490 6667

Sent To
Street, Apt. or PO Box
City, State,

CATHERINE ROACH TRUST
C/O JPMORGAN CHASE BANK NA
PO BOX 99084
FORT WORTH, TX 76199-0084

PS Form 3800 ... ions



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:

CHARLES R HAWK
6466 262ND RD
EFFINGHAM, KS 66023-4186

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Charles Hawk ☐ Agent ☐ Addressee

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

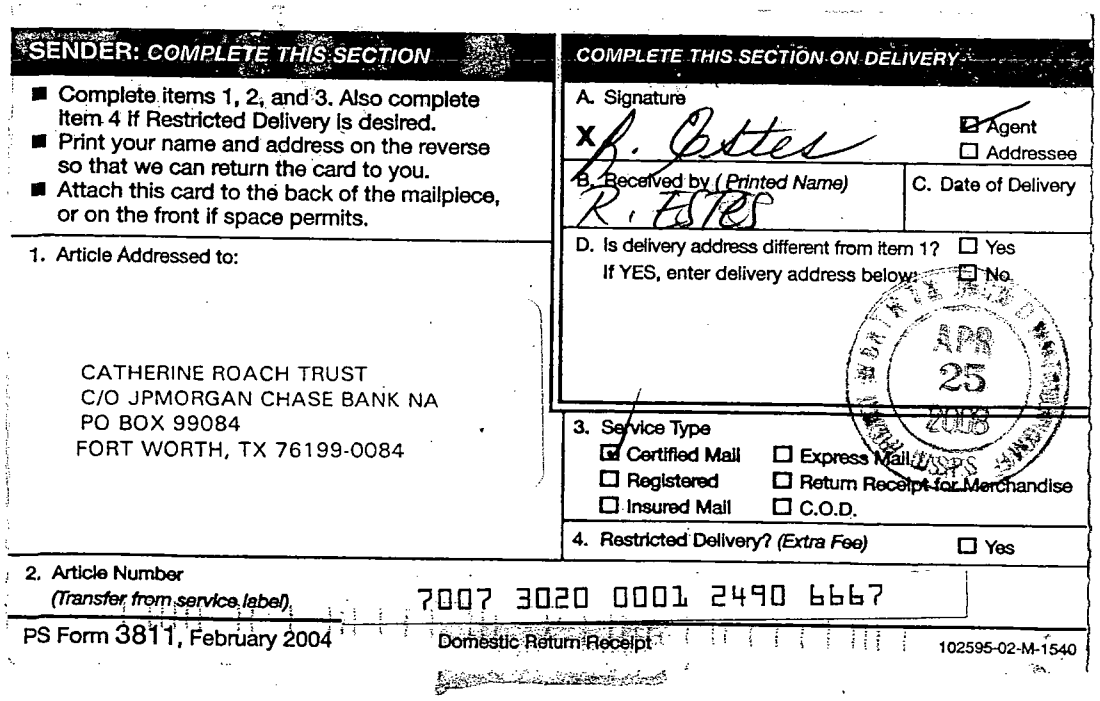
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ 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) 7007 3020 0001 2490 5950

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:

CATHERINE ROACH TRUST
C/O JPMORGAN CHASE BANK NA
PO BOX 99084
FORT WORTH, TX 76199-0084

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X R. Estes ☑ Agent ☐ Addressee

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

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

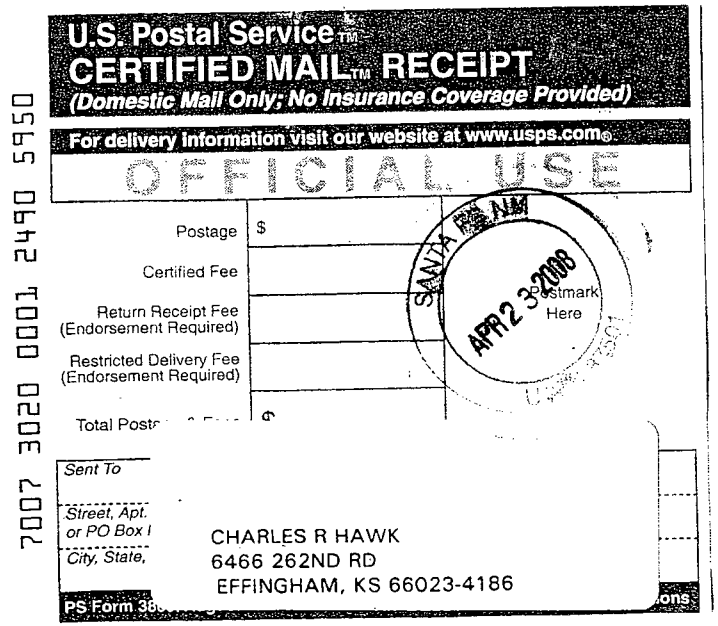
APR 25 2008

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) 7007 3020 0001 2490 6667

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



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APR 23 2008

7007 3020 0001 2490 5950

Sent To
Street, Apt. or PO Box
City, State,

CHARLES R HAWK
6466 262ND RD
EFFINGHAM, KS 66023-4186

PS Form 38... ...ons

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	¢

SANTA FE NM APR 23 2008 Postmark Here USPS 87501

Sent To
Street, Apt. or PO Box
City, State

TOM CONE CHILDRENS TRUST UW OF
KATHLEEN CONE
C/O BANK OF OKLA SUCC TRUSTEE
PO BOX 1588
TULSA, OK 74101-1588

PS Form ... Instructions

7007 3020 0001 2490 6520

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:

THE TOLES COMPANY
P O BOX 1300
ROSWELL, NM 88202-1300

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X R. Mylene Chance ☐ Agent ☑ Addressee

B. Received by (Printed Name) R. Mylene Chance C. Date of Delivery 4-25-08

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) 7007 3020 0001 2490 6421

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:

TOM CONE CHILDRENS TRUST UW OF
KATHLEEN CONE
C/O BANK OF OKLA SUCC TRUSTEE
PO BOX 1588
TULSA, OK 74101-1588

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Dan L. ☐ Agent ☐ Addressee

B. Received by (Printed Name) DAN L. C. Date of Delivery APR 25 2008

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

TULSA OK USPS

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) 7007 3020 0001 8480 6520

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

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Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	¢

SANTA FE NM APR 23 2008 Postmark Here USPS 87501

Sent To
Street, Apt. or PO Box
City, State

THE TOLES COMPANY
P O BOX 1300
ROSWELL, NM 88202-1300

PS Form ... Instructions

7007 3020 0001 2490 6421

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

SANTA FE NM 87501 APR 2008 Postmark Here USPS

Sent To
Street, Apt. or PO Box
City, State

JUNE D SPEIGHT
C/O F J DANGLADE PROPERTIES
PO DRAWER 1687
LOVINGTON, NM 88260-1687

PS Form ... Instructions

7007 3020 0001 2490 6261

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:

TEXAS TECHNOLOGICAL UNIVERSITY
P O BOX 45025
LUBBOCK, TX 79409-5025

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Jessica Donahue
C. Date of Delivery 4-25-08

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

APR 25 2008 TECH MAIL LUBBOCK TX

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) 7007 3020 0001 2490 6414

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:

JUNE D SPEIGHT
C/O F J DANGLADE PROPERTIES
PO DRAWER 1687
LOVINGTON, NM 88260-1687

APR 23 2008

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [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 ☐ 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) 7007 3020 0001 2490 6261

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

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Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

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Sent To
Street, Apt. or PO Box
City, State

TEXAS TECHNOLOGICAL UNIVERSITY
P O BOX 45025
LUBBOCK, TX 79409-5025

PS Form ... Instructions

7007 3020 0001 2490 6414

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Certified Fee	
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Restricted Delivery Fee (Endorsement Required)	
Total P	

SANTA FE NM 87501 APR [illegible]03 Postmark Here USPS

Sent To
DANIEL W CODER
Street, Apt. or PO Box
24920 E. Roxbury Place
City, State
Aurora, CO 80016 [redacted]

PS Form [illegible], August [illegible] [illegible]uctions

7007 3020 0001 2490 6599

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:

BARBARA STOCK
18742 WOOD GLEN LN
HOUSTON, TX 77084

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Barbara Stock ☐ Agent ☐ Addressee

B. Received by (Printed Name) Barbara Stock C. Date of Delivery 4/24/08

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)* 7007 3020 0001 2490 6575

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:

DANIEL W CODER
24920 E. Roxbury Place
Aurora, CO 80016 [redacted]

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Mary E Coder ☐ Agent ☐ Addressee

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

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

TOWER AURORA CO APR 25 2008 USPS

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)* 7007 3020 0001 2490 6599

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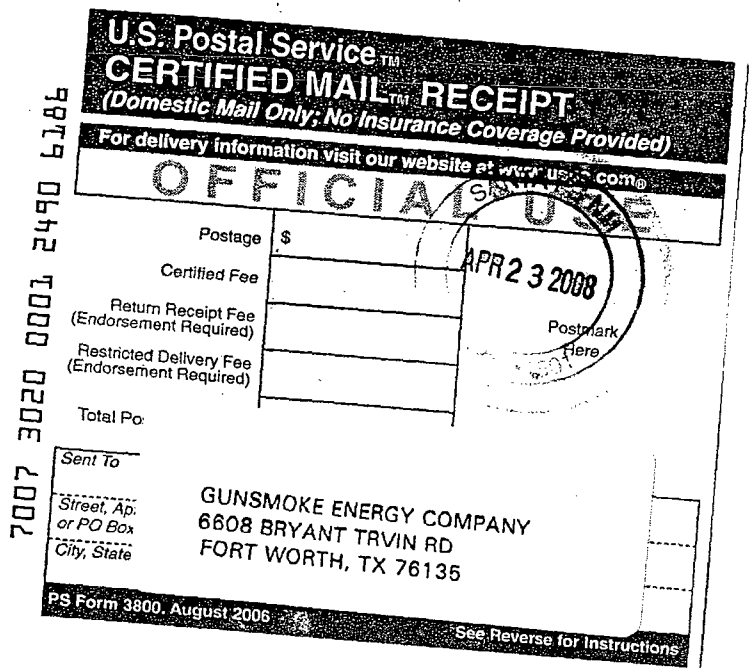
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total P	

SANTA FE NM 87501 Postmark Here USPS

Sent To
BARBARA STOCK
Street, Apt. or PO Box
18742 WOOD GLEN LN
City, State
HOUSTON, TX 77084

PS Form [illegible] [illegible]uctions

7007 3020 0001 2490 6575



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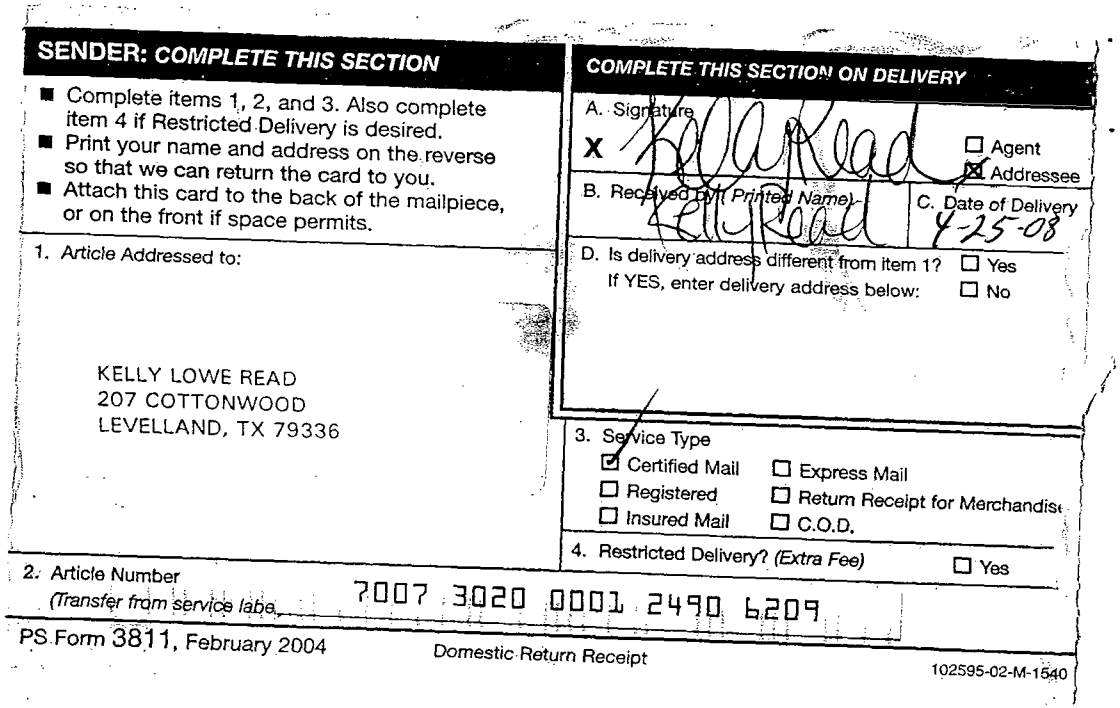
Restricted Delivery Fee (Endorsement Required)
Total Po
APR 23 2008
Postmark Here
Sent To
Street, Ap or PO Box
City, State
GUNSMOKE ENERGY COMPANY
6608 BRYANT TRVIN RD
FORT WORTH, TX 76135
PS Form 3800, August 2006
See Reverse for Instructions
7007 3020 0001 2490 6186



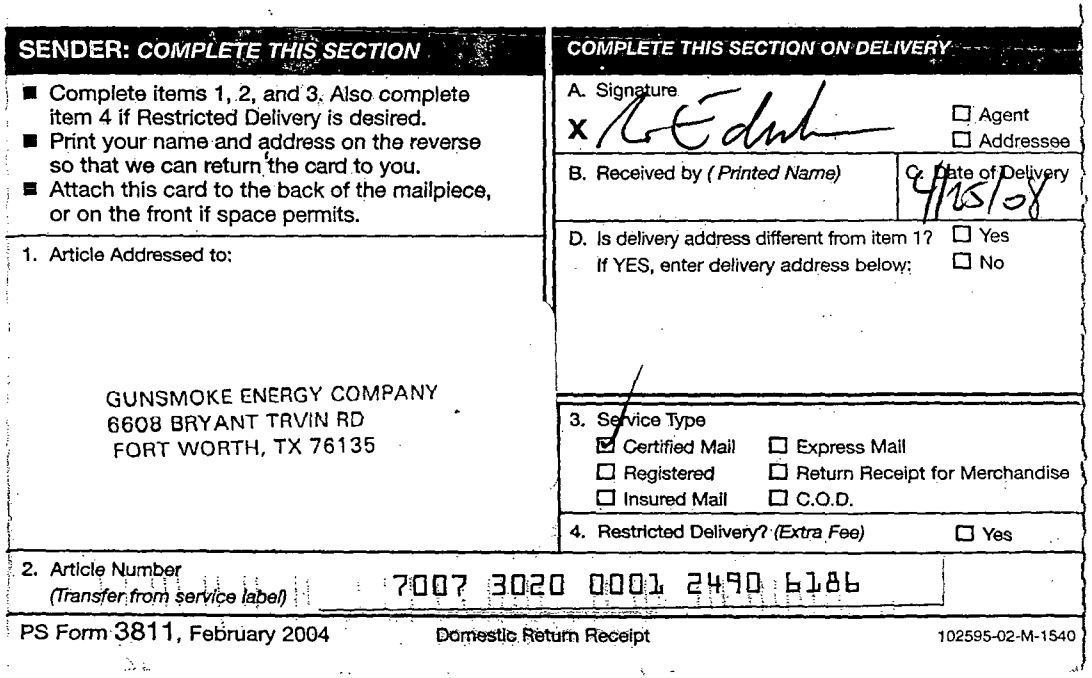
SENDER: COMPLETE THIS SECTION
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
KELLY LOWE READ
207 COTTONWOOD
LEVELLAND, TX 79336

COMPLETE THIS SECTION ON DELIVERY
A. Signature
X Kelly Read
☐ Agent ☒ Addressee
B. Received by (Printed Name) Kelly Read
C. Date of Delivery 4-25-08
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) 7007 3020 0001 2490 6209
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



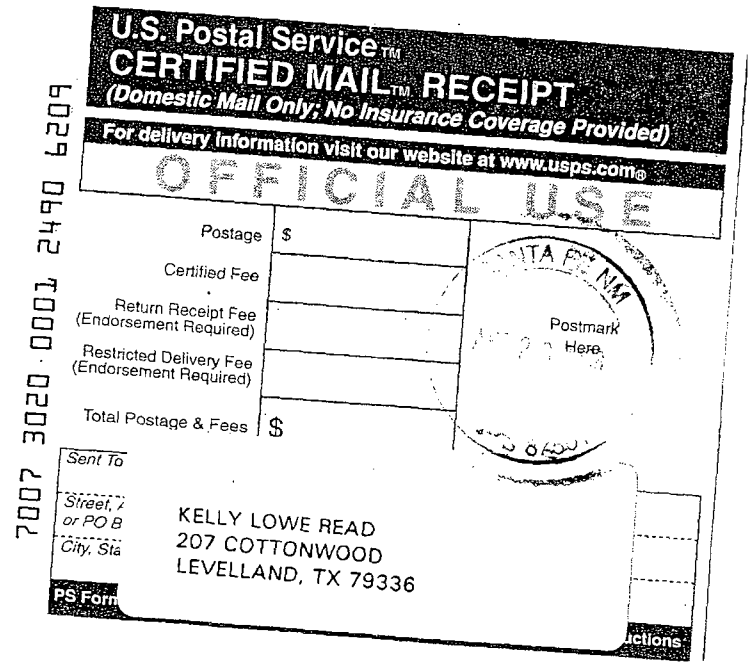
SENDER: COMPLETE THIS SECTION
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
GUNSMOKE ENERGY COMPANY
6608 BRYANT TRVIN RD
FORT WORTH, TX 76135

COMPLETE THIS SECTION ON DELIVERY
A. Signature
X
☐ Agent ☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery 4/15/08
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) 7007 3020 0001 2490 6186
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



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Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $
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Sent To
Street, or PO B
City, Sta
KELLY LOWE READ
207 COTTONWOOD
LEVELLAND, TX 79336
PS Form
7007 3020 0001 2490 6209

7007 3020 0001 2490 6384

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here
APR 23 2008
SANTA FE

Sent To
LORRAINE S BLACK TRUST
B ROBERT K BLACK TRUSTEE
Street, Apt. No., or PO Box No.: 6608 N WESTERN #262
City, State, ZIP+4: OKLAHOMA CITY, OK 73116

PS Form 3800, August 2006 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:

KAY LOWE ATCHESON
3513 105 TH ST
LUBBOCK, TX 79423

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Kay Atcheson ☐ Agent ☐ Addressee

B. Received by (Printed Name): K. Atcheson
C. Date of Delivery: 4/25/08

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)* 7007 3020 0001 2490 6100

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:

LORRAINE S BLACK TRUST
B ROBERT K BLACK TRUSTEE
6608 N WESTERN #262
OKLAHOMA CITY, OK 73116

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☑ Agent ☐ Addressee

B. Received by (Printed Name): M HEITZ
C. Date of Delivery: 4-25-08

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

BRITTON STA. OKLAHOMA CITY, OK 73112
APR 25 2008

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)* 7007 3020 0001 2490 6384

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

7007 3020 0001 2490 6100

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Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here
APR 23 2008

Sent To
KAY LOWE ATCHESON
Street, Apt. No., or PO Box No.: 3513 105 TH ST
City, State, ZIP+4: LUBBOCK, TX 79423

PS Form 3800, August 2006 See Reverse for Instructions

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

SANTA FE, NM — APR 23 2008 — Postmark Here — USPS 87501

Sent To
Street, Apt. or PO Box
City, State

ELLIOTT INDUSTRIES
PO BOX 3300
ROSWELL, NM 88202

PS Form [illegible] — [illegible]ctions

7007 3020 0001 2490 6070

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:

) UNIT – RI & ORRI OWNERS LIST – RA

BOYS & GIRLS CLUBS OF AMERICA
SVP FINANCIAL SERVICES
1275 PEACHTREE ST NE
ATLANTA, GA 30309-3506

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X A Wade ☐ Agent ☐ Addressee

B. Received by (Printed Name) A Wade — C. Date of Delivery 4-25-08

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) 7007 3020 0001 2490 6049

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:

ELLIOTT INDUSTRIES
PO BOX 3300
ROSWELL, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Cathey Henderson ☐ Agent ☐ Addressee

B. Received by (Printed Name) CATHEY HENDERSON — C. Date of Delivery 4-25-08

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) 7007 3020 0001 2490 6070

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

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

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Total UNIT – RI & ORRI OWNERS LIST – RAT

Sent To
Street, Apt. or PO Box
City, State

BOYS & GIRLS CLUBS OF AMERICA
SVP FINANCIAL SERVICES
1275 PEACHTREE ST NE
ATLANTA, GA 30309-3506

PS Form 3800, August 2006 See Reverse for Instructions

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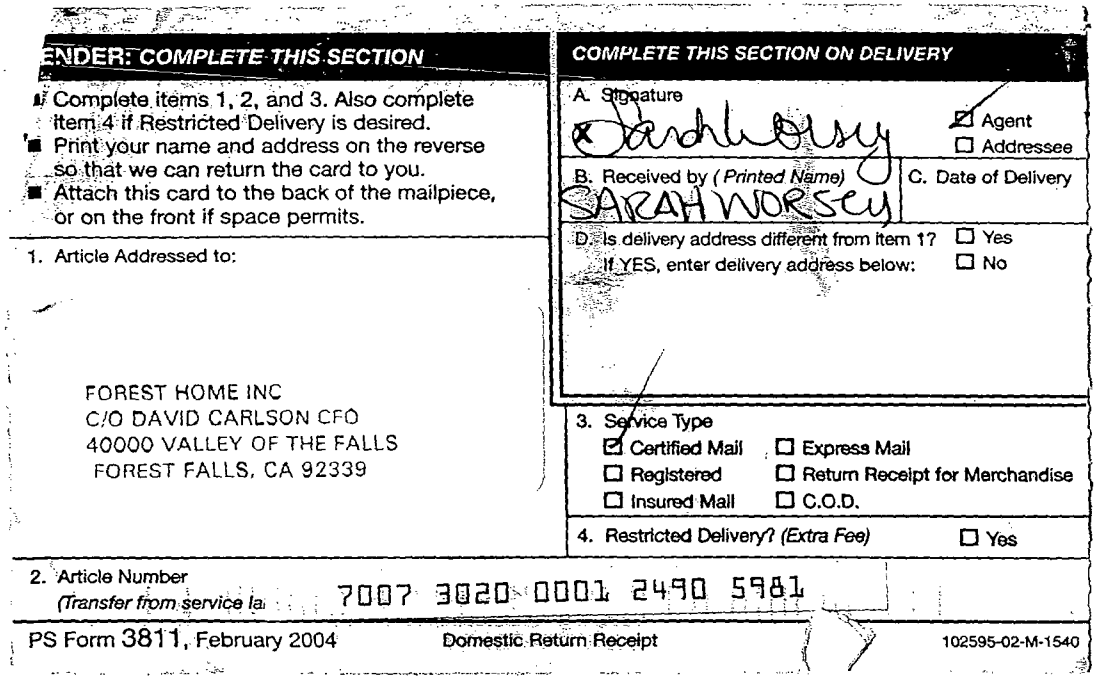
Postmark Here
Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4
NEW MEXICO BOYS & GIRLS RANCHES INC
6209 HENDRIX NE
ALBUQUERQUE, NM 87110
PS Form 3800, August 2006 See Reverse for Instructions
7007 3020 0001 2490 6018

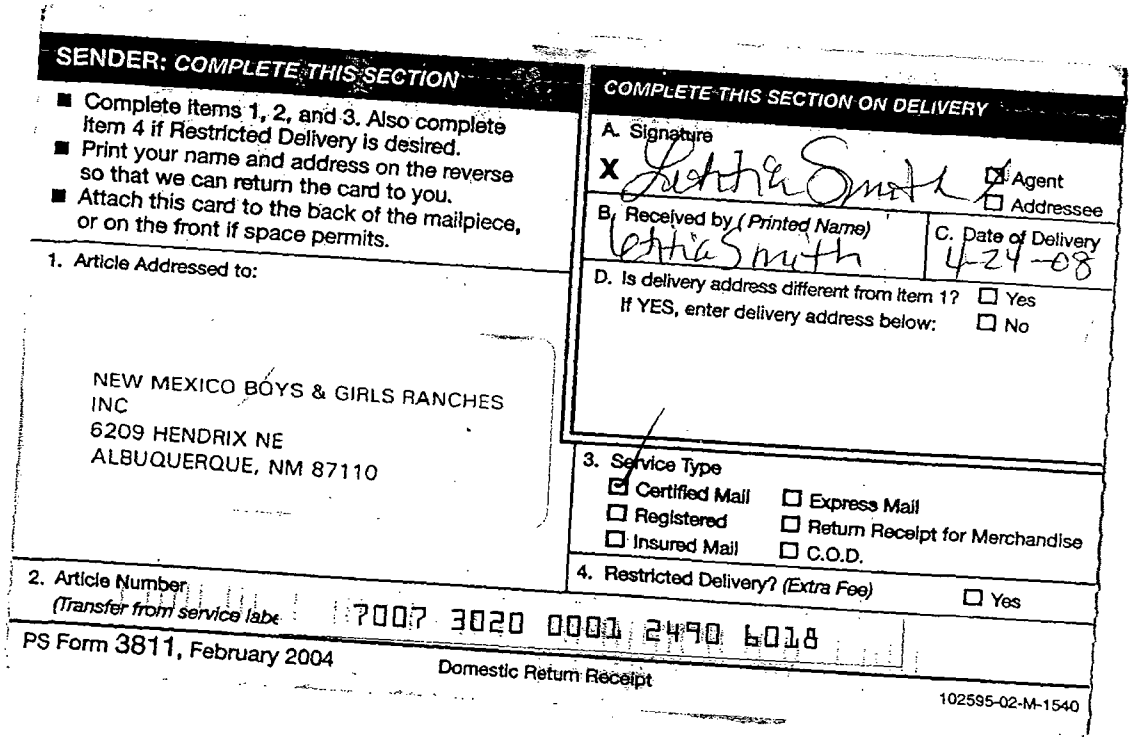

SENDER: COMPLETE THIS SECTION
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
FOREST HOME INC
C/O DAVID CARLSON CFO
40000 VALLEY OF THE FALLS
FOREST FALLS, CA 92339

COMPLETE THIS SECTION ON DELIVERY
A. Signature
X [signature] ☑ Agent ☐ Addressee
B. Received by (Printed Name) SARAH WORSEY
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 ☐ 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) 7007 3020 0001 2490 5981
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:
NEW MEXICO BOYS & GIRLS RANCHES INC
6209 HENDRIX NE
ALBUQUERQUE, NM 87110

COMPLETE THIS SECTION ON DELIVERY
A. Signature
X [signature] ☑ Agent ☐ Addressee
B. Received by (Printed Name) Letitia Smith
C. Date of Delivery 4-24-08
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) 7007 3020 0001 2490 6018
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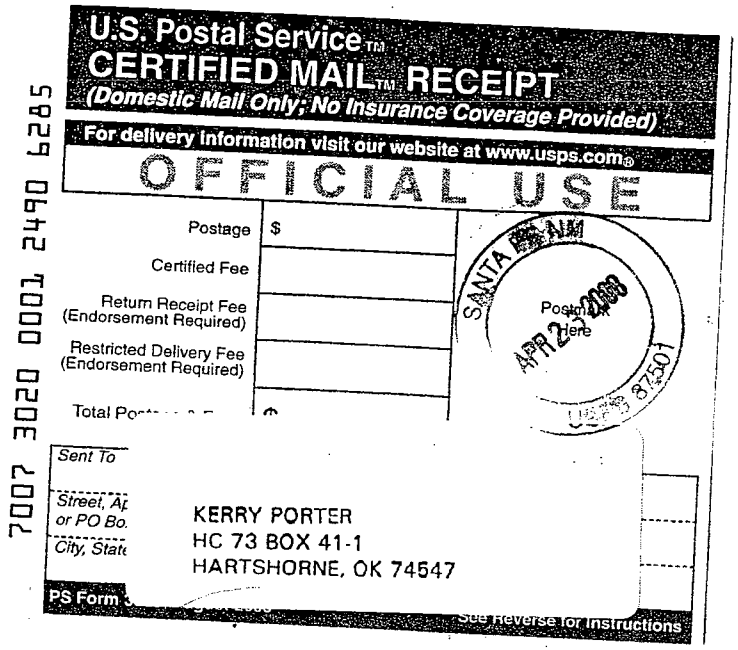
City, State, ZIP+4
FOREST HOME INC
C/O DAVID CARLSON CFO
40000 VALLEY OF THE FALLS
FOREST FALLS, CA 92339
PS Form 3800, August 2006 See Reverse for Instructions
7007 3020 0001 2490 5981



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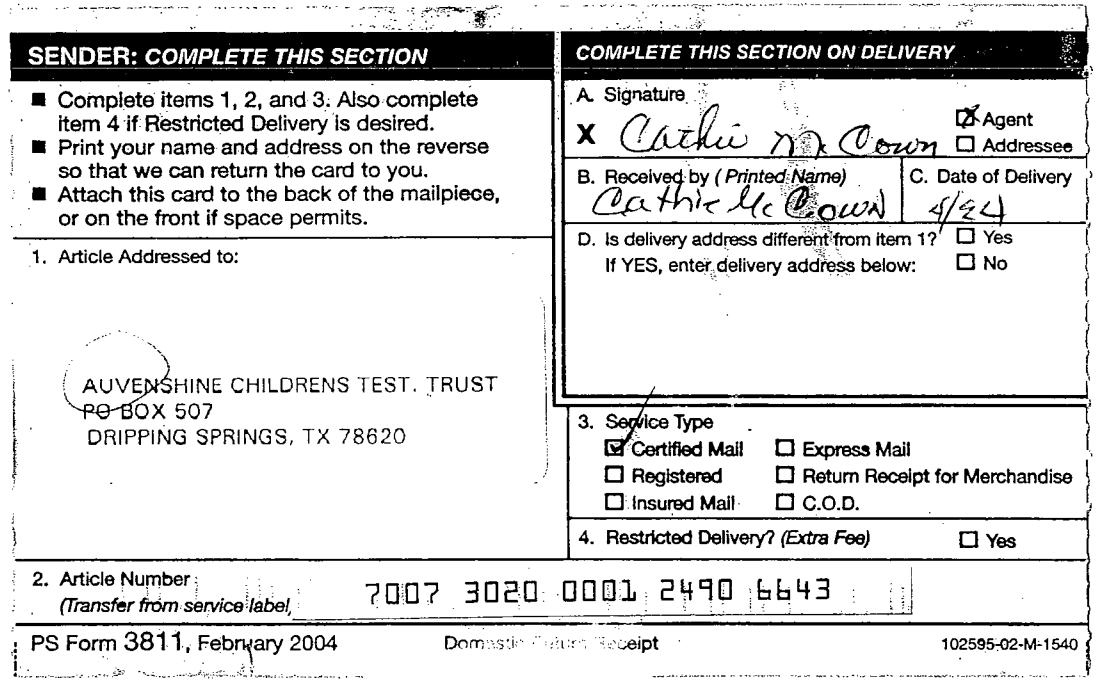
APR 23 2008
87501

7007 3020 0001 2490 6285

Sent To
KERRY PORTER
Street, Apt. or PO Box
HC 73 BOX 41-1
City, State
HARTSHORNE, OK 74547

PS Form ... 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:

AUVENSHINE CHILDRENS TEST. TRUST
PO BOX 507
DRIPPING SPRINGS, TX 78620

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Cathie McBrown ☒ Agent ☐ Addressee

B. Received by (Printed Name) Cathie McBrown
C. Date of Delivery 4/24

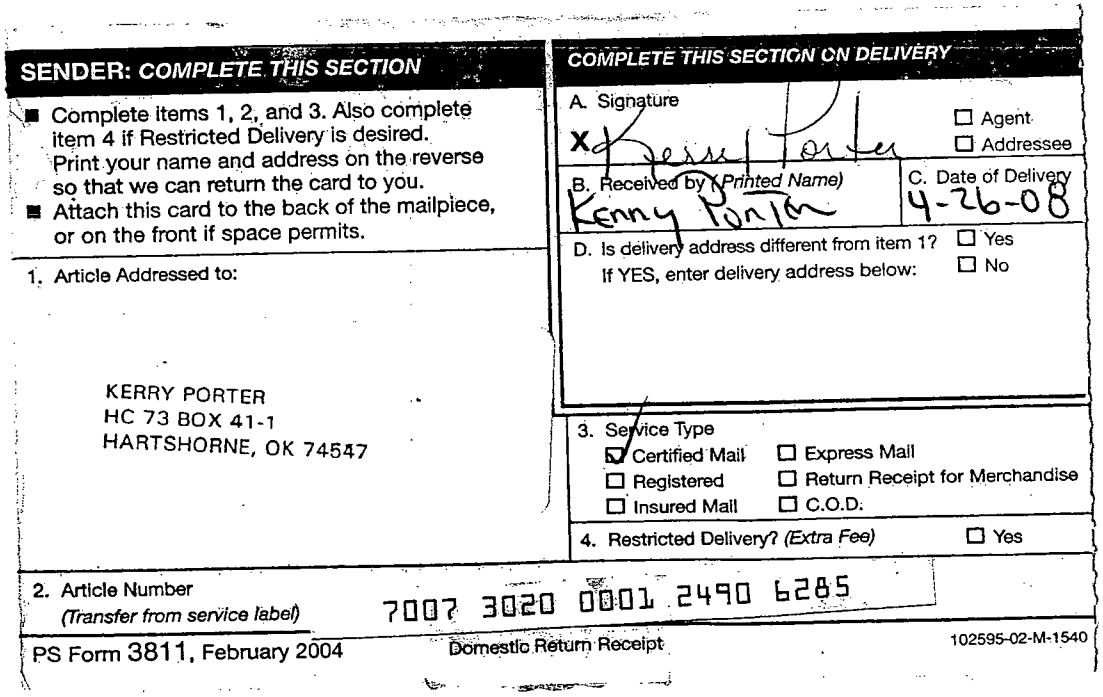
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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) 7007 3020 0001 2490 6643

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:

KERRY PORTER
HC 73 BOX 41-1
HARTSHORNE, OK 74547

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Kerry Porter ☐ Agent ☐ Addressee

B. Received by (Printed Name) Kerry Porter
C. Date of Delivery 4-26-08

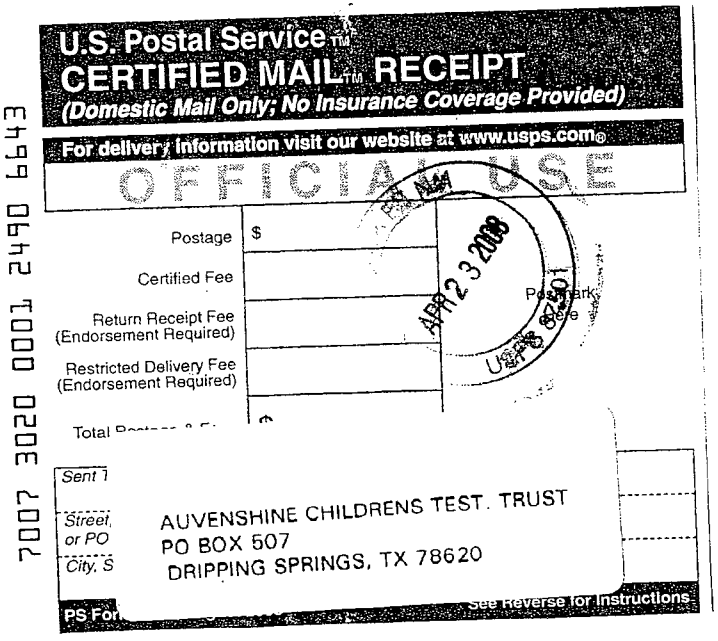
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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) 7007 3020 0001 2490 6285

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



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87501

7007 3020 0001 2490 6643

Sent To
AUVENSHINE CHILDRENS TEST. TRUST
Street, Apt. or PO Box
PO BOX 507
City, State
DRIPPING SPRINGS, TX 78620

PS Form ... See Reverse for Instructions

7007 3020 0001 2490 5080

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

SANTA FE NM 87501 Postmark Here APR 22 08 USPS

Sent To
Street, Apt. or PO Box
City, State,

UNIVERSITY OF NEW MEXICO REGENTS
C/O DIRECTOR OF REAL ESTATE
1712 LAS LOMAS NE
ALBUQUERQUE, NM 87131

PS Form ... 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:

ICATIONS NOT RETURNED

STANLEY WHITE
3789 CHAPALA
YUMA, AZ 85365

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Stanley White ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4-25-08

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

Stanley White

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) 7007 3020 0001 2490 5073

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:

UNIVERSITY OF NEW MEXICO REGENTS
C/O DIRECTOR OF REAL ESTATE
1712 LAS LOMAS NE
ALBUQUERQUE, NM 87131

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4/23/08

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

APR 28 2008 USPS

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) 7007 3020 0001 2490 5080

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

7007 3020 0001 2490 5073

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Total Post	

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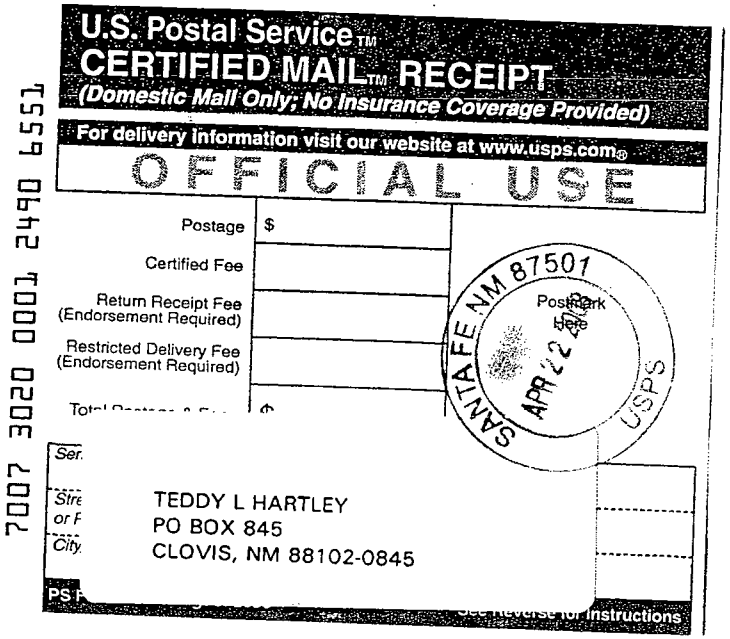
FICATIONS NOT RETURNED

Sent To
Street, Apt. or PO Box
City, State,

STANLEY WHITE
3789 CHAPALA
YUMA, AZ 85365

PS Form 3800, August 2006 See Reverse for Instructions



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Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $

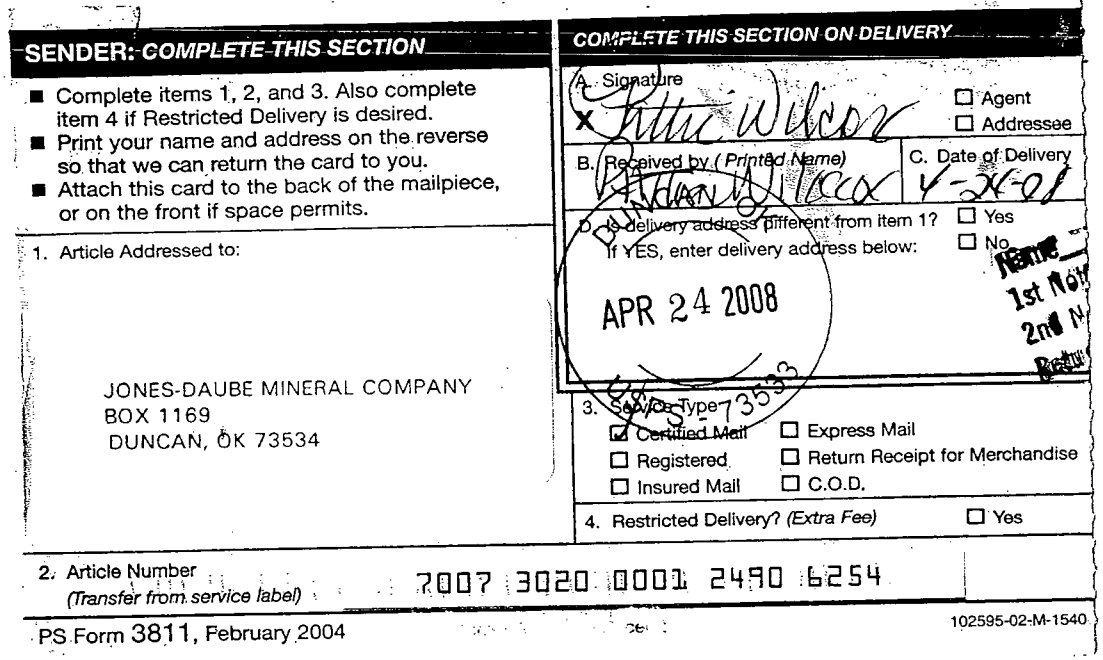
SANTA FE NM 87501
APR 22 2008
Postmark Here
USPS

7007 3020 0001 2490 6551

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

TEDDY L HARTLEY
PO BOX 845
CLOVIS, NM 88102-0845

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:

JONES-DAUBE MINERAL COMPANY
BOX 1169
DUNCAN, OK 73534

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 4-24-08

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

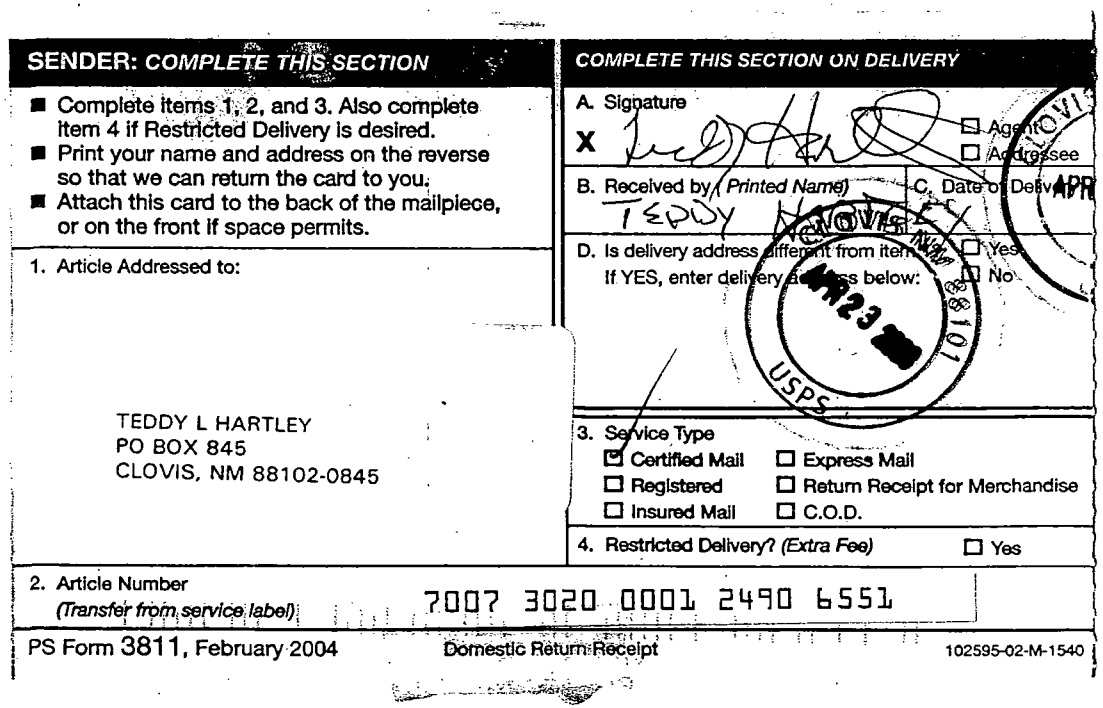
APR 24 2008

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) 7007 3020 0001 2490 6254

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:

TEDDY L HARTLEY
PO BOX 845
CLOVIS, NM 88102-0845

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) TEDDY HARTLEY C. Date of Delivery APR 23

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

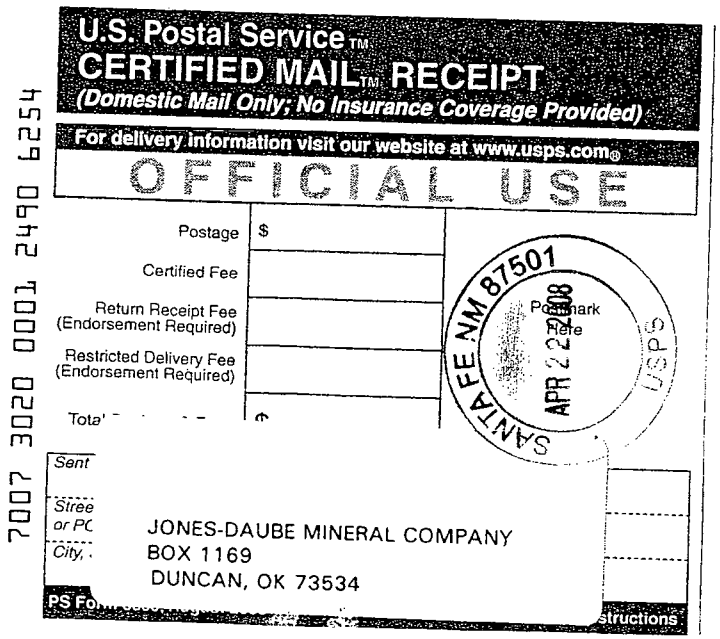
CLOVIS NM 88101 APR 23 USPS

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) 7007 3020 0001 2490 6551

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



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City, State, ZIP+4

JONES-DAUBE MINERAL COMPANY
BOX 1169
DUNCAN, OK 73534

PS Form 3800, June 2002 See Reverse for Instructions

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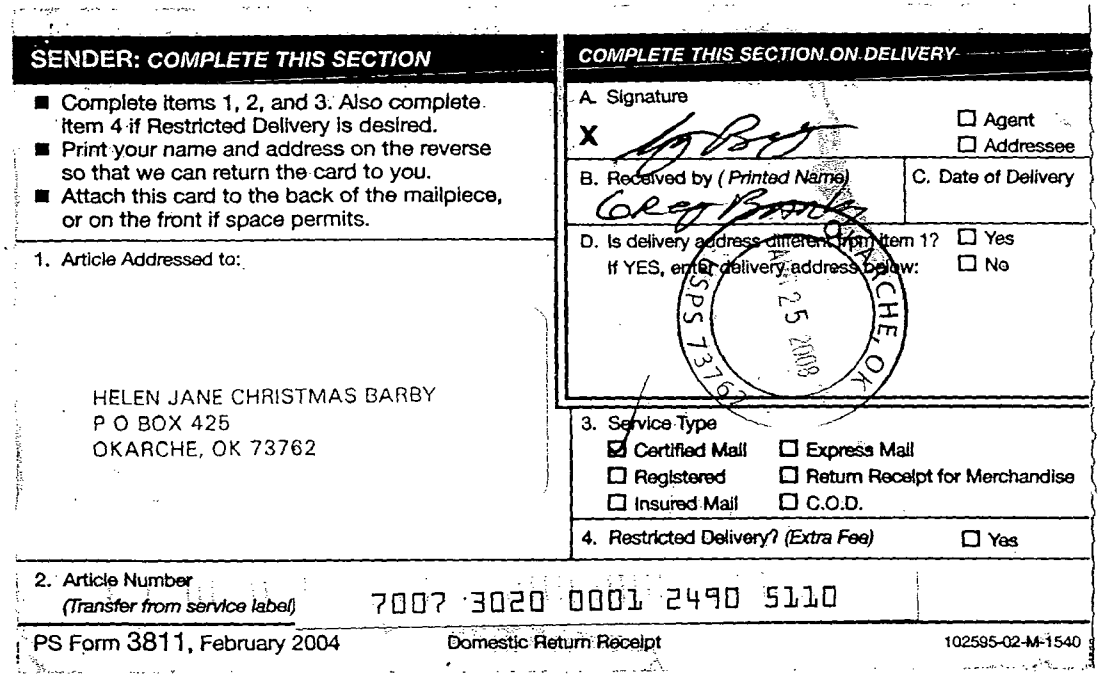
City, State
CATHIE MCCOWN
P O BOX 658
DRIPPING SPRINGS, TX 78620-0658
PS Form
7007 3020 0001 2490 5127

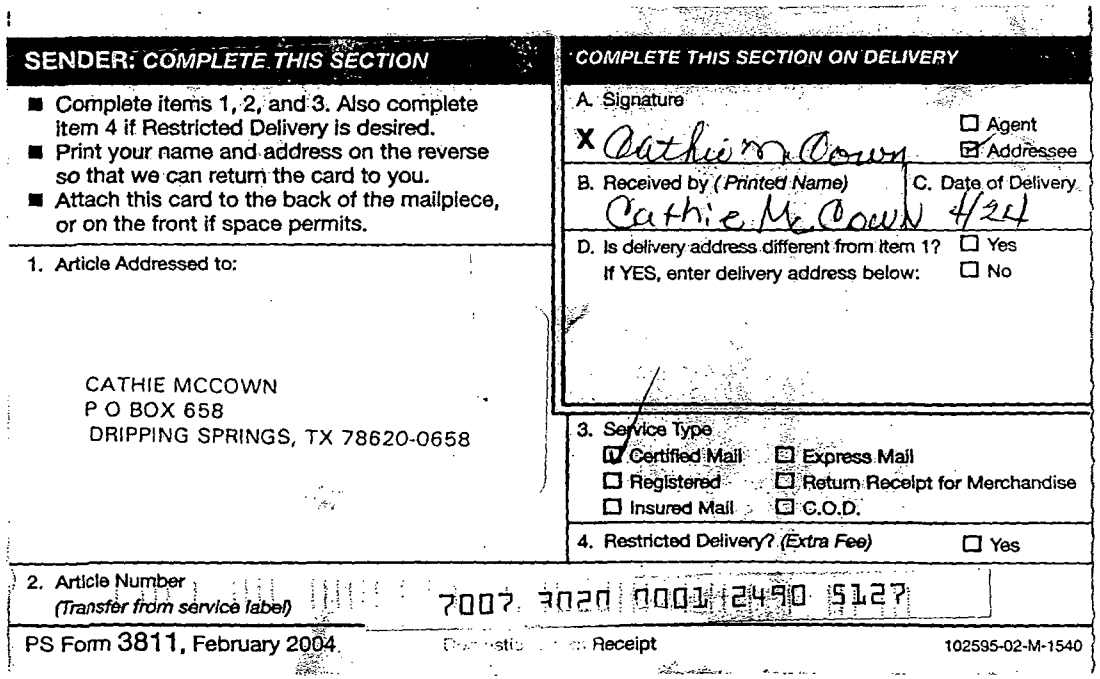


SENDER: COMPLETE THIS SECTION
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
HELEN JANE CHRISTMAS BARBY
P O BOX 425
OKARCHE, OK 73762

COMPLETE THIS SECTION ON DELIVERY
A. Signature
X
☐ Agent
☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
OKARCHE, OK
APR 25 2009
USPS 73762

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) 7007 3020 0001 2490 5110
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

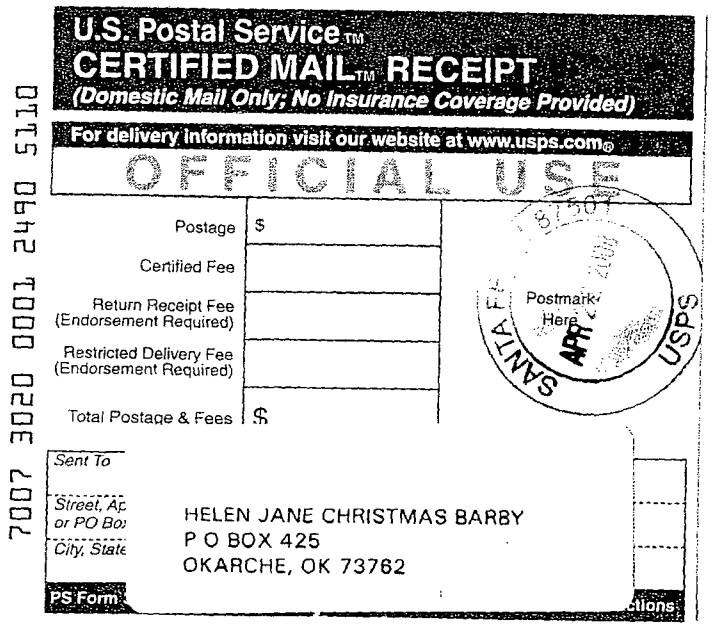


SENDER: COMPLETE THIS SECTION
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
CATHIE MCCOWN
P O BOX 658
DRIPPING SPRINGS, TX 78620-0658

COMPLETE THIS SECTION ON DELIVERY
A. Signature
X Cathie McCown
☐ Agent
☑ Addressee
B. Received by (Printed Name) Cathie McCown
C. Date of Delivery 4/24
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) 7007 3020 0001 2490 5127
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



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USPS
Sent To
Street, Apt. or PO Box
City, State
HELEN JANE CHRISTMAS BARBY
P O BOX 425
OKARCHE, OK 73762
PS Form
7007 3020 0001 2490 5110

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Total	

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USPS

Sent To
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City, State, ZIP+4

DEVON ENERGY PRODUCTION CO LP
PO BOX 843559
DALLAS, TX 75284-3559

PS Form 3800, August 2006 — See Reverse for Instructions

7007 3020 0001 2490 6605

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:

Kenneth G. Cone
P.O. Box 11310
Midland, Texas 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X K Shapiro ☐ Agent ☐ Addressee

B. Received by (Printed Name) Shapiro C. Date of Delivery 4/24/06

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) 7007 3020 0001 2490 5219

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:

DEVON ENERGY PRODUCTION CO LP
PO BOX 843559
DALLAS, TX 75284-3559

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X D. Wright ☐ Agent ☐ Addressee

B. Received by (Printed Name) J. Wright C. Date of Delivery APR 24 2006

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) 7007 3020 0001 2490 6605

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

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

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USPS

Sent To
Street, Apt. No.; or PO Box No. Kenneth G. Cone
P.O. Box 11310
City, State, ZIP+4 Midland, Texas 79702

PS Form 3800, August 2006 — See Reverse for Instructions

7007 3020 0001 2490 5219

7007 3020 0001 2490 6131

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

SANTA FE NM 87501 APR 23 2008 Postmark Here

Sent To
Street, Apt. or PO Box
City, State,

SABINE ROYALTY TRUST
BANK OF AMERICA NA ESCROW AGENT
LBX 840887
DALLAS, TX 75284-0887

PS Form 38 ... ons

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:

UNIT – RI & ORRI OWNERS LIST – RA

SHRINERS HOSPITALS FOR CHILDREN C/O
THE NORTHERN TRUST BK OF TX
PO BOX 226270
DALLAS, TX 75222-6270

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery APR 25 2008

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) 7007 3020 0001 2490 6612

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:

SABINE ROYALTY TRUST
BANK OF AMERICA NA ESCROW AGENT
LBX 840887
DALLAS, TX 75284-0887

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [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 ☐ 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) 7007 3020 0001 2490 6131

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

7007 3020 0001 2490 6612

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Pc	

SANTA FE NM 87501 Postmark Here USPS

UNIT – RI & ORRI OWNERS LIST – RAT

Sent To
Street, Ap
or PO Bo
City, Stat

SHRINERS HOSPITALS FOR CHILDREN C/O
THE NORTHERN TRUST BK OF TX
PO BOX 226270
DALLAS, TX 75222-6270

PS Form ... See Reverse for Instructions

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Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees ¢

APR 23 2008
Postmark Here

7007 3020 0001 2490 6148

ICATIONS NOT RETURNED

Sent To
Street, Apt. or PO Box
City, State

CECILE MARIE DREESSEN
PO BOX 1696
POULSBO, WA 98370

PS Form ... 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:

R Jane Eppes
Box 962
Flippin, AR 72634

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X T Keith Eppes ☐ Agent ☐ Addressee

B. Received by (Printed Name) L KEITH EPPES 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 ☐ 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)

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:

FICATIONS NOT RETURNED

CECILE MARIE DREESSEN
PO BOX 1696
POULSBO, WA 98370

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) CECILE DREES 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 ☐ 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) 7007 3020 0001 2490 6148

PS 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®

OFFICIAL USE

Postage $
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees ¢

APR 23 2008
Postmark Here

7007 3020 0001 2490 6148

Sent To
Street, Apt. or PO Box
City, State

R JANE EPPES
BOX 962
FLIPPIN, AR 72634

PS Form ... Instructions

UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6544**
Status: **Delivered**

Your item was delivered at 4:54 AM on April 25, 2008 in HOUSTON, TX 77079.

Additional Details > Return to USPS.com Home >

Track & Confirm

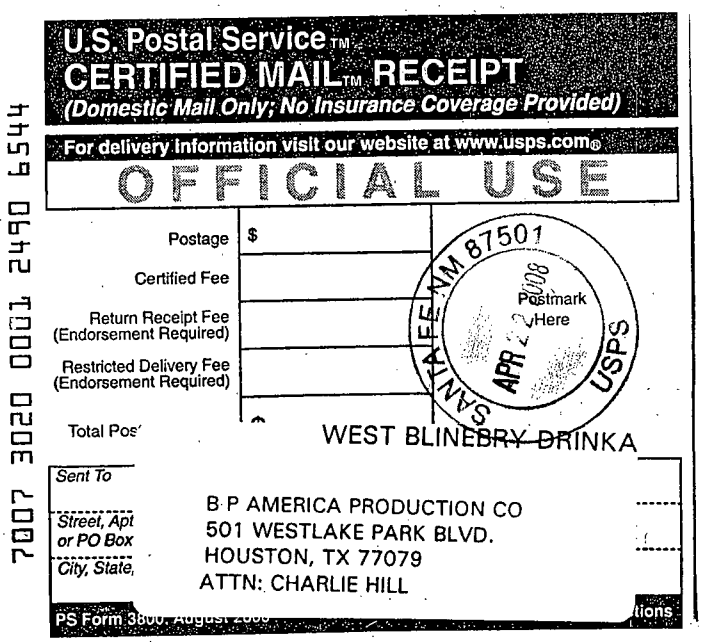
Enter Label/Receipt Number.

Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >



UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6452**
Status: **Delivered**

Your item was delivered at 11:51 AM on May 9, 2008 in BATON ROUGE, LA 70835.

Additional Details > Return to USPS.com Home >

Track & Confirm
Enter Label/Receipt Number.
Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >

7007 3020 0001 2490 6452

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

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

OFFICIAL USE

SANTA FE NM
APR 23 2008
USPS 87506

Postage $
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees ¢

Postmark Here

Sent To
Street, Apt. or PO Box
City, State,

JULIA BENHAM TESTAMENTARY TRST
ALLEN W VILLEMARETTE TRUSTEE
6765 CORPORATE BLVD UNIT 6307
BATON ROUGE, LA 70809

PS Form 38

UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 9545**
Status: **Delivered**

Your item was delivered at 1:07 PM on May 5, 2008 in NEW YORK, NY 10022.

Additional Details > Return to USPS.com Home >

Track & Confirm
Enter Label/Receipt Number.
Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >

7007 3020 0001 2490 9545

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

For delivery information visit our website at www.usps.com®
NEW YORK NY 10022 OFFICIAL USE

Postage	$ $7.00	0500
Certified Fee	$2.65	08
Return Receipt Fee (Endorsement Required)	$2.15	Postmark Here
Restricted Delivery Fee (Endorsement Required)	$0.00	
Total Postage & Fees	$ $11.80	

Sent To
Chosen People Ministries, Inc.
Street, Apt. No.; or PO Box No. 241 E. 51st Street
City, State, ZIP+4 New York. NY 10022

PS Form 3800, August 2006 See Reverse for Instructions

UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6230**
Status: **Acceptance**

Your item was accepted at 12:46 PM on April 23, 2008 in SANTA FE, NM 87501. No further information is available for this item.

Track & Confirm

Enter Label/Receipt Number.

Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >

7007 3020 0001 2490 6230

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

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

OFFICIAL USE

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

SANTA FE, NM
APR 23 2008
Postmark Here
87508

Sent To
Street, Apt. or PO Box
City, State

SALLY RODGERS
152B ARROYO HONDO ROAD
SANTA FE, NM 87508

PS Form ... Instructions

UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6315**
Status: **Notice Left**

We attempted to deliver your item at 1:09 PM on April 28, 2008 in NEWPORT BEACH, CA 92660 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.

Additional Details > Return to USPS.com Home >

Track & Confirm

Enter Label/Receipt Number.

Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >

7007 3020 0001 2490 6315

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

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

OFFICIAL USE

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Tot	

Postmark Here
APR 23 2008
SANTA

Sent
Stre
or P
City,

TEXACAL OIL AND GAS INC
4299 MACARTHUR BLVD 207
NEWPORT BEACH, CA 92660

PS Form 3800, August 2006 See Reverse for Instructions

UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6469**
Status: **Notice Left**

We attempted to deliver your item at 3:02 PM on April 28, 2008 in BOKEELIA, FL 33922 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.

Additional Details > Return to USPS.com Home >

Track & Confirm

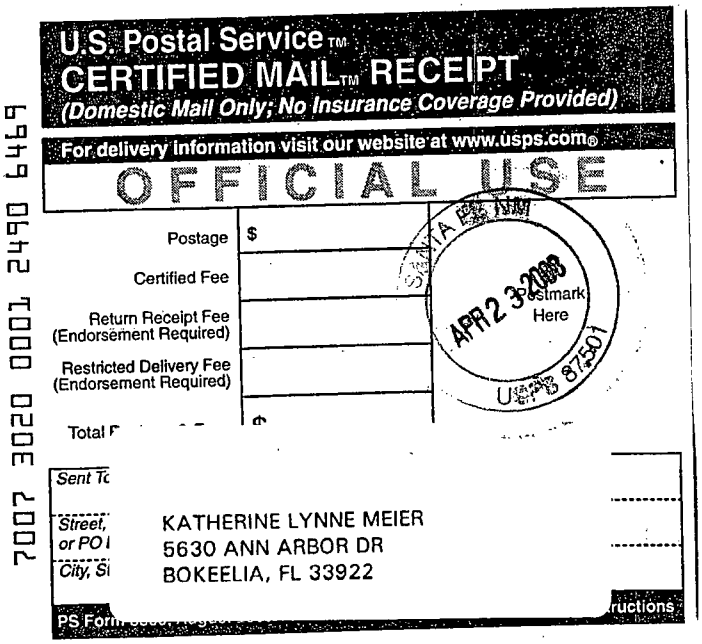
Enter Label/Receipt Number.

Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >



UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 5226**
Status: **Undeliverable as Addressed**

Your item was undeliverable as addressed at 12:47 PM on May 6, 2008 in MCKINNEY, TX 75071. It is being returned if appropriate information is available.

Additional Details > Return to USPS.com Home >

Track & Confirm

Enter Label/Receipt Number.

Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >

7007 3020 0001 2490 5226

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

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

TYLER TX 75701 OFFICIAL USE

Postage	$ $6.20
Certified Fee	$2.65
Return Receipt Fee (Endorsement Required)	$2.15
Restricted Delivery Fee (Endorsement Required)	$0.00
Total Postage & Fees	$ $11.00

05 SANTA FE NM Postmark APR 22 2008 USPS 87501 04/22/2008

Sent To: Myles Lyndon Collins II
Street, Apt. No.; or PO Box No.: 1405 Haverford Street
City, State, ZIP+4: McKinney, Texas 75701

PS Form 3800, August 2006 See Reverse for Instructions

UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6483**
Status: **Notice Left**

We attempted to deliver your item at 5:50 PM on April 25, 2008 in HOUSTON, TX 77056 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. No further information is available for this item.

Additional Details > Return to USPS.com Home >

Track & Confirm

Enter Label/Receipt Number.

Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >

7007 3020 0001 2490 6483

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

OFFICIAL USE

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total P	$

APR 23 2008 Postmark Here

87501

Sent To
Street, or PO B
City, Ste

MARJORIE JEAN NAGLE
5322 JUDALON LANE
HOUSTON, TX 77056-7221

PS Form ... uctions

UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6247**
Status: **Processed**

Your item was processed and left our ALBUQUERQUE, NM 87121 facility on April 22, 2008. No further information is available for this item.

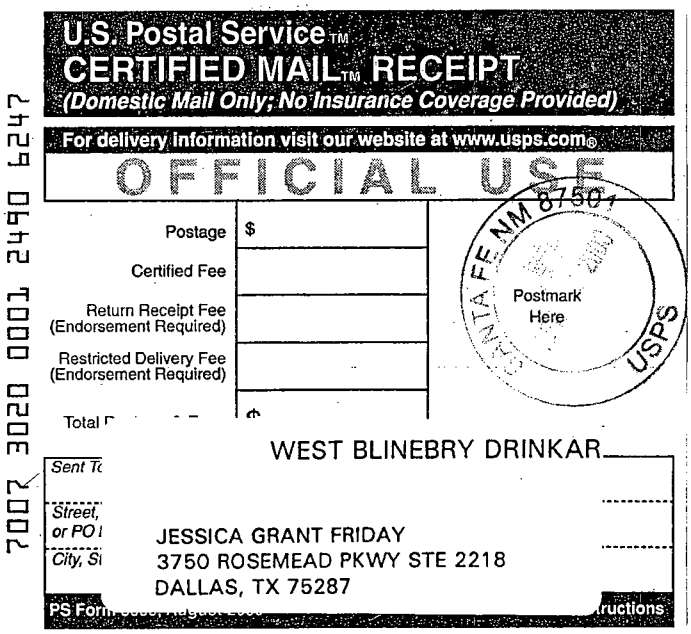
Additional Details > Return to USPS.com Home >

Track & Confirm
Enter Label/Receipt Number.
Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >



UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6568**
Status: **Notice Left**

We attempted to deliver your item at 3:51 PM on April 28, 2008 in DALLAS, TX 75223 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.

Additional Details > Return to USPS.com Home >

Track & Confirm

Enter Label/Receipt Number.

Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >

7007 3020 0001 2490 6568

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

OFFICIAL USE

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

SANTA FE NM 87501 Postmark Here USPS

Sent To
Street, Apt or PO Box
City, State,

ALLISON SONGER
6523 SANTA FE AVENUE
DALLAS, TX 75223

PS Form 3 ... See Reverse for Instructions

UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6223**
Status: **Addressee Unknown**

Your item was returned to the sender on May 9, 2008 because the addressee was not known.

Additional Details > Return to USPS.com Home >

Track & Confirm
Enter Label/Receipt Number.
Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >

7007 3020 0001 2490 6223

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

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

OFFICIAL USE

Postage $
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Pc

APR 23 2008
Postmark Here

Sent To
Street, Ap
or PO Bo
City, Stat

ROBERTA BUCKELEW
2510 W WATER ST
YUMA, AZ 85364

PS Form 3800, August 2006 See Reverse for Instructions

UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6292**
Status: **Acceptance**

Your item was accepted at 12:47 PM on April 23, 2008 in SANTA FE, NM 87501. No further information is available for this item.

Track & Confirm

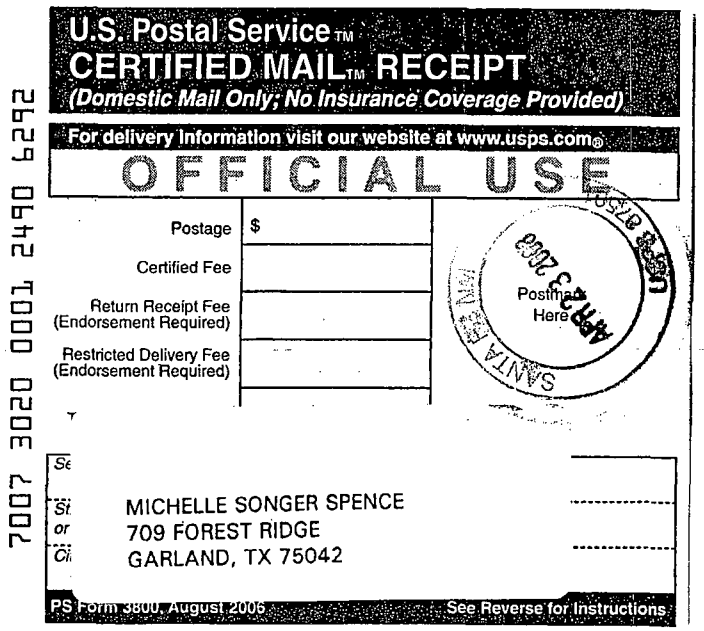
Enter Label/Receipt Number.

Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >



UNITED STATES POSTAL SERVICE

Home | Help | Sign In

Track & Confirm FAQs

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6032**
Status: **Notice Left**

We attempted to deliver your item at 8:05 AM on April 25, 2008 in WOLFFORTH, TX 79382 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. No further information is available for this item.

Additional Details > Return to USPS.com Home >

Track & Confirm

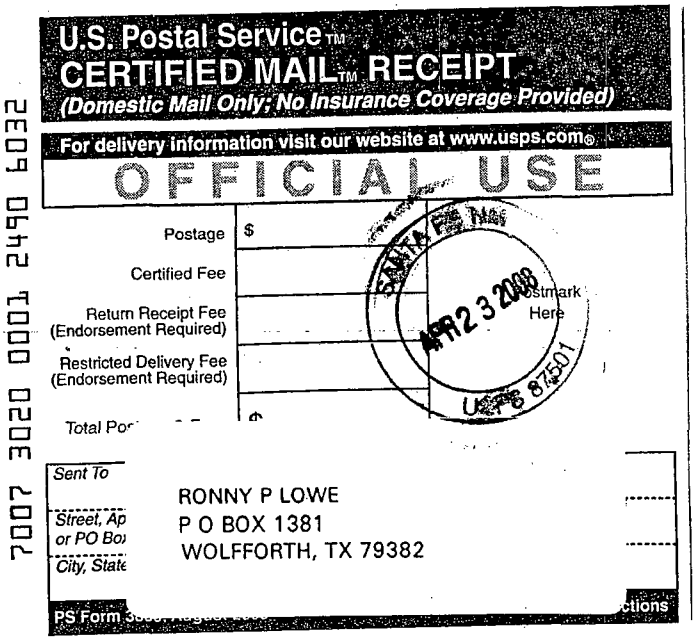
Enter Label/Receipt Number.

Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >



UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6001**
Status: **Notice Left**

We attempted to deliver your item at 3:19 PM on April 25, 2008 in WICHITA, KS 67207 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. No further information is available for this item.

Additional Details > Return to USPS.com Home >

Track & Confirm

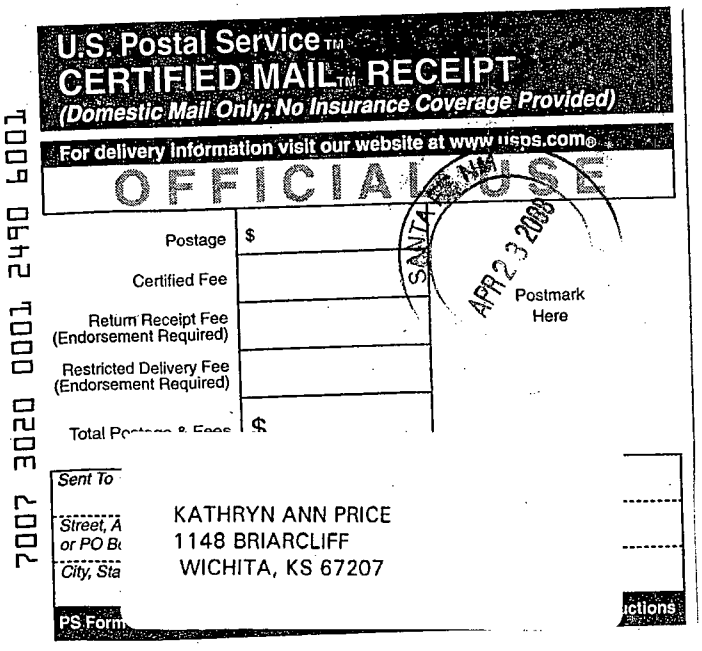
Enter Label/Receipt Number.

Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >



UNITED STATES POSTAL SERVICE®

Track & Confirm

Search Results

Label/Receipt Number: **7007 3020 0001 2490 6476**
Status: **Notice Left**

We attempted to deliver your item at 1:18 PM on April 28, 2008 in MIDLAND, TX 79702 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.

Track & Confirm

Enter Label/Receipt Number.

Go >

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. Go >

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL

7007 3020 0001 2490 6056

UNITED STATES POSTAL SERVICE

0000

TEST LABEL
EAR 21793144
TC 00033470

AMOUNT
$0.00
00022044-19

AIR FORCE ONE

APR 23 2008

OM

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

A C S
- ☐ INSUFFICIENT ADDRESS
- ☐ ATTEMPTED NOT KNOWN
- ☐ NO SUCH NUMBER/ STREET
- ☑ NOT DELIVERABLE AS ADDRESSED - UNABLE TO FORWARD
- ☐ OTHER

RTS
RETURN TO SENDER

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

OFFICIAL USE

Postmark Here
APR 23 2008
SANTA ANA CA

Postage $
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees €

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

CHOSEN PEOPLE MINISTRIES INC
1300 CROSS BEAM DR
CHARLOTTE, NC 28217

PS Form 3800, June 2002 See Reverse for Instructions

9509 0642 7000 0208 2007

7007 3020 0001 2490 6056

PRIORITY MAIL
UNITED STATES POSTAL SERVICE
LABEL 107, JUNE 2000
www.usps.com

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:

CHOSEN PEOPLE MINISTRIES INC
1300 CROSS BEAM DR
CHARLOTTE, NC 28217

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

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

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 la...) 7007 3020 0001 2490 6056

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL

7007 3020 0001 2490 6353

UNITED STATES POSTAL SERVICE

U.S. POSTAGE PAID
SANTA FE, NM
87501
APR 23, '08
AMOUNT
$0.00
00022044-19

FROM

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

To

JOSHUA SONGER
312 FRANKFORD AVENUE #216
LUBBOCK, TX 79416

ST NOTICE
D NOTICE
TURN

PRIOR MAIL
UNITED STATES
LABEL 107, JUNE 2000
www.usps.

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

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

OFFICIAL USE

Postage $
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $

Postmark Here
APR 23 2008
87501

Sent To
JOSHUA SONGER
Street, Apt. No., or PO Box No.
312 FRANKFORD AVENUE #216
City, State, ZIP+4
LUBBOCK, TX 79416

PS Form 3800, August 2006 See Reverse for Instructions

7007 3020 0001 2490 6353

(RETURN)

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:

JOSHUA SONGER
312 FRANKFORD AVENUE #216
LUBBOCK, TX 79416

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

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

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) 7007 3020 0001 2490 6353

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

7007 3020 0001 2490 5103

PRIORITY MAIL
UNITED STATES POSTAL SERVICE®
LABEL 107. JUNE 2000 www.usps.com

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

TO
HELEN R GENTRY
7059 DAWSON RD #96
CINCINNATI, OH 45243-2554

ATTEMPTED, NOT KNOWN
RETURN TO SENDER
RTS

A C S
☐ INSUFFICIENT ADDRESS
☐ ATTEMPTED NOT KNOWN
☐ NO SUCH NUMBER/ STREET
☐ NOT DELIVERABLE AS ADDRESSED - UNABLE TO FORWARD
☐ OTHER

SANTA FE NM 87501 APR 2008 USPS Postmark Here

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

Postage $
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $

Sent To HELEN R GENTRY
Street, Apt. or PO Box 7059 DAWSON RD #96
City, State, CINCINNATI, OH 45243-2554

PS Form 3800, August 2006 See Reverse for Instructions

7007 3020 0001 2490 5103

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:

HELEN R GENTRY
7059 DAWSON RD #96
CINCINNATI, OH 45243-2554

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

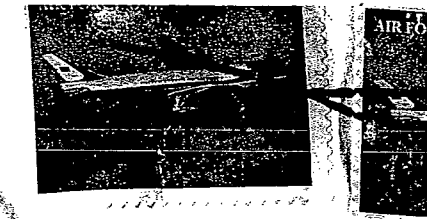
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

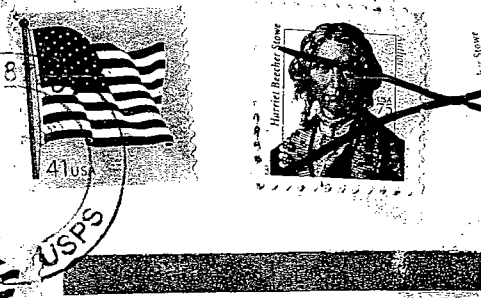
3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7007 3020 0001 2490 5103

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





UNITED STATES POSTAL SERVICE
0000
45243

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL

UNITED STATES POSTAL SERVICE

AMOUNT $0.00

TEST LABEL EAR 21793144 TC 00033470

00022044-19 20855-1943

0000

FROM

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

APR 23 2008

41 USA

APR 23

To

7007 3020 0001 2490 5998

HIEN THI NGO NGUYEN
13109 RUSSET LEAF LN
SAN DIEGO, CA 92129

1ST NOTICE 5-8
2ND NOTICE
RETURN

PRIORITY MAIL
UNITED STATES POSTAL SERVICE
LABEL 107, JUNE 2000
www.usps.com

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

OFFICIAL USE

Postage $
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Pr...

Postmark Here
APR 23 2008
92501

Sent To
Street, A... or PO Bo...
City, Stat...

PS Form ...

See Reverse for Instructions

HIEN THI NGO NGUYEN
13109 RUSSET LEAF LN
SAN DIEGO, CA 92129

7007 3020 0001 2490 5998

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:

HIEN THI NGO NGUYEN
13109 RUSSET LEAF LN
SAN DIEGO, CA 92129

COMPLETE SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

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

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) 7007 3020 0001 2490 5998

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

7007 3020 0001 2490 6490

UNITED STATES POSTAL SERVICE

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77401

U.S. POSTAGE
PAID
SANTA FE, NM
87501
APR 23, 08
AMOUNT
$0.00
00022044-19

PRIORITY MAIL
UNITED STATES POSTAL SERVICE
www.usps.com
LABEL 107, JUNE 2000

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

TO
RALPH J PRESTON
6201 NEWCASTLE DR
BELLAIRE, TX 77401-3813

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED, UNABLE TO FORWARD

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

OFFICIAL USE

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	$

Postmark Here
SANTA FE NM APR 2 3 2008 87501

Sent To: RALPH J PRESTON
Street, Apt. No.; or PO Box No.: 6201 NEWCASTLE DR
City, State, ZIP+4: BELLAIRE, TX 77401-3813

PS Form 3800, August 2006 — See Reverse for Instructions

7007 3020 0001 2490 6490

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:

RALPH J PRESTON
6201 NEWCASTLE DR
BELLAIRE, TX 77401-3813

RETURNED TO SENDER
NOT DELIVERABLE AS ADDRESSED, UNABLE TO FORWARD

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

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

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

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) 7007 3020 0001 2490 6490

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