



**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](mailto:jamesbruc@aol.com)

July 30, 2009

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Offset operators or working interest owners

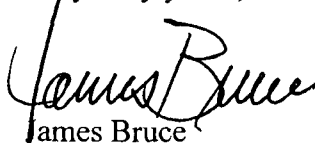
Ladies and gentlemen:

Enclosed is a copy of an application for approval of a pilot secondary recovery project for the Blankenship Lease in the W $\frac{1}{2}$ SW $\frac{1}{4}$  of Section 12, Township 20 South, Range 38 East, N.M.P.M., Lea County, New Mexico, filed with the New Mexico Oil Conservation Division by Apache Corporation.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, August 20, 2009, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an offset operator or owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date.

A party appearing in a Division case is required by Division Rule to file a Pre-Hearing Statement no later than Thursday, August 13, 2009. This statement must be filed with the Division's Santa Fe office at the above address, and with the attorney for Apache Corporation, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing.

Very truly yours,

  
James Bruce

Attorney for Apache Corporation

EXHIBIT

**A**

**TOWNSHIP 20 SOUTH, RANGE 38 EAST**

**OFFSET LESSEES / UNLEASED MINERAL OWNERS:**

**SE/4 NE/4 Section 11:**

**Bovina Limited Liability Company**  
P.O. Box 1772  
Hobbs, NM 88240

Wayne L. Brackin  
291 Imperial Circle  
Cold Springs, TX 77331

Donald J. Cauthen  
909 Pine Ct.  
Midland, TX 79705

Bill J. Hightower  
P.O. Box 3548  
Midland, TX 79702

Jack D. Hightower  
P.O. Box 11227  
Midland, TX 79702

Eugene Hogan  
2803 Frontier Drive  
Midland, TX 79705

J. R. Hurt  
P.O. Box 72  
Odessa, TX 79760

Robert Palmer  
P.O. Box 11341  
Midland, TX 79702

William Vaughn Properties, Ltd.  
2302 Maxwell Drive  
Midland, TX 79705

**NW/4 NW/4 Section 12:**

**Western Commerce Bank, Agent**  
for Kirby B. Schenck Trust  
P.O. Box 1627  
Lovington, NM 88260

Alton C. White, Jr.  
3112 Above Stratford Place  
Austin, TX 78746

Petro Tiger I, Ltd.  
P.O. Box 3166  
Tulsa, OK 74101

Geodyne Nominee Coporation  
C/O Samson Resources  
Two West Second Street  
Tulsa, OK 74103

**NE/4 NW/4 Section 12:**

---

Devon Energy Corporation  
20 N. Broadway, Ste 1500  
Oklahoma City, OK 73102-8260  
Attn: Land Department

NM O & G Ltd.  
PO BOX 10217  
Lubbock, TX 79408

Nona Pevehouse Burgamy  
7112 19TH STREET  
Lubbock, TX 79407-4402

Byron Cone Pevehouse  
13623 NE 32ND PLACE  
Bellevue, WA 98005

Marjorie Cone Kastman  
P O BOX 5930  
Lubbock, TX 79408-5930

Stephen E. Cone, Jr.  
PO BOX 10321  
Lubbock, TX 79408

Katherine Cone Keck  
1801 AVE OF THE STARS STE 446  
Los Angeles, CA 90067-5906

**NE/4 Section 12:**

---

Olsen Energy Inc.  
3512 Paesanos Parkway, Ste 102  
San Antonio, TX 78231

Devon Energy Corporation  
20 N. Broadway, Ste 1500  
Oklahoma City, OK 73102-8260  
Attn: Land Department

NM O & G Ltd.  
PO BOX 10217  
Lubbock, TX 79408

Nona Pevehouse Burgamy  
7112 19TH STREET  
Lubbock, TX 79407-4402

Byron Cone Pevehouse  
13623 NE 32ND PLACE  
Bellevue, WA 98005

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P O BOX 5930  
Lubbock, TX 79408-5930

Stephen E. Cone, Jr.  
PO BOX 10321  
Lubbock, TX 79408

Katherine Cone Keck  
1801 AVE OF THE STARS STE 446  
Los Angeles, CA 90067-5906

**OFFSET WORKING INTEREST OWNERS:**

**NW/4 SE/4 Section 11:**

QAB CARRIED WI LP,  
QAC CARRIED WI LP,  
BLACK DIAMOND RESOURCES LLC, and  
QUANTUM RESOURCES A1 LP  
C/O QUANTUM RESOURCES MANAGEMENT  
1775 SHERMAN STREET SUITE 1525  
Denver, CO 80203

**SE/4 NW/4 Section 12:**

Byron Cone Pevehouse  
13623 NE 32ND PLACE  
Bellevue, WA 98005

Marjorie Cone Kastman  
P O BOX 5930  
Lubbock, TX 79408-5930

Katherine Cone Keck  
1801 AVE OF THE STARS STE 446  
Los Angeles, CA 90067-5906

NM O & G Ltd.  
PO BOX 10217  
Lubbock, TX 79408

Nona Pevehouse Burgamy  
7112 19TH STREET  
Lubbock, TX 79407-4402

Stephen E. Cone, Jr.  
PO BOX 10321  
Lubbock, TX 79408

**NW/4 SE/4 Section 12:**

Byron Cone Pevehouse  
13623 NE 32ND PLACE  
Bellevue, WA 98005

Marjorie Cone Kastman  
P O BOX 5930  
Lubbock, TX 79408-5930

Katherine Cone Keck  
1801 AVE OF THE STARS STE 446  
Los Angeles, CA 90067-5906

NM O & G Ltd.  
PO BOX 10217  
Lubbock, TX 79408

Nona Pevehouse Burgamy  
7112 19TH STREET  
Lubbock, TX 79407-4402

Stephen E. Cone, Jr.  
PO BOX 10321  
Lubbock, TX 79408

**E/2 SW/4 & SW/4 SE/4 Section 12:**

Eureka Gas Company, Inc.  
P.O. Box 2120  
Allen, TX 75013

JTD Resources, LLC  
P.O. Box 3422  
Midland, Texas 79702

Energy  
Devon Energy Corporation  
20 North Broadway  
Oklahoma City, OK 73102-8260  
Attn: Land Department

Dan M. Leonard  
P.O. Box 3422  
Midland, Texas 79702

Robert K. Leonard  
P.O. Box 332  
Midland, Texas 79702

Frank M. Henry Rev. Living Trust  
C/O The Bessemer Trust Company, NA  
Angelo Campanile, Senior Vice President  
630 Fifth Avenue  
New York, New York 10111

Timothy T. Leonard Estate  
C/O Kevin K. Leonard  
P.O. Box 2625  
Eagle Pass, Texas 78853

Lisa L. Durban  
P.O. Box 3194  
Boulder, CO 80307

Maurice Mordka  
1800 N. Grady  
Tucson, Arizona 85715

Tumbleweed Exploration, LLC  
Attn: Kevin K. Leonard  
P.O. Box 50688  
Midland, Texas 79710-0688

Sandfly, Inc.  
P.O. Box 11371  
Midland, Texas 79705-1371

W. B. Robbins III and wife  
Kathy Gaddy Robbins  
P.O. Box 10428  
Midland, Texas 79702

Gwendolyn P. Weiner, Individually  
and as Trustee of the Ted Weiner  
Oil Properties Trust  
P.O. Box 121938  
Fort Worth, Texas 76121  
Attn: Mr. Tom Bass

Roy G. Barton, Jr.  
1919 Turner Street  
Hobbs, New Mexico 88240-2712

Worrall Investment Corporation  
215 W. Third Street  
Roswell, New Mexico 88201

Matthew R. Seay  
6306 Bluestone Place  
Clifton, VA 20124

Cobrador, LLC  
911 Bedford  
Midland, Texas 79701

Morgan Trust  
67 East Baffert Drive  
Nogales, Arizona 85621

PJC Limited Partnership  
P.O. Box 1713  
Roswell, New Mexico 88202

Melzer Exploration Company  
P.O. Box 2083  
Midland, Texas 79702

S. P. Johnson III and  
Barbara Jo Johnson Trust  
U/A/D 1/24/85  
P.O. Box 1641  
Roswell, New Mexico 88202

Timothy A. Dernbach  
2900 12<sup>th</sup> Avenue N., Suite 502E  
Billings, Montana 59101

L.S. Melzer Estate  
C/O L. Stephen Melzer, Executor  
P.O. Box 2083  
Midland, Texas 79702

Mary A. Seay  
P.O. Box 4462  
Midland, Texas 79704

Charles Weiner, Mary Don Weiner,  
Diane Weiner Dillard, Patricia Ann  
Weiner, Gerald W. Bodzy and Glen  
A. Bodzy  
C/O Texas Crude Operating, Inc.  
P.O. Box 56586  
Houston, Texas 77256-6586  
Attn: Ms. Gay Romans

Wadi Petroleum, Inc.  
4355 Sylvanfield Drive, Ste 200  
Houston, Texas 77014  
Attn: Judy Farrar

NE/4 NW/4 Section 13:

Charles Weiner, Mary Don Weiner,  
Diane Weiner Dillard, Patricia Ann  
Weiner, Gerald W. Bodzy and Glen  
A. Bodzy  
C/O Texas Crude Operating, Inc.  
P.O. Box 56586  
Houston, Texas 77256-6586  
Attn: Ms. Gay Romans

Gwendolyn P. Weiner, Individually  
and as Trustee of the Ted Weiner  
Oil Properties Trust  
P.O. Box 121938  
Fort Worth, Texas 76121  
Attn: Mr. Tom Bass

Roy G. Barton, Jr.  
1919 Turner Street  
Hobbs, New Mexico 88240-2712

OFFSET OPERATOR

NW/4NW/4 Section 13

Ray A. Pierce  
P.O. Box 1969  
Eunice, NM 88231

SURFACE OWNER

Armando Valdez  
228 Starlight Road  
Hobbs, NM 88240



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**BEFORE MAILING**

Certified Mail	\$1.73	0500
Return Receipt Fee (Endorsement Required)	\$2.80	02
Restricted Delivery Fee (Endorsement Required)	\$2.30	
	\$0.00	
<b>Total Postage &amp; Fees</b>	<b>\$6.83</b>	<b>08/03/2009</b>

Sent To  
 Iron Cone Pevehouse  
 623 NE 32ND PLACE  
 Bellevue, WA 98005  
 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:

Armando Valdez  
 228 Starlight Road  
 Hobbs, NM 88240

2. Article Number  
 (Transfer from service label)

7008 3230 0000 2319 1861

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:

Byron Cone Pevehouse  
 13623 NE 32ND PLACE  
 Bellevue, WA 98005

2. Article Number  
 (Transfer from service label)

7006 2150 0002 3591 3794

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Carolina Valdez*  
 B. Received by (Printed Name)  
 Carolina Valdez  
 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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Byron Pevehouse*  
 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

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**BEFORE MAILING**

Certified Mail	\$1.73	0500
Return Receipt Fee (Endorsement Required)	\$2.80	02
Restricted Delivery Fee (Endorsement Required)	\$2.30	
	\$0.00	
<b>Total Postage &amp; Fees</b>	<b>\$6.83</b>	<b>08/03/2009</b>

Sent To  
 Armando Valdez  
 228 Starlight Road  
 Hobbs, NM 88240  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

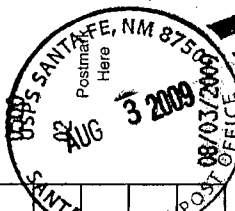
102595-02-M-1540

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**NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES**

Postage	\$ 1.73
Certified Fee	\$ 2.80
Return Receipt Fee (Endorsement Required)	\$ 2.30
Restricted Delivery Fee (Endorsement Required)	\$ 0.00
Total Postage & Fees	\$ 6.83



Sent to  
 Western Commerce Bank, Agent  
 for Kirby B. Schenck Trust  
 P.O. Box 1627  
 Lovington, NM 88260

PS Form 3800, August 2006 See Reverse for Instructions

7008 3230 0000 2319 1700

**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:

Western Commerce Bank, Agent  
 for Kirby B. Schenck Trust  
 P.O. Box 1627  
 Lovington, NM 88260

2. Article Number

(Transfer from service label) 7008 3230 0000 2319 1700

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:

Frank M. Henry Rev. Living Trust  
 C/O The Bessemer Trust Company, NA  
 Angelo Campanile, Senior Vice President  
 630 Fifth Avenue  
 New York, New York 10111

2. Article Number

(Transfer from service label) 7006 2150 0002 359J 3695

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature *[Signature]*  Agent  Addressee
- B. Received by (Printed Name) *Henry* C. Date of Delivery *8/6/04*
- 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

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature *[Signature]*  Agent  Addressee
- B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery \_\_\_\_\_
- D. Is delivery address different from item 1?  Yes  No

If YES, enter delivery address below:

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

2. Article Number

(Transfer from service label) 7006 2150 0002 359J 3695

PS Form 3800, August 2006

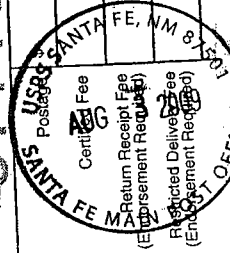
See Reverse for Instructions

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES**

Postage	\$ 1.73
Certified Fee	\$ 2.80
Return Receipt Fee (Endorsement Required)	\$ 2.30
Restricted Delivery Fee (Endorsement Required)	\$ 0.00
Total Postage & Fees	\$ 6.83



Sent to  
 Henry Rev. Living Trust  
 Bessemer Trust Company, NA  
 Angelo Campanile, Senior Vice President  
 630 Fifth Avenue  
 New York, New York 10111

2. Article Number

(Transfer from service label) 7006 2150 0002 359J 3695

PS Form 3800, August 2006

See Reverse for Instructions

7006 2150 0002 359J 3695

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**EAZE PASS™ SPECIAL USE**

Postage	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee	\$2.30	
Registered Delivery Fee (Enclosurement Required)	\$0.00	
Total Postage & Fees	\$4.83	08/03/2009

Sent To: Timothy T. Leonard; Estate  
 Street, Apt. or PO Box No.: 2625  
 City, State, Z: Eagle Pass, Texas 78853

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:  
 Wayne L. Brackin  
 291 Imperial Circle  
 Cold Springs, TX 77331

2. Article Number (Transfer from service label)  
 7006 3230 0000 2319 1847

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  
 B. Received by (Printed Name) *Wayne L. Brackin*  
 C. Date of Delivery *08/03/2009*  
 D. delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

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

2. Article Number (Transfer from service label)  
 7006 3230 0000 2319 1847

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:  
 Timothy T. Leonard Estate  
 C/O Kevin K. Leonard  
 P.O. Box 2625  
 Eagle Pass, Texas 78853

2. Article Number (Transfer from service label)  
 7006 2150 0002 3591 3688

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  
 B. Received by (Printed Name) *Wayne L. Brackin*  
 C. Date of Delivery *08-03-09*  
 D. delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

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

2. Article Number (Transfer from service label)  
 7006 3230 0000 2319 1847

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

**U.S. Postal Service™**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**EAZE PASS™ SPECIAL USE**

Postage	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee	\$2.30	
Registered Delivery Fee (Enclosurement Required)	\$0.00	
Total Postage & Fees	\$4.83	08/03/2009

Sent To: Wayne L. Brackin  
 Street, Apt. No. or PO Box No.: 291 Imperial Circle  
 City, State, ZIP+4: Cold Springs, TX 77331

PS Form 3800, August 2006 See Reverse for Instructions

**U.S. Postal Service™  
CERTIFIED MAIL™ RECEIPT**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES**

Certified Fee	\$1.73	0500
Return Receipt Fee (Endorsement Required)	\$2.80	02
Restricted Delivery Fee (Endorsement Required)	\$2.30	
Postage & Fees (Includes Postage)	\$0.00	
Total Postage & Fees	\$6.83	08/03/2009

USPS SANTA FE, NM  
 Donald J. Cauthen  
 909 Pine Ct.  
 Midland, TX 79705  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7008 2230 0000 2317 1830

**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:

Donald J. Cauthen  
 909 Pine Ct.  
 Midland, TX 79705

2. Article Number  
 (Transfer from service label) 7008 3230 0000 2317 1830

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

**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:

JTD Resources, LLC  
 P.O. Box 3422  
 Midland, Texas 79702

2. Article Number  
 (Transfer from service label) 7006 2150 0002 3591 3725

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

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  Addressee  
*Robert K. Lennard*
- B. Received by (Printed Name) C. Date of Delivery  
*Robert K. Lennard* 08/03/09
- 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 3725

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  Addressee  
*Donald J. Cauthen*
- B. Received by (Printed Name) C. Date of Delivery  
*Donald J. Cauthen* 8-7-09
- 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

7008 3230 0000 2317 1830

Domestic Return Receipt

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES**

Certified Fee	\$1.73	0500
Return Receipt Fee (Endorsement Required)	\$2.80	02
Restricted Delivery Fee (Endorsement Required)	\$2.30	
Postage & Fees (Includes Postage)	\$0.00	
Total Postage & Fees	\$6.83	08/03/2009

USPS SANTA FE, NM  
 JTD Resources, LLC  
 P.O. Box 3422  
 Midland, Texas 79702  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7008 2230 0000 2317 1830

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**NON-SPECIAL USE**

Postage \$	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$6.83	

Sent to  
 Street, Apt. or PO Box  
 City, State, ZIP+4  
 Matthew R. Seay  
 306 Bluestone Place  
 Clifton, VA 20124

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:

Robert K. Leonard  
 P.O. Box 332  
 Midland, Texas 79702

2. Article Number  
 (Transfer from service label)

7006 2150 0002 3591 3701  
 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:

Matthew R. Seay  
 6306 Bluestone Place  
 Clifton, VA 20124

2. Article Number  
 (Transfer from service label)

7008 0500 0001 4439 3538  
 PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 Agent  
 Addressee

B. Received by (Printed Name)  
 LA SEAY

C. Date of Delivery

3. Service Type  
 Certified Mail  
 Registered  
 Insured Mail  
 C.O.D.

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

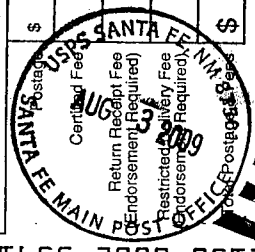
4. Restricted Delivery? (Extra Fee)  Yes

**U.S. Postal Service™**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**NON-SPECIAL USE**

Postage \$	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$6.83	



Sent to  
 Street, Apt. or PO Box No.  
 City, State, ZIP+4  
 Robert K. Leonard  
 P.O. Box 332  
 Midland, Texas 79702

PS Form 3800, August 2006  
 See Reverse for Instructions

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage	\$1.73	0500
Postmark Here	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Package & Fees	\$6.83	08/03/2009

Timothy A. Dernbach  
2900 12<sup>th</sup> Avenue N., Suite 502E  
Billings, Montana 59101

PS Form 3800, August 2006 See Reverse for Instructions

2560 2644 1000 0050 8002

**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:

Alton C. White, Jr.  
3112 Above Stratford Place  
Austin, TX 78746

2. Article Number  
(Transfer from service label)

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

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

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

7006 3230 0000 2319 1694

Domestic Return Receipt PS Form 3800, August 2006

**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:

Timothy A. Dernbach  
2900 12<sup>th</sup> Avenue N., Suite 502E  
Billings, Montana 59101

2. Article Number  
(Transfer from service label)

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

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

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

7006 0500 0001 4432 0947

Domestic Return Receipt PS Form 3800, August 2006

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**OFFICIAL USE**

Postage	\$1.73	0500
Postmark Here	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Package & Fees	\$6.83	08/03/2009

Alton C. White, Jr.  
3112 Above Stratford Place  
Austin, TX 78746

PS Form 3800, August 2006 See Reverse for Instructions

1694 2319 0000 0000 3230 7006

**U.S. Postal Service™**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**88240-2712**  
**OFFICIAL USE**

Postage	\$1.73	0500
Certified Mail Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
<b>TOTAL POSTAGE &amp; FEES \$</b>	<b>\$6.83</b>	

Postmark Here

08/03/2009

Street, Apt. No. Roy G. Barton, Jr.  
 1919 Turner Street  
 City, State, Zip Hobbs, New Mexico 88240-2712

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:

W. B. Robbins III and wife  
 Kathy Gaddy Robbins  
 P.O. Box 10428  
 Midland, Texas 79702

2. Article Number

(Transfer from service label)

7008 0500 0001 4439 3576

Domestic Return Receipt

102565-02-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:

Roy G. Barton, Jr.  
 1919 Turner Street  
 Hobbs, New Mexico 88240-2712

2. Article Number

(Transfer from service label)

7008 0500 0001 4439 3552

Domestic Return Receipt

102565-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- Signature  Agent
- Received by (Printed Name)  Addressee  
 W.B. Robbins III 8-5-09
- Date of Delivery
- Is delivery address different from item 1?  Yes  No

If YES, enter delivery address below:

- 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 4439 3576

Domestic Return Receipt

102565-02-M-1540

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**OFFICIAL USE**

Postage	\$1.73	0500
Certified Mail Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	

Postmark Here

08/03/2009

W.B. Robbins III and wife  
 Kathy Gaddy Robbins  
 P.O. Box 10428  
 Midland, Texas 79702

2. Article Number

(Transfer from service label)

7008 0500 0001 4439 3576

Domestic Return Receipt

102565-02-M-1540

PS Form 3800, August 2006 See Reverse for Instructions

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage	\$1.73
Certified Fee	\$2.80
Return Receipt Fee (Reimbursement Required)	\$2.30
Restricted Delivery Fee (Reimbursement Required)	\$0.00
Total Package & Fees	\$6.83

Postmark Here: 0500 02 08/03/2009

S. P. Johnson III and  
 Barbara Jo Johnson Trust  
 U/A/D 1/24/85  
 P.O. Box 1641  
 Roswell, New Mexico 88202

PS Form 3800, August 2005

7008 0500 0001 4439 3484

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:  
 S. P. Johnson III and  
 Barbara Jo Johnson Trust  
 U/A/D 1/24/85  
 P.O. Box 1641  
 Roswell, New Mexico 88202

2. Article Number (Transfer from service label): 7008 0500 0001 4439 3484

Domestic Return Receipt

PS Form 3811, February 2004

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *S. P. Johnson III*

B. Received by (Printed Name): *Barbara Jo Johnson*

C. Date of Delivery: *8-3-09*

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

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:  
 PJC Limited Partnership  
 P.O. Box 1713  
 Roswell, New Mexico 88202

2. Article Number (Transfer from service label): 7008 0500 0001 4439 3507

Domestic Return Receipt

PS Form 3811, February 2004

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *R. Thompson*

B. Received by (Printed Name): *R. Thompson*

C. Date of Delivery: *8-3-09*

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

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**OFFICIAL USE**

Postage	\$1.73
Certified Fee	\$2.80
Return Receipt Fee (Reimbursement Required)	\$2.30
Restricted Delivery Fee (Reimbursement Required)	\$0.00
Total Package & Fees	\$6.83

Postmark Here: 0500 02 08/03/2009

Sent to: PJC Limited Partnership  
 P.O. Box 1713  
 Roswell, New Mexico 88202

PS Form 3800, August 2005

See Reverse for Instructions

7008 0500 0001 4439 3507



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**OFFICIAL USE**

Postage	\$ 1.73	0500
Certified Fee	\$ 2.80	02
Return Receipt Fee (Endorsement Required)	\$ 2.30	
Restricted Delivery Fee (Endorsement Required)	\$ 0.00	
Total Postage & Fees	\$ 6.83	08/03/2009

Worrall Investment Corporation  
 215 W. Third Street  
 Roswell, New Mexico 88201  
 City, State, Zip

PS Form 3800, August 2006 See Reverse for Instructions

7006 0500 0001 4439 3545

**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:

Dan M. Leonard  
 P.O. Box 3422  
 Midland, Texas 79702

2. Article Number  
*(Transfer from service label)*

7006 2150 0002 3591 3718

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  Agent  Addressee  
 B. Received by (Printed Name) *[Name]*  
 C. Date of Delivery *8/3/09*  
 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

**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:

Worrall Investment Corporation  
 215 W. Third Street  
 Roswell, New Mexico 88201

2. Article Number  
*(Transfer from service label)*

7006 0500 0001 4439 3545

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  Agent  Addressee  
 B. Received by (Printed Name) *[Name]*  
 C. Date of Delivery *9-5-09*  
 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

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage	\$ 1.73	0500
Certified Fee	\$ 2.80	02
Return Receipt Fee (Endorsement Required)	\$ 2.30	
Restricted Delivery Fee (Endorsement Required)	\$ 0.00	
Total Postage & Fees	\$ 6.83	08/03/2009

Sent To Dan M. Leonard  
 P.O. Box 3422  
 Midland, Texas 79702  
 City, State, Zip+4

PS Form 3800, August 2006 See Reverse for Instructions

7006 2150 0002 3591 3718

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**MONITOR SPECIAL USE**

Postage	\$1.73	0500
Registered Fee (Enclosure Required)	\$2.80	02
Restricted Delivery Fee (Enclosure Required)	\$2.30	
Total Postage & Fees	\$6.83	08/03/2009

Sent to  
Meizer Exploration Company  
P.O. Box 2083  
Midland, Texas 79702  
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

764E 6644 7000 0050 8000

**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 Palmer  
P.O. Box 11341  
Midland, TX 79702

2. Article Number  
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  
*Robert Palmer*
- B. Received by (Printed Name)  Addressee  
*Robert Palmer* Date of Delivery *8/12/09*
- 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

7006 3230 0000 2319 1786

**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:

Meizer Exploration Company  
P.O. Box 2083  
Midland, Texas 79702

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  
*Robert Palmer*
- B. Received by (Printed Name)  Addressee  
*Robert Palmer* Date of Delivery *8/6/09*
- D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No  
*meizer*

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)

7006 0500 0000 4439 3491

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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**MONITOR SPECIAL USE**

Postage	\$1.73	0500
Registered Fee (Enclosure Required)	\$2.80	02
Restricted Delivery Fee (Enclosure Required)	\$2.30	
Total Postage & Fees	\$6.83	08/03/2009

Sent to  
Robert Palmer  
P.O. Box 11341  
Midland, TX 79702  
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

9827 6722 0000 0022 8002

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**OFFICIAL USE**

Postage	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
<b>Total Postage &amp; Fees</b>	<b>\$6.83</b>	<b>08/03/2009</b>

Sent To: Melzer Estate  
O L Stephen Melzer, Executor  
P.O. Box 2083  
Midland, Texas 79702

PS Form 3800, August 2006. See Reverse for Instructions

5509 2644 7000 0050 8002

**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:

Wadi Petroleum, Inc.  
4355 Sylvanfield Drive, Ste 200  
Houston, Texas 77014  
Attn: Judy Farrar

2. Article Number  
(Transfer from service label)  
7008 0500 0001 4439 3477

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *Judy Caldwell*  Agent  Addressee  
B. Received by (Printed Name) *Judy Caldwell* C. Date of Delivery *8-6-09*  
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

**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:

L.S. Melzer Estate  
C/O L. Stephen Melzer, Executor  
P.O. Box 2083  
Midland, Texas 79702

2. Article Number  
(Transfer from service label)  
7008 0500 0001 4432 6055

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *Judy Caldwell*  Agent  Addressee  
B. Received by (Printed Name) *Judy Caldwell* C. Date of Delivery *8-6-09*  
D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

*Melzer*

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

225E 6E3E 7000 0050 8002

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**OFFICIAL USE**

Postage	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
<b>Total Postage &amp; Fees</b>	<b>\$6.83</b>	<b>08/03/2009</b>

Sent To: Wadi Petroleum, Inc.  
355 Sylvanfield Drive, Ste 200  
Houston, Texas 77014  
Attn: Judy Farrar

PS Form 3800, August 2006. See Reverse for Instructions

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**NON-FUNCTIONAL USE**

Certified Fee	\$1.73	0500
Return Receipt Fee	\$2.80	02
Registered Fee	\$2.30	
Restricted Delivery Fee	\$0.00	
Endorsement Fee	\$6.83	08/03/2009
Total Postage & Fees		

Sent to  
Maurice Mordka  
1800 N. Grady  
Tucson, Arizona 85715

PS Form 3800, August 2006 See Reverse for Instructions

7006 2150 0002 3591 3664

**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:

Sandfly, Inc.  
P.O. Box 11371  
Midland, Texas 79705-1371

2. Article Number  
(Transfer from service label)

PS Form 3811, February 2004

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  
 X *[Signature]*  Addressee
- B. Received by (Printed Name) *[Signature]*  
 Date of Delivery *[Signature]*
- D. Is delivery address different from item 1?  Yes  
 No

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

7008 0500 0001 4439 3583

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:

Maurice Mordka  
1800 N. Grady  
Tucson, Arizona 85715

2. Article Number  
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

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

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

7006 2150 0002 3591 3664

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**NON-FUNCTIONAL USE**

Certified Fee	\$1.73	0500
Return Receipt Fee	\$2.80	02
Registered Fee	\$0.00	
Restricted Delivery Fee	\$0.00	
Endorsement Fee	\$4.53	08/03/2009
Total Postage & Fees		

Sent to  
Sandfly, Inc.  
P.O. Box No. 11371  
Midland, Texas 79705-1371

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4439 3583

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$6.83	

**QUANTUM RESOURCES MANAGEMENT**  
1775 SHERMAN STREET SUITE 1525  
DENVER, CO 80203

PS Form 3800, August 2006 See Reverse for Instructions

7006 2150 0002 3591 3749

**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:

Eureka Gas Company, Inc.  
P.O. Box 2120  
Allen, TX 75013

2. Article Number  
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  Addressee
- B. Received by (Printed Name) Robert Wells Date of Delivery 08/11/09
- 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

7006 2150 0002 3591 3732

**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:

C/O QUANTUM RESOURCES MANAGEMENT  
1775 SHERMAN STREET SUITE 1525  
DENVER, CO 80203

2. Article Number  
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  Addressee
- B. Received by (Printed Name) STPOLSD 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

7006 2150 0002 3591 3749

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$6.83	

**Eureka Gas Company, Inc.**  
P.O. Box 2120  
Allen, TX 75013

PS Form 3800, August 2006 See Reverse for Instructions

7006 2150 0002 3591 3732

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**CONFIDENTIAL USE**

Postage \$	\$1.73	Postmark Here	0500
Certified Mail Fee (Endorsement Required)	\$2.80		02
Registered Delivery Fee (Endorsement Required)	\$2.30		
Total Postage & Fees	\$6.83		08/03/2009

Sent to  
 Street, Apt. or PO Box  
 City, State, ZIP+4<sup>®</sup>  
 Stephen E. Cone, Jr.  
 PO BOX 10321  
 Lubbock, TX 79408

PS Form 3800, August 2006<sup>®</sup> 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:

Olsen Energy Inc.  
 3512 Paesanos Parkway, Ste 102  
 San Antonio, TX 78231

2. Article Number  
 (Transfer from service label)

7006 2150 0002 3591 3756  
 Domestic Return Receipt  
 PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Donna Bice*  Agent  Addressee  
 B. Received by (Printed Name)  
 Donna Bice C. Date of Delivery  
 8/6/09  
 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

7006 2150 0002 3591 3756  
 Domestic Return Receipt  
 PS Form 3800, August 2006<sup>®</sup>

**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:

Stephen E. Cone, Jr.  
 PO BOX 10321  
 Lubbock, TX 79408

2. Article Number  
 (Transfer from service label)

7006 2150 0002 3591 3770  
 Domestic Return Receipt  
 PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Stephen E. Cone, Jr.*  Agent  Addressee  
 B. Received by (Printed Name)  
 Stephen E. Cone, Jr. C. Date of Delivery  
 8-5-09  
 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

7006 2150 0002 3591 3770  
 Domestic Return Receipt  
 PS Form 3800, August 2006<sup>®</sup>

**U.S. Postal Service™  
CERTIFIED MAIL™ RECEIPT**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**CONFIDENTIAL USE**

Postage \$	\$1.73	Postmark Here	0500
Certified Mail Fee (Endorsement Required)	\$2.80		02
Registered Delivery Fee (Endorsement Required)	\$2.30		
Total Postage & Fees	\$6.83		08/03/2009

Sent to  
 Street, Apt. or PO Box  
 City, State, ZIP+4<sup>®</sup>  
 Olsen Energy Inc.  
 3512 Paesanos Parkway, Ste 102  
 San Antonio, TX 78231

PS Form 3800, August 2006<sup>®</sup> See Reverse for Instructions

7006 2150 0002 3591 3770

7006 2150 0002 3591 3756

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)  
**LOGOFFICIAL USE**

Postmark Here	0500
Return Receipt Fee (Enclosure Payment Required)	\$1.73
Restricted Delivery Fee (Enclosure Payment Required)	\$2.80
Registered Mail Fee (Enclosure Payment Required)	\$2.30
Insured Mail Fee (Enclosure Payment Required)	\$0.00
Total Postage & Fees	\$6.83

Sent to: **Nona Pevehouse Burgamy**  
 Street, Apt. No. or PO Box No.: **7112 19TH STREET**  
 City, State, ZIP: **Lubbock, TX 79407-4402**

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:

**Nona Pevehouse Burgamy**  
 7112 19TH STREET  
 Lubbock, TX 79407-4402

2. Article Number (Transfer from service label) **7008 3230 0000 2319 1649**

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

4. Restricted Delivery? (Extra Fee)  Yes  No

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:

**Marjorie Cone Kastman**  
 P O BOX 5930  
 Lubbock, TX 79408-5930

2. Article Number (Transfer from service label) **7006 2150 0002 3591 3787**

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

4. Restricted Delivery? (Extra Fee)  Yes  No

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature **X Brenda B. Polo**

B. Received by (Printed Name) **BRENDA B. POLO**

C. Date of Delivery **08/03/2009**

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

Postmark Here **0500**

Return Receipt Fee (Enclosure Payment Required) **\$1.73**

Restricted Delivery Fee (Enclosure Payment Required) **\$2.80**

Registered Mail Fee (Enclosure Payment Required) **\$2.30**

Insured Mail Fee (Enclosure Payment Required) **\$0.00**

Total Postage & Fees **\$6.83**

Sent to: **Marjorie Cone Kastman**  
 Street, Apt. No. or PO Box No.: **PO BOX 5930**  
 City, State, ZIP: **Lubbock, TX 79408-5930**

PS Form 3800, August 2006 See Reverse for Instructions

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature **X Nona Pevehouse Burgamy**

B. Received by (Printed Name) **Nona Pevehouse Burgamy**

C. Date of Delivery **08/03/2009**

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

1. Article Addressed to:

**Nona Pevehouse Burgamy**  
 7112 19TH STREET  
 Lubbock, TX 79407-4402

2. Article Number (Transfer from service label) **7008 3230 0000 2319 1649**

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

4. Restricted Delivery? (Extra Fee)  Yes  No

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

**U.S. Postal Service™ RECEIPT**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage \$ **1.73** 0500  
Certified Fee **2.80** 02 Postmark Here  
Return Receipt Fee **2.30**  
Restricted Delivery Fee **3.00**  
Total Postage & Fees **\$6.83** 08/03/2009

Sent to  
Street, Apt. No.,  
or PO Box No. Attn: Land Department  
City, State, ZIP+4

PS Form 3800, August 2005. See Reverse for Instructions

7008 3230 0000 2319 1656

**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.  
PO BOX 10217  
Lubbock, TX 79408

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

7008 3230 0000 2319 1656

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 Corporation  
20 N. Broadway, Ste 1500  
Oklahoma City, OK 73102-8260  
Attn: Land Department

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

7008 3230 0000 2319 1663

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
B. Received by (Printed Name)  Addressee  
C. Date of Delivery 08/03/09  
D. Is delivery address different from item 1?  Yes  
if YES, enter delivery address below:  No

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

**COMPLETE THIS SECTION ON DELIVERY**

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage \$ **1.73** 0500  
Certified Fee **2.80** 02 Postmark Here  
Return Receipt Fee **2.30**  
Restricted Delivery Fee **3.00**  
Total Postage & Fees **\$6.83** 08/03/2009

Sent to  
Street, Apt. No.,  
or PO Box No. NM O & G Ltd.  
City, State, ZIP+4 PO BOX 10217  
Lubbock, TX 79408

PS Form 3800, August 2005. See Reverse for Instructions

7008 3230 0000 2319 1656



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CERTIFIED MAIL™ RECEIPT**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**NON-OFFICIAL USE**

Postage	\$ 1.73	0500
Return Receipt Fee (Endorsement Required)	\$ 2.80	02
Restricted Delivery Fee (Endorsement Required)	\$ 2.30	
Total Postage & Fees	\$ 6.83	08/03/2009

Sent To  
 Street, Apt. No. or PO Box No. **Bill Hightower 3548 Midland, TX 79702**  
 City, State, Zip+4

PS Form 3800, August 2006 See Reverse for Instructions

9002 0000 0000 0000 0000 0000

**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:

Jack D. Hightower  
 P.O. Box 11227  
 Midland, TX 79702

2. Article Number  
 (Transfer from service label)

7008 3230

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature *Bill Hightower*  Agent  Addressee
- B. Received by (Printed Name) *Bill Hightower*  Certified Mail  Express Mail
- C. Date of Delivery *8/6/09*  Return Receipt for Merchandise
- D. Is delivery address different from item 1?  Yes  No  Insured Mail  C.O.D.
- If YES, enter delivery address below:

3. Service Type  Certified Mail  Express Mail  Return Receipt for Merchandise
4. Restricted Delivery? (Extra Fee)  Yes

Article Number  
 (Transfer from service label)

7008 3230

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:

Bill J. Hightower  
 P.O. Box 3548  
 Midland, TX 79702

2. Article Number  
 (Transfer from service label)

7008 3230

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature *Bill Hightower*  Agent  Addressee
- B. Received by (Printed Name) *Bill Hightower*  Certified Mail  Express Mail
- C. Date of Delivery *8-6-09*  Return Receipt for Merchandise
- D. Is delivery address different from item 1?  Yes  No  Insured Mail  C.O.D.
- If YES, enter delivery address below:

3. Service Type  Certified Mail  Express Mail  Return Receipt for Merchandise
4. Restricted Delivery? (Extra Fee)  Yes

Article Number  
 (Transfer from service label)

7008 3230

PS Form 3811, February 2004

102595-02-M-1540

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**NON-OFFICIAL USE**

Postage	\$ 1.73	0500
Return Receipt Fee (Endorsement Required)	\$ 2.80	02
Restricted Delivery Fee (Endorsement Required)	\$ 2.30	
Total Postage & Fees	\$ 6.83	08/03/2009

Sent To  
 Street, Apt. No. or PO Box No. **Jack D. Hightower 11227 Midland, TX 79702**  
 City, State, Zip+4

PS Form 3800, August 2006 See Reverse for Instructions

9002 0000 0000 0000 0000 0000

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage \$1.73  
Certified Fee \$2.80  
Return Receipt Fee \$2.30  
Restriction Fee \$0.00  
Total Postage and Fees \$6.83

Postmark Here

Sent to  
Charles Weiner, Mary Don Weiner,  
Diane Weiner Dillard, Patricia Ann  
Weiner, Gerald W. Bodzy and Glen  
A. Bodzy  
C/O Texas Crude Operating, Inc.  
P.O. Box 56586  
Houston, Texas 77256-6586  
Attn: Ms. Gay Romans

PS Form 3800, August 2005 See Reverse for Instructions

7008 0500 0001 4432 6031

**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:

Cobrador, LLC  
911 Bedford  
Midland, Texas 79701

2. Article Number  
(Transfer from service label)

7008 0500 0001 4439 3521

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:

Charles Weiner, Mary Don Weiner,  
Diane Weiner Dillard, Patricia Ann  
Weiner, Gerald W. Bodzy and Glen  
A. Bodzy  
C/O Texas Crude Operating, Inc.  
P.O. Box 56586  
Houston, Texas 77256-6586  
Attn: Ms. Gay Romans

2. Article Number  
(Transfer from service label)

7008 0500 0001 4432 6031

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  Addressee
- B. Received by (Printed Name)  Date of Delivery
- C. 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  No

7008 0500 0001 4439 3521

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  Addressee
- B. Received by (Printed Name)  Date of Delivery
- 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  No

7008 0500 0001 4439 3521

Domestic Return Receipt

102595-02-M-1540

**U.S. Postal Service™  
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**OFFICIAL USE**

Postage \$1.73  
Certified Fee \$2.80  
Return Receipt Fee \$2.30  
Restriction Fee \$0.00  
Total Postage and Fees \$6.83

Postmark Here

Sent to  
Cobrador, LLC  
911 Bedford  
Midland, Texas 79701

PS Form 3800, August 2005 See Reverse for Instructions

102595-02-M-1540

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage	\$1.73
Certified Fee	\$2.80
Return Receipt Fee (Endorsement Required)	\$2.30
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$6.83

Sent To: Lisa L. Durban  
Street/Apt. No. or PO Box No.: P.O. Box 3194  
City, State, Zip: Boulder, CO 80307

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:

Lisa L. Durban  
P.O. Box 3194  
Boulder, CO 80307

2. Article Number

(Transfer from service label) 7006 2150 0002 3591 3671

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:

Tumbleweed Exploration, LLC  
Attn: Kevin K. Leonard  
P.O. Box 50688  
Midland, Texas 79710-0688

2. Article Number

(Transfer from service label) 7008 0500 0001 4439 3590

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]* Agent  
B. Received by (Printed Name) Lisa L. Durban Addressee  
C. Date of Delivery 8/12/09

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

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

2. Article Number

(Transfer from service label) 7006 2150 0002 3591 3671

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]* Agent  
B. Received by (Printed Name) Lisa L. Durban Addressee  
C. Date of Delivery 8/12/09

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

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

2. Article Number

(Transfer from service label) 7008 0500 0001 4439 3590

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

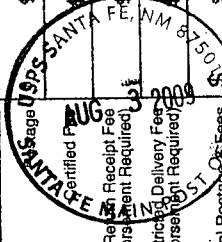
For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage	\$1.73
Certified Fee	\$2.80
Return Receipt Fee (Endorsement Required)	\$2.30
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$6.83

Sent To: Tumbleweed Exploration, LLC  
Street/Apt. No. or PO Box No.: P.O. Box 50688  
City, State, ZIP+4: Midland, Texas 79710-0688

PS Form 3800, August 2006 See Reverse for Instructions



7006 2150 0002 3591 3671

7008 0500 0001 4439 3590

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**FOR OFFICIAL USE**

Postage	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$6.83	08/03/2009

Sent To  
 Petro Tiger I, Ltd.  
 P.O. Box 3166  
 Tulsa, OK 74101  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

2009 0803 0000 2319 1687

**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:

Petro Tiger I, Ltd.  
 P.O. Box 3166  
 Tulsa, OK 74101

2. Article Number  
 (Transfer from service label) 7008 3230 0000 2319 1687

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:

Katherine Cone Keck  
 1801 AVE OF THE STARS STE 446  
 Los Angeles, CA 90067-5906

2. Article Number  
 (Transfer from service label) 7006 2150 0002 3591 3763

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  Addressee  
 B. Received by (Printed Name) *Katherine Cone Keck* C. Date of Delivery  
 D. Is delivery address different from item 1?  Yes  No  
 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

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  Addressee  
 B. Received by (Printed Name) *Katherine Cone Keck* 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  No

2. Article Number  
 (Transfer from service label) 7006 2150 0002 3591 3763

PS Form 3800, August 2006 See Reverse for Instructions

**U.S. Postal Service™**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**FOR OFFICIAL USE**

Postage	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$6.83	08/03/2009

Sent To  
 Katherine Cone Keck  
 1801 AVE OF THE STARS STE 446  
 Los Angeles, CA 90067-5906  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

2009 0803 0000 2319 1687

**CERTIFIED MAIL™ RECEIPT**  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**SPECIAL USE**

Postage	\$1.73	0500
Return Receipt Fee (Endorsement Required)	\$2.80	02
Restricted Delivery Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage and Fees	\$6.83	08/03/2004

Sent to: Bovina Limited Liability Company  
 Street, Apt. No.: 1772  
 City, State, ZIP+4: Hobbs, NM 88240

PS Form 3800, August 2006 See Reverse for Instructions

7507 67E2 0000 0000 0000 0000

**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:

Bovina Limited Liability Company  
 P.O. Box 1772  
 Hobbs, NM 88240

2. Article Number

(transfer from service label)

7008 3230 0000 2319 1654

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

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

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

4. Restricted Delivery? (Extra Fee)  Yes  No

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

J. R. Hurt  
 P.O. Box 72  
 Odessa, TX 79760

2. Article Number

(transfer from service label)

7008 3230 0000 2319 1793

Domestic Return Receipt

PS Form 3811, February 2004

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *[Signature]*  
 B. Received by (Printed Name): James R. Hurt  
 C. Date of Delivery: 08/03/2004  
 D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

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

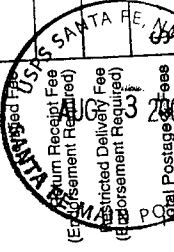
4. Restricted Delivery? (Extra Fee)  Yes  No

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**SPECIAL USE**

Postage	\$1.73	0500
Return Receipt Fee (Endorsement Required)	\$2.80	02
Restricted Delivery Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage and Fees	\$6.83	08/03/2009



Sent to: J. R. Hurt  
 P.O. Box 72  
 Odessa, TX 79760

7008 3230 0000 0000 0000 0000

PS Form 3800, August 2006 See Reverse for Instructions

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**OFFICIAL USE**

Postage & Fees	\$1.73
Return Receipt Fee	\$2.80
Restricted Delivery Fee (Endorsement Required)	\$2.30
Registered Mail Fee (Endorsement Required)	\$0.00
<b>Total Postage &amp; Fees</b>	<b>\$6.83</b>



0500 02 08/03/2009

Postmark Here

Ray A. Pierce  
P.O. Box 1969  
Bunice, NM 88231

Eugene Hogan  
2803 Frontier Drive  
Midland, TX 79705

PS Form 3800, August 2006

See Reverse for Instructions

7008 3230 0000 2319 1678

**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:

Ray A. Pierce  
P.O. Box 1969  
Bunice, NM 88231

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

7008 3230 0000 2319 1678

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
B. Received by (Printed Name)  Addressee  
C. Date of Delivery 8/5

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

7008 3230 0000 2319 1678

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
B. Received by (Printed Name)  Addressee  
C. Date of Delivery 8-6-09

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

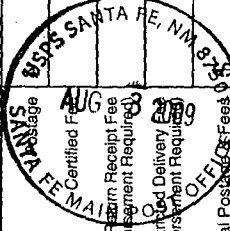
3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.  
 4. Restricted Delivery? (Extra Fee)  Yes

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**OFFICIAL USE**

Postage	\$1.73
Certified Fee	\$2.80
Return Receipt Fee (Endorsement Required)	\$2.30
Restricted Delivery Fee (Endorsement Required)	\$0.00
<b>Total Postage &amp; Fees</b>	<b>\$6.83</b>



0500 02 08/03/2009

Ray A. Pierce  
P.O. Box 1969  
Bunice, NM 88231

PS Form 3800, August 2006

See Reverse for Instructions

7008 3230 0000 2319 1678



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[Track & Confirm](#) [FAQs](#)

# Track & Confirm

## Search Results

Label/Receipt Number: **7008 3230 0000 2319 1670**  
Class: **First-Class Mail®**  
Service(s): **Certified Mail™**  
**Return Receipt**  
Status: **Delivered**

### Track & Confirm

Enter Label/Receipt Number.

[Go >](#)

Your item was delivered at 11:25 AM on August 5, 2009 in TULSA, OK 74103.

### Detailed Results:

- **Delivered, August 05, 2009, 11:25 am, TULSA, OK 74103**
- **Acceptance, August 03, 2009, 10:24 am, SANTA FE, NM 87501**

### Notification Options

#### Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. [Go >](#)

[Site Map](#) [Customer Service](#) [Forms](#) [Gov't Services](#) [Careers](#) [Privacy Policy](#) [Terms of Use](#) [Business Customer Gateway](#)

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7008 3230 0000 2319 1670

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**OFFICIAL USE**

Postage	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
<b>Total Postage &amp; Fees</b>	<b>\$6.83</b>	<b>08/03/2009</b>

See To: **Geodyne Nominee Coporation**  
**C/O Samson Resources**  
Street, Apt. No., or PO Box No. **Two West Second Street**  
City, State, ZIP+4 **Tulsa, OK 74103**

PS Form 3800, August 2006 See Reverse for Instructions



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[Track & Confirm](#)

[FAQs](#)

# Track & Confirm

## Search Results

Label/Receipt Number: **7008 0500 0001 4439 3514**  
Class: **First-Class Mail®**  
Service(s): **Certified Mail™**  
**Return Receipt**  
Status: **Delivered**

Track & Confirm

Enter Label/Receipt Number.

[Go >](#)

Your item was delivered at 10:11 AM on August 5, 2009 in NOGALES, AZ 85621.

### Detailed Results:

- **Delivered, August 05, 2009, 10:11 am, NOGALES, AZ 85621**
- **Arrival at Unit, August 05, 2009, 8:37 am, NOGALES, AZ 85621**
- **Acceptance, August 03, 2009, 10:09 am, SANTA FE, NM 87501**

### Notification Options

#### Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. [Go >](#)

[Site Map](#) | [Customer Service](#) | [Forms](#) | [Gov't Services](#) | [Careers](#) | [Privacy Policy](#) | [Terms of Use](#) | [Business Customer Gateway](#)

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**PROFANAL USE**

NOGALES, AZ 85621

Postage	\$ 1.73	0500
Certified Fee	\$ 2.80	02
Return Receipt Fee (Endorsement Required)	\$ 2.30	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$ 0.00	
<b>Total Postage and Fees</b>	<b>\$ 6.83</b>	<b>08/03/2009</b>

Sent To: Morgan Trust  
67 East Baffert Drive  
Nogales, Arizona 85621  
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>[Signature]</i></p> <p>B. Received by (Printed Name) <i>Linda Beard</i> C. Date of Delivery <i>8/31/09</i></p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Gwendolyn P. Weiner, Individually and as Trustee of the Ted Weiner Oil Properties Trust P.O. Box 121938 Fort Worth, Texas 76121 Attn: Mr. Tom Bass</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7008 0500 0001 4439 3569</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

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**FOR OFFICIAL USE**

Postage \$	\$1.73	0500 02 Postmark Here
Postage and Fee	\$2.80	
Return Receipt Fee (Endorsement Required)	\$2.30	
Registered Delivery Fee (Endorsement Required)	\$0.00	
Total Postage:		

Gwendolyn Weiner, Individually  
and as Trustee of the Ted Weiner  
Oil Properties Trust

Sent To: **Oil Properties Trust**  
P.O. Box 121938  
Fort Worth, Texas 76121  
Attn: Mr. Tom Bass

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4439 3569

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

**CERTIFIED MAIL™**

0500 0001 4432 6048

0500 0001 4432 6048

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

MIAMI, FL 33104

Postage	\$1.73
Certified Mail Fee	\$2.80
Return Receipt Fee (Endorsement Required)	\$2.30
Restricted Delivery Fee (Endorsement Required)	\$0.00
<b>Total Postage &amp; Fees</b>	<b>\$6.83</b>

0500

02

Postmark Here

08/03/2009

**FROM**

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

**TO**

Mary A. Seay

- MOVED, LEFT NO ADDRESS
- NOT DELIVERABLE AS ADDRESSED
- UNABLE TO FORWARD
- ATTEMPTED-NOT KNOWN
- UNCLAIMED  REFUSED
- NO SUCH STREET
- NO SUCH NUMBER
- INSUFFICIENT ADDRESS



RETURNED TO SENDER



UNITED STATES POSTAL SERVICE®

PN #1700 Red

**COMPLETE THIS SECTION**

Items 1, 2, and 3. Also complete Restricted Delivery is desired. Name and address on the reverse will return the card to you. If space permits.

Send to:

**COMPLETE THIS SECTION ON DELIVERY**

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

Mary A. Seay

- MOVED, LEFT NO ADDRESS
- NOT DELIVERABLE AS ADDRESSED
- UNABLE TO FORWARD
- ATTEMPTED-NOT KNOWN
- UNCLAIMED  REFUSED
- NO SUCH STREET
- NO SUCH NUMBER
- INSUFFICIENT ADDRESS



RETURNED TO SENDER



UNITED STATES POSTAL SERVICE®

PN #1700 Red

United States Return Receipt

P.S. Form 3811, February 2004

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

0001 4432 6048

102595-02-M-1540

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

**CERTIFIED MAIL**

0000 2319 1779

**FROM**

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

**TO**

~~William Vaughn  
2302 Maxwell Drive  
Midland, TX 79705~~

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

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**OFFICIAL USE**

Postage	\$1.73	0500
Certified Fee	\$2.80	02
Return Receipt Fee (Endorsement Required)	\$2.30	Postmark Here
Restricted Delivery (Endorsement Required)	\$0.00	
<b>Total Postage &amp; Fees</b>	<b>\$6.83</b>	<b>08/03/2009</b>

Sent to **William Vaughn Properties, Ltd.**  
 Street, Apt. No., or PO Box No. **2302 Maxwell Drive**  
 City, State, ZIP+4 **Midland, TX 79705**

PS Form 3800, August 2006

See Reverse for Instructions

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

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

D. Is delivery address different from item 1?  Yes  
 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

**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:

William Vaughn Properties, Ltd.  
2302 Maxwell Drive  
Midland, TX 79705

2. Article Number  
(Transfer from service label)

7008 3230 0000 2319 1779

PS Form 3800, February 2004

Domestic Return Receipt

102595-02-M-15