

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

APPLICATION OF CIMAREX ENERGY CO. FOR  
A NON-STANDARD OIL SPACING AND PRORATION  
UNIT AND COMPULSORY POOLING, EDDY COUNTY,  
NEW MEXICO.


Case No. 14,418

AFFIDAVIT OF NOTICE

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

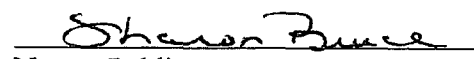
James Bruce, being duly sworn upon his oath, deposes and states:

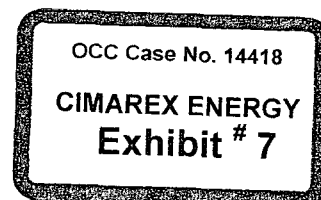
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Cimarex Energy Co.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners, at their correct addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.

  
James Bruce

SUBSCRIBED AND SWORN TO before me this 2nd day of February, 2010 by James Bruce.

My Commission Expires: 3/14/13

  
Notary Public



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)

December 31, 2009

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

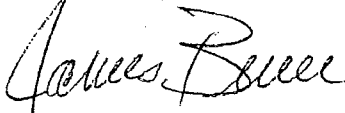
Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling and a non-standard spacing and proration unit, filed with the New Mexico Oil Conservation Division by Cimarex Energy Co., regarding the  $W\frac{1}{2}W\frac{1}{2}$  of Section 21, Township 19 South, Range 31 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, January 21, 2010, 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 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 the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, January 14, 2010. This statement must be filed with the Division's Santa Fe office at the above address, 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. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,

  
James Bruce

Attorney for Cimarex Energy Co.

EXHIBIT

A

EXHIBIT A

Lynx Petroleum Consultants, Inc.  
P.O. Box 1208  
Hobbs, New Mexico 88211

Harvey E. Yates Co  
P.O. Box 1933  
Roswell, New Mexico 88202

OXY USA Inc.  
5 Greenway Plaza, Ste. 110  
Houston, Texas 77046

BMT O&G NM, L.L.C.  
Thru Line O&G NM, L.L.C.  
Keystone O&G NM, L.L.C.  
SRBI O&G NM, L.L.C.  
LMBI O&G NM, L.L.C.  
201 Main Street, Ste. 2900  
Fort Worth, Texas 76102

Marbob Energy Corp.  
P. O. Box 227  
Artesia, New Mexico 88211

Jalapeno Corp.  
P. O. Box 1608  
Albuquerque, New Mexico 87103

Ben Alexander  
P. O. Box 1331  
Hobbs, New Mexico 88241

Seven Rivers, Inc.  
P. O. Box 1598  
Carlsbad, New Mexico 88221

Yates Energy Corp.  
P. O. Box 2323  
Roswell, New Mexico 88202

Powder Horn Investments, LLC  
P. O. Box 2503  
Hobbs, New Mexico 88241

TNK, Inc.  
P. O. Box 1500  
Hobbs, New Mexico 88241

DASCO Energy Corp.  
c/o American State Bank Trust Dept.  
P.O. Box 1401  
Lubbock, Texas 79408

Watson Truck & Supply, Inc.  
P. O. Box 10  
Hobbs, New Mexico 88241

Fonay Oil & Gas  
5333 Baggett  
Hobbs, New Mexico 88242

E.G.L. Resources, Inc.  
P. O. Box 10886  
Midland, Texas 79702

Kent Gabel  
Sudan Feedyard  
1 Hwy Mile of Sudan East  
Sudan, Texas 79371

McVay Drilling Co.  
P. O. Box 924  
Hobbs, New Mexico 88241

Larry R. Scott  
P. O. Box 1979  
Hobbs, New Mexico 88241

**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:

Marbob Energy Corp.  
P. O. Box 227  
Artesia, New Mexico 88211

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature ☒ Agent
- B. Received by (Printed Name) Matias Villa C. Date of Delivery 1-5-09
- D. Is delivery address different from item 1? ☒ Yes ☐ No
- If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Insured Mail ☐ G.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

2. Article Number (Transfer from service label) 7008 3230 0000 2318 8014

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

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**OFFICIAL RECEIPT**

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

Sent To: Marbob Energy Corp.  
Street Apt. No.: P. O. Box 227  
or PO Box No. Artesia, New Mexico 88211  
City, State, ZIP+4

Postmark Here: JAN 4 2009 SANTA FE NM 87501

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:

Jalapeno Corp.  
P. O. Box 1608  
Albuquerque, New Mexico 87103

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature X Don Barred B. Received by (Printed Name) Don Barred C. Date of Delivery Jan 11/6/10
- 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 ☐ G.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

2. Article Number (Transfer from service label) 7008 3230 0000 2318 8021

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

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

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

Sent To: Jalapeno Corp.  
Street Apt. No.: P. O. Box 1608  
or PO Box No. Albuquerque, New Mexico 87103  
City, State, ZIP+4

Postmark Here: JAN 4 2009 SANTA FE NM 87501

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:

Seven Rivers, Inc.  
P. O. Box 1598  
Carlsbad, New Mexico 88221

2. Article Number  
(Transfer from service label) 7008 3230 0000 2318 8045

PS Form 3811, February 2004 Domestic Return Receipt

102595-02 M-1540

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**OFFICIAL USE**

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

Postmark Here  
JAN 1 2010

Seven Rivers, Inc.  
P. O. Box 1598  
Carlsbad, New Mexico 88221

PS Form 3800, August 2006 See Reverse for Instructions

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

**OFFICIAL USE**

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

Postmark Here  
JAN 4 2010

McVay Drilling Co.  
P. O. Box 924  
Hobbs, New Mexico 88241

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:

McVay Drilling Co.  
P. O. Box 924  
Hobbs, New Mexico 88241

2. Article Number  
(Transfer from service label) 7008 3230 0000 2319 2165

PS Form 3811, February 2004 Domestic Return Receipt

102595-02 M-1540

**COMPLETE THIS SECTION ON DELIVERY**

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

D. Is delivery address different from address below? 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

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:

DASCO Energy Corp.  
c/o American State Bank Trust Dept.  
P.O. Box 1401  
Lubbock, Texas 79408

## 3. Service Type

- ☒ Certified Mail  
☐ Registered  
☐ Insured Mail  
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number

(Transfer from service label)

7008 3230 0000 2319 2110

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) *[Signature]* C. Date of Delivery *[Signature]*

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



## 3. Service Type

- ☒ Certified Mail  
☐ Registered  
☐ Insured Mail  
☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

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OFFICIAL MAIL

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

Total Postage & Fee

Sent To BMT O&G NM, L.L.C.

KeyStone O&G NM, L.L.C.

SRBI O&G NM, L.L.C.

LMBI O&G NM, L.L.C.

201 Main Street, Ste. 2900

Fort Worth, Texas 76102

PS Form 3800, August 2005 See Reverse for Instructions

# U.S. Postal Service<sup>TM</sup> CERTIFIED MAIL<sup>TM</sup> RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL MAIL

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

Sent To DASCO Energy Corp.  
c/o American State Bank Trust Dept.  
P.O. Box 1401  
Lubbock, Texas 79408

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:

BMT O&G NM, L.L.C.  
Thru Line O&G NM, L.L.C.  
KeyStone O&G NM, L.L.C.  
SRBI O&G NM, L.L.C.  
LMBI O&G NM, L.L.C.  
201 Main Street, Ste. 2900  
Fort Worth, Texas 76102

2. Article Number

(Transfer from service label)

7008 3230 0000 2318 8007

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) *[Signature]* C. Date of Delivery *[Signature]*

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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*(Domestic Mail Only; No Insurance Coverage Provided)*  
 For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

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

Sent To: TNK, Inc.  
 Street, Apt. No.: P. O. Box 1500  
 or PO Box No. Hobbs, New Mexico 88241  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:  
 TNK, Inc.  
 P. O. Box 1500  
 Hobbs, New Mexico 88241

2. Article Number (Transfer from service label)  
 7008 3230 0000 2319 2103

PS Form 3811, February 2004 Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 B. Received by (Printed Name)  
 C. Date of Delivery  
 D. Is delivery address different from item 1? 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 ☐ No

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:  
 OXY USA Inc.  
 5 Greenway Plaza, Ste. 110  
 Houston, Texas 77046

2. Article Number (Transfer from service label)  
 7008 3230 0000 2318 7994

PS Form 3811, February 2004 Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 B. Received by (Printed Name)  
 C. Date of Delivery  
 D. Is delivery address different from item 1? 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 ☐ No

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

Sent To: OXY USA Inc.  
 5 Greenway Plaza, Ste. 110  
 Houston, Texas 77046

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

PS Form 3800, August 2006 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:  
 TNK, Inc.  
 P. O. Box 1500  
 Hobbs, New Mexico 88241

2. Article Number (Transfer from service label)  
 7008 3230 0000 2319 2103

PS Form 3811, February 2004 Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 B. Received by (Printed Name)  
 C. Date of Delivery  
 D. Is delivery address different from item 1? 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 ☐ No

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For delivery information visit our website at [www.usps.com](http://www.usps.com)  
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Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To: powder Horn Investments, LLC  
P. O. Box 2503  
Hobbs, New Mexico 88241  
Street, Apt. No., or PO Box No.  
City, State, Zip+4  
Postmark Here

PS Form 3800, August 2006 See Reverse for Instructions

2602 6122 0000 0022 2097

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:

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

A. Signature ☒ Agent ☐ Addressee  
B. Received by (Printed Name) Date of Delivery 1-8-04  
D. Is delivery address different from item 1? ☐ Yes ☐ No  
If YES, enter delivery address below:

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

2. Article Number (Transfer from service label) 7008 3230 0000 2318 7987  
Domestic Return Receipt  
PS Form 3811, February 2004 102595-02-M-1540

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**OFFICIAL USE**

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

Sent To: Harvey E. Yates Co  
P.O. Box 1933  
Roswell, New Mexico 88202  
Street, Apt. No., or PO Box No.  
City, State, Zip+4  
Postmark Here  
JAN 4 2004  
SANTA FE MAIN POST OFFICE NM 87501

PS Form 3800, August 2006 See Reverse for Instructions

2602 6122 0000 0022 2097

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:

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

A. Signature ☒ Agent ☐ Addressee  
B. Received by (Printed Name) Date of Delivery 1-8-04  
D. Is delivery address different from item 1? ☐ Yes ☐ No  
If YES, enter delivery address below:

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

2. Article Number (Transfer from service label) 7008 3230 0000 2319 2097  
Domestic Return Receipt  
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)  
**OFFICIAL USE**

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

Sent To: E.G.L. Resources, Inc.  
P. O. Box 10886  
Midland, Texas 79702  
Street, Apt. No., or PO Box No.  
City, State, ZIP+4

Postmark Here

PS Form 3800, August 2004 See Reverse for Instructions

7172 6762 0000 0026 0002

**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:

Yates Energy Corp.  
P. O. Box 2323  
Roswell, New Mexico 88202

2. Article Number (transfer from service label) 7008 3230 0000 2319 2149

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) C. Date of Delivery 1-7-10

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

Sent To: Yates Energy Corp.  
P. O. Box 2323  
Roswell, New Mexico 88202  
Street, Apt. No., or PO Box No.  
City, State, ZIP+4

Postmark Here 4 2010

PS Form 3800, August 2004 See Reverse for Instructions

6772 6762 0000 0026 0002

**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.G.L. Resources, Inc.  
P. O. Box 10886  
Midland, Texas 79702

2. Article Number (transfer from service label) 7008 3230 0000 2319 2141

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) C. Date of Delivery 1-7-10

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:

2. Article Number (Transfer from service label): 7008 3230 0000 2318 7970

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *Larry R. Scott*

B. Received by (Printed Name): *Larry R. Scott*

C. Date of Delivery: *8/28/04*

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

If YES, enter delivery address below:

PO BOX 1708

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☐ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

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

Lynx Petroleum Consultants, Inc.  
P.O. Box 1208  
Hobbs, New Mexico 88211

**U.S. Postal Service<sup>TM</sup>**

**CERTIFIED MAIL<sup>TM</sup> 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 \$

Certified Fee \$

Return Receipt Fee (Endorsement Required) \$

Restricted Delivery Fee (Endorsement Required) \$

Total Postage & Fees \$

Sent To: Lynx Petroleum Consultants, Inc.  
P.O. Box 1208  
Hobbs, New Mexico 88211

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

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:

Larry R. Scott  
P.O. Box 1979  
Hobbs, New Mexico 88241

2. Article Number (Transfer from service label): 7008 3230 0000 2319 2172

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *Larry R. Scott*

B. Received by (Printed Name): *Larry R. Scott*

C. Date of Delivery: *8/28/04*

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

If YES, enter delivery address below:

PO BOX 1708

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☐ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

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

**U.S. Postal Service<sup>TM</sup>**

**CERTIFIED MAIL<sup>TM</sup> 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 \$

Certified Fee \$

Return Receipt Fee (Endorsement Required) \$

Restricted Delivery Fee (Endorsement Required) \$

Total Postage & Fees \$

Sent To: Larry R. Scott  
P.O. Box 1979  
Hobbs, New Mexico 88241

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

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

**U.S. Postal Service<sup>TM</sup>**  
**CERTIFIED MAIL<sup>TM</sup> 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 \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Total Postage &

Kent Gabel

Sent To Sudan Feedyard  
1 Hwy Mile of Sudan East  
Sudan, Texas 79371  
 Street, Apt. No.,  
 or PO Box No.  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

9572 61E2 0000 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 mail piece, or on the front if space permits.

1. Article Addressed to:

Kent Gabel  
 Sudan Feedyard  
 1 Hwy Mile of Sudan East  
 Sudan, Texas 79371

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature 	<input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
B. Received by (Printed Name) <u>Kent Gabel</u>	C. Date of Delivery <u>JAN 14 2007</u>
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

2. Article Number

(Transfer from service label)

7000 3230 0000 2319 2150

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

Sent To  
Ben Alexander  
P. O. Box 1331  
Hobbs, New Mexico 88241  
or PO Box No.  
City, State, ZIP+4

PS Form 3800, August 2005 See Reverse for Instructions

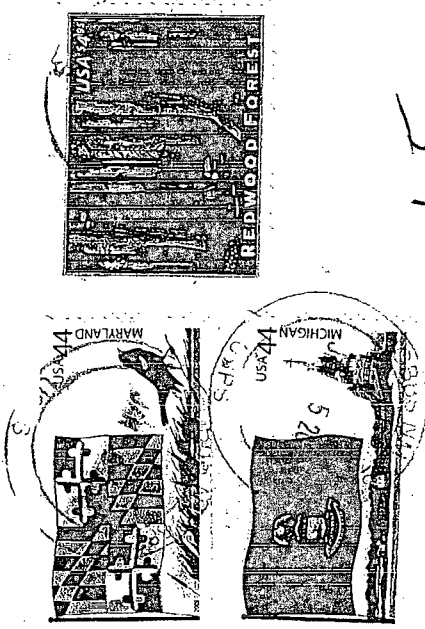
Postmark Here  
JAN 4 2010  
SANTA FE MAIN POST OFFICE  
87501

**HERRING HILL**

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

7008 3230 0000 2316 8036

1ST NOTICE 1-2-6  
2ND NOTICE  
RETURN



1-5  
NIXIE

Ben Alexander  
P. O. Box 1331  
Hobbs, New Mexico 88241

871 DC 1 00 01/29/10  
RETURN TO SENDER  
UNCLAIMED  
UNABLE TO FORWARD

BC: 87504105656 \*2255-04124-04-41

882413 3230 0000 2316 8036