

PAUL BACA PROFESSIONAL COURT REPORTERS

OIL CONSERVATION DIVISION

Case #: 14245

EXHIBIT

5

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF RSC RESOURCES LIMITED
PARTNERSHIP FOR APPROVAL OF A NON-
STANDARD OIL SPACING AND PRORATION
UNIT AND FOR COMPULSORY POOLING, EDDY
COUNTY, NEW MEXICO.

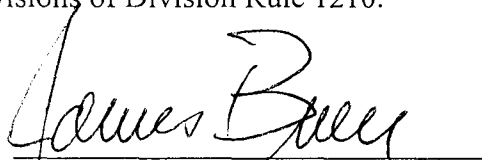
Case No. 14,245

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 RSC Resources Limited Partnership.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the proper interest owners, at their correct address, by certified mail. Copies of the notice letters 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 2nd day of December, 2008 by
James Bruce.

My Commission Expires: 3/14/09


Notary Public

Oil Conservation Division
Case No. 5
Exhibit No. 5

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

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

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

jamesbruce@aol.com

October 21, 2008

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

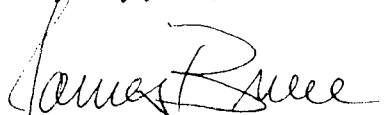
To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by RSC Resources Limited Partnership, regarding the S½S½ of Section 30, Township 16 South, Range 28 East, N.M.P.M., Eddy County, New Mexico. This matter has been scheduled for hearing at 8:15 a.m. on Thursday, November 13, 2008 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well unit, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date.

You are required to notify the Division, and the undersigned, by Thursday, November 6, 2008 if you intend to enter an appearance and participate in the case.

Very truly yours,


James Bruce

Attorney for RSC Resources Limited Partnership

EXHIBIT A

EXHIBIT A

MCB Properties
P.O. Box 2556
Midland, Texas 79702

Lynn Development
Suite 811
306 West Wall
Midland, Texas 79701

Penroc Oil Corporation
P.O. Box 2769
Hobbs, New Mexico 88241

Dallas P. Bauer
P.O. Box 95
La Mesa, New Mexico 88044

Knox Services, Inc.
419 East Arriba Drive
Hobbs, New Mexico 88240-3432

Betty J. Ellsaesser Living Trust
Earl James Fitzgerald, Trustee
2209 Rose Lane
Liberal, Kansas 67901

Betty J. Ellsaesser Living Trust
Roxy Katz, Trustee
27463 Timber Springs Road
Shall, Missouri 65747

Ben J. Dusek
P.O. Box 10982
Midland, Texas 79702

E. Earl Baldrige III
P.O. Box 50716
Midland, Texas 79710

Three Span Oil and Gas, Inc.
P.O. Box 51538
Midland, Texas 79710

WKKA, Ltd.
P.O. Box 10354
Midland, Texas 79702

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:

Three Span Oil and Gas, Inc.
P.O. Box 51538
Midland, Texas 79710

2. Article Number

(Transfer from service label)

7006 2150 0002 3591 3572

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

RSC

COMPLETE THIS SECTION ON DELIVERY

- A. Signature X WKA ☒ Agent ☐ Addressee
- B. Received by (Printed Name) C. GARDNER C. Date of Delivery 10-27
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

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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 Three Span Oil and Gas, Inc.
P.O. Box 51538
Midland, Texas 79710
 City, State, ZIP+4

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:

WKA, Ltd.
P.O. Box 10354
Midland, Texas 79702

2. Article Number

(Transfer from service label)

7006 2150 0002 3591 6054

PS Form 3811, February 2004

RSC

U.S. Postal ServiceTM
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OFFICIAL USE

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

Sent To WKA, Ltd.
P.O. Box 10354
Midland, Texas 79702
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

- A. Signature X ☒ Agent ☐ Addressee
- B. Received by (Printed Name) WKA C. Date of Delivery 10-30-08
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

7006 2150 0002 3591 6054

RSC

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:

Ben J. Dusek
P.O. Box 10982
Midland, Texas 79702

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

2. Article Number
(Transfer from service label) 7006 2150 0002 3591 6139

PS Form 3811, February 2004

Domestic Return Receipt RSC

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Ben Holland* Agent
- B. Received by (Printed Name) *Ben Holland* Addressee
- C. Date of Delivery *11/4/08*
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

**U.S. Postal Service™
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OFFICIAL USE

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

Sent To E. Earl Baldridge III
P.O. Box 50716
Midland, Texas 79710
Street, Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

9479 765E 2000 0512 9002

**U.S. Postal Service™
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Postage \$
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$

Sent To Ben J. Dusek
P.O. Box 10982
Midland, Texas 79702
Street, Apt. No., or PO Box No.
City, State, ZIP+4

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:

E. Earl Baldridge III
P.O. Box 50716
Midland, Texas 79710

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *E. Earl Baldridge III* Agent ☒ Addressee ☐
- B. Received by (Printed Name) *E. Earl Baldridge III* C. Date of Delivery *10/22*
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

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

Article Number 7006 2150 0002 3591 6146
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt RSC

102595-02-M-1540

6779 765E 2000 0512 9002

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:

Betty J. Ellsasser Living Trust
Earl James Fitzgerald, Trustee
2209 Rose Lane
Liberal, Kansas 67901

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) TESS & ITRGERALD NOV 12 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 7006 2150 0002 3591 6115

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

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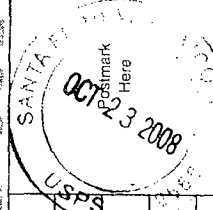
For delivery information visit our website at www.usps.com

OFFICIAL USE

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

Sent To Betty J. Ellsasser Living Trust
Earl James Fitzgerald, Trustee
Street, Apt. No.: 2209 Rose Lane
or PO Box No. Liberal, Kansas 67901
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions



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OFFICIAL USE

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

Sent To Betty J. Ellsasser Living Trust
Roxy Katz, Trustee
Street, Apt. No.: 27463 Timber Springs Road
or PO Box No. Shall, Missouri 65747
City, State, ZIP+4

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:

Betty J. Ellsasser Living Trust
Rox Katz, Trustee
27463 Timber Springs Road
Shall, Missouri 65747

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) JOHN L. KATZ C. Date of Delivery 10/27/08
- 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 7006 2150 0002 3591 6122

PS Form 3811, February 2004 Domestic Return Receipt RSC 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:

James P. Bauer
P.O. Box 95
La Mesa, New Mexico 88044

2. Article Number

(Transfer from service label)

7006 2150 0002 3591 6092

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

RSC

COMPLETE THIS SECTION ON DELIVERY

A. Signature
James P. Bauer

B. Received by (Printed Name)
James P. Bauer

C. Date of Delivery
01/27/04

D. Is delivery address different from item 1? *Yes*
If YES, enter delivery address below:

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

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

Sent to
 Dallas P. Bauer
 P.O. Box 95
 La Mesa, New Mexico 88044

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

PS Form 3800, August 2006 See Reverse for Instructions

2609 165E 2000 0512 9002

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

Sent to
 Knox Services, Inc.
 419 East Arriba Drive
 Hobbs, New Mexico 88240-3432

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

PS Form 3800, August 2006 See Reverse for Instructions

9019 165E 2000 0512 9002

COMPLETE THIS SECTION ON DELIVERY

- 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:

Knox Services, Inc.
419 East Arriba Drive
Hobbs, New Mexico 88240-3432

A. Signature
X SOAS

B. Received by (Printed Name)
SOAS

C. Date of Delivery
10-25-08

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

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

7006 2150 0002 3591 6108

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

RSC

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:

Lynn Development
Suite 811
306 West Wall
Midland, Texas 79701

2. Article Number

(Transfer from service label)

7006 2150 0002 3591 6078

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

RSC

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Lynn Development C. Date of Delivery 10/29
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

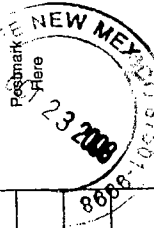
3. Service Type
- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

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



Sent To Penroc Oil Corporation

P.O. Box 2769
Hobbs, New Mexico 88241

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

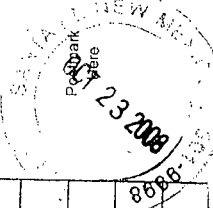
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Postage \$
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$



Sent To

Lynn Development
Suite 811
306 West Wall
Midland, Texas 79701

PS Form 3800, August 2005 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:

Penroc Oil Corporation
P.O. Box 2769
Hobbs, New Mexico 88241

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) HOBBS NM C. Date of Delivery 10/29
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

7006 2150 0002 3591 6085

2. Article Number (Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

RSC

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7909 765E 2000 0572 9002

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



Sent To **MCB Properties**

P.O. Box 2556

Midland, Texas 79702

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

City, State, Zip+4

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:

MCB Properties
P.O. Box 2556
Midland, Texas 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature X <i>[Signature]</i>	☐ Agent ☐ Addressee
B. Received by <i>[Printed Name]</i> P.A. McSwade	C. Date of Delivery 2/23/04
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	

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

Article Number 7006 2150 0002 3591 6061

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-0000

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

November 12, 2008

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by RSC Resources Limited Partnership, regarding the S $\frac{1}{2}$ S $\frac{1}{2}$ of Section 30, Township 16 South, Range 28 East, N.M.P.M., Eddy County, New Mexico. This matter has been scheduled for hearing at 8:15 a.m. on Thursday, December 4, 2008 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well unit, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date.

You are required to notify the Division, and the undersigned, by Wednesday, November 26, 2008 if you intend to enter an appearance and participate in the case.

Very truly yours,


James Bruce

Attorney for RSC Resources Limited Partnership

EXHIBIT A

Anderson Oil Ltd.
Attn : Neal B. Anderson
5005 Woodway Drive, Ste 300
Houston, TX 77056-1784

Mark D. Wilson
4501 Greentree Blvd.
Midland, TX 79707

Byrom Oil Co.
P.O. Box 147
Hobbs, NM 88241

El Paso Exploration & Production LP
1001 Louisiana
Houston, TX 77002
Attn : Kirk Williams

Lawbar Petroleum Inc.
1034 Liberty Park Drive
Austin, TX 78746

EOG Resources, Inc.
Attn : Patrick J. Tower
P.O. Box 2267
Midland, TX 79702-2267

Eagle Oil and Gas, Ltd.
2525 Kell Blvd., Suite 510
Wichita Falls, TX 76308

J. Cleo Thompson and
J. Cleo Thompson, Jr., LP
325 N. Saint Paul, Suite 4300
Dallas, TX 75201

Kaiser-Francis Oil Company
P.O. Box 21468
Tulsa, OK. 74121-1468

Noble Energy, Inc.
100 Glenborough Drive, Suite 100
Houston, TX 77067-3618

Occidental Oil and Gas Corp.
P.O. Box 4294
Houston, TX 77210-4294

Devon Energy Production Company, L.P.
20 North Broadway
Oklahoma City, OK 73102

R.L. Peterson
P.O. Box 8
Douglas, WY 82633

Joan Moore
3602 Cedar Elm Lane
Wichita Falls, TX 76308

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:

Mark D. Wilson
 4501 Greentree Blvd.
 Midland, Tx. 79707

2. Article Number (Transfer from service label) 7008 0500 0001 4522 3476

PS Form 3811, February 2004 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X Mary Lou Wilson
 B. Received by (Printed Name) C. Date of Delivery 11-18
 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 ☐ No

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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

Mark D. Wilson
 4501 Greentree Blvd.
 Midland, Tx. 79707

PS Form 3800, August 2005 See Reverse for Instructions

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

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

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

Anderson Oil Ltd.
 Attn: Neil B. Anderson
 5005 Woodway Drive, Ste 300
 Houston, Tx. 77056-1784

PS Form 3800, August 2005 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:

Anderson Oil Ltd.
 Attn: Neil B. Anderson
 5005 Woodway Drive, Ste 300
 Houston, Tx. 77056-1784

2. Article Number (Transfer from service label) 7008 0500 0001 4522 3490

PS Form 3811, February 2004 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X C. Garachabal
 B. Received by (Printed Name) C. Date of Delivery 11/17/08
 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 ☐ No

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

El Paso Exploration & Production LP
1001 Louisiana
Houston, TX 77002
Attn: Kirk Williams

2. Article Number

(Transfer from service label)

7008 0500 0001 4522 3445

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* 11/19
B. Received by (Printed Name) C. Date of Delivery

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

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OFFICIAL USE

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

Postmark Here

Sent To Byrom Oil Co.
P.O. Box 147
Hobbs, NM 88241
Street, Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

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

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

OFFICIAL USE

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

Postmark Here

Sent To El Paso Exploration & Production LP
1001 Louisiana
Houston, TX 77002
Street, Apt. No., or PO Box No.
City, State, ZIP+4 Attn: Kirk Williams

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:

Byrom Oil Co.
P.O. Box 147
Hobbs, NM 88241

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) C. Date of Delivery
[Signature] 11/19

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7008 0500 0001 4522 3452

Domestic Return Receipt

PS Form 3811, February 2004

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Eagle Oil and Gas, Ltd.
2525 Kell Blvd., Suite 510
Wichita Falls, Tx. 76308

2. Article Number
(Transfer from service label)

7008 0500 0001 4522 3414

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

ASC

U.S. Postal ServiceTM CERTIFIED MAILTM 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

Sent To

Eagle Oil and Gas, Ltd.
2525 Kell Blvd., Suite 510
Wichita Falls, Tx. 76308

PS Form 3800, August 2006 See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Robin Gibson

☒ Agent
☐ Addressee

B. Received by (Printed Name)
Robin Gibson

C. Date of Delivery
1/18/08

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

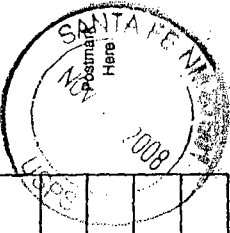
7008 0500 0001 4522 3421

U.S. Postal ServiceTM CERTIFIED MAILTM 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

EOG Resources, Inc.
P.O. Box 2267
Midland, Tx. 79702-2267
Attn: Patrick J. Tower

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:

EOG Resources, Inc.
P.O. Box 2267
Midland, Tx. 79702-2267
Attn: Patrick J. Tower

2. Article Number
(Transfer from service label)

7008 0500 0001 4522 3421

PS Form 3811, February 2004

Domestic Return Receipt

ASC

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
[Signature]
☒ Agent
☐ Addressee

B. Received by (Printed Name)
[Signature]
C. Date of Delivery
1/18/08

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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:

Kaiser-Francis Oil Company
P.O. Box 21468
Tulsa, OK 74121-1468

COMPLETE THIS SECTION ON DELIVERY

- A. Signature X Michael W. Thompson
- B. Received by (Printed Name) Michael W. Thompson
- C. Date of Delivery 01/17/04
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

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

2. Article Number
(Transfer from service label)
7008 0500 0001 4522 3384

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

RSC

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

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

OFFICIAL USE

Postage \$ 7.32

Certified Fee \$ 0.00

Return Receipt Fee (Endorsement Required) \$ 0.00

Restricted Delivery Fee (Endorsement Required) \$ 0.00

Total Postage & Fees \$ 7.32

Sent To Kaiser-Francis Oil Company
Street, Apt. No., P.O. Box 21468
or PO Box No. Tulsa, OK 74121-1468
City, State, ZIP+4

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:

J. Cleo Thompson and
J. Cleo Thompson, Jr., LP
325 N. Saint Paul, Suite 4300
Dallas, TX 75201

COMPLETE THIS SECTION ON DELIVERY

- A. Signature X Michael W. Thompson
- B. Received by (Printed Name) Michael W. Thompson
- C. Date of Delivery 01/17/04
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

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

2. Article Number
(Transfer from service label)
7008 0500 0001 4522 3407

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

RSC

**U.S. Postal ServiceTM
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OFFICIAL USE

Postage \$ 7.32

Certified Fee \$ 0.00

Return Receipt Fee (Endorsement Required) \$ 0.00

Restricted Delivery Fee (Endorsement Required) \$ 0.00

Total Postage & Fees \$ 7.32

Sent To J. Cleo Thompson and
J. Cleo Thompson, Jr., LP
325 N. Saint Paul, Suite 4300
Dallas, TX 75201

PS Form 3800, August 2006

See Reverse for Instructions

7002 8000 0050 0000 4225 2255

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

COULAGE



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

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:

Joan Moore
3602 Cedar Elm Lane
Wichita Falls, TX 76308

COMPLETE THIS SECTION ON DELIVERY

A. Signature John M. N...

B. Received by (Printed Name) JOHN M. N...

C. Date of Delivery 8/2/50

D. Is delivery address different from item below: NO

If YES, enter delivery address: 106 80th St. N.W.

USPS BRIDGE CREEK ALA 36008

3. Service Type

☒ Certified Mail

☐ Registered

☐ Insured Mail

☐ Express Mail

☐ Return Receipt for Merchandise

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number
(Transfer from sec

2004 0500 0007 4522 3532

PS Form 3811, February 2004 Domestic Return Receipt *PSA* 1102855-02 MW 540

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:

Occidental Oil and Gas Corp.
P.O. Box 4294
Houston, Tx. 77104-294

Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7008 0500 0001 4522 3360

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

RSC

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

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POSTAL SERVICE
OFFICIAL USE

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

Sent To

Occidental Oil and Gas Corp.
P.O. Box 4294
Houston, Tx. 77104-294
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

Postmark
Here

COMPLETE THIS SECTION ON DELIVERY

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

Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7008 0500 0001 4522 3360

Domestic Return Receipt

102595-02-M-1540

RSC

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

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

POSTAL SERVICE
OFFICIAL USE

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

Sent To

Occidental Oil and Gas Corp.
P.O. Box 4294
Houston, Tx. 77104-294
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

Postmark
Here

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 Energy, Inc.
100 Glenborough Drive, Suite 100
Houston, Tx. 77067-3618

Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7008 0500 0001 4522 3377

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

RSC

COMPLETE THIS SECTION ON DELIVERY

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

Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7008 0500 0001 4522 3377

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

RSC

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

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

POSTAL SERVICE
OFFICIAL USE

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

Sent To

Noble Energy, Inc.
100 Glenborough Drive, Suite 100
Houston, Tx. 77067-3618
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

Postmark
Here

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.L. Peterson
P.O. Box 8
Douglas, WY 82633

2. Article Number

(Transfer from service label) 7008 0500 0001 4522 3513
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

ASC

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only - 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

Sent To R.L. Peterson
P.O. Box 8
Douglas, WY 82633
Street, Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
X R.L. Peterson
- B. Received by (Printed Name) C. Date of Delivery 11/15/08
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

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(Domestic Mail Only - 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

Sent To Devon Energy Production Company, L.P.
Street, Apt. No. or PO Box No. 20 North Broadway
City, State, ZIP+4 Oklahoma City, OK 73102

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:

Devon Energy Production Company, L.P.
20 North Broadway
Oklahoma City, OK 73102

2. Article Number
(Transfer from service label)
7008 0500 0001 4522 3506
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

ASC

COMPLETE THIS SECTION ON DELIVERY

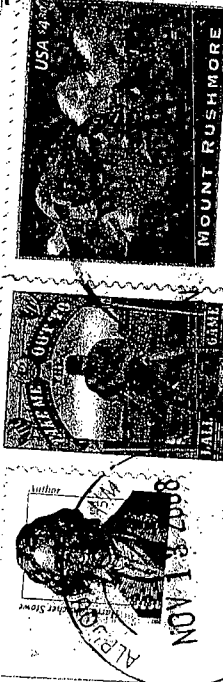
- A. Signature ☒ Agent ☐ Addressee
X S.B.P.
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

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

7008 0500 0001 4522 3438

Lawbar Petroleum Inc.
1034 Liberty Park Drive
Austin, TX 78746



1ST NOTICE
2ND NOTICE
RETURN
11-25
12-11

ANK

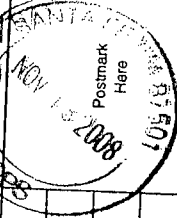
7874638891 0021
8750401052

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
Lawbar Petroleum Inc.
1034 Liberty Park Drive
Austin, TX 78746

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

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4522 3438