

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF EXXON CORPORATION FOR
LEASE COMMINGLING, LEA COUNTY, NEW MEXICO.

Case No. 11,904

AFFIDAVIT REGARDING NOTICE

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

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 Applicant.

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.

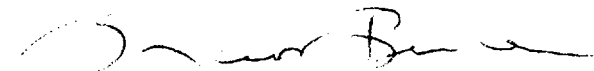
4. Notice of the Application was provided to said interest owners at their correct addresses by mailing each of them, by certified mail, a copy of the Application. Copies of the notice letters and certified return receipts are attached hereto as Exhibit A.

5. Applicant has complied with the notice provisions of Division Rule 1207.



James Bruce

SUBSCRIBED AND SWORN TO before me this 5th day of January, 1998, by James Bruce.



Notary Public

My Commission Expires:

3/14/01

NEW MEXICO
OIL CONSERVATION DIVISION

EXHIBIT 10
CASE NO. 11904

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

SUITE B
612 OLD SANTA FE TRAIL
SANTA FE, NEW MEXICO 87501

(505) 982-2043
(505) 982-2151 (FAX)

December 17, 1997

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

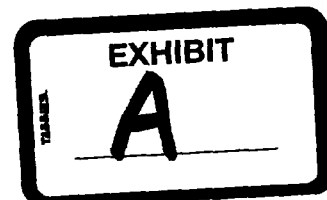
Enclosed is a copy of an application filed at the New Mexico Oil Conservation Division by Exxon Corporation requesting approval for lease commingling of Oil Center-Blinbry Pool production from the lease and lands described in the application. This matter will be heard at 8:15 a.m. on Thursday, January 8, 1998 at the Division's offices at 2040 South Pacheco Street, Santa Fe, New Mexico 87505. As an interest owner in the lease, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

Very truly yours,



James Bruce

Attorney for Exxon Corporation



CHAPARRAL ROYALTY CO
PO BOX 64467
HOUSTON TX 77266

ARCHBISHOPRIC OF NEW YORK
IN CARE OF
WILLIAM B WATSON
PO BOX 470425
FORT WORTH TX 76147-0425

COLONIAL ROYALTIES LIMITED
PARTNERSHIP
PO BOX 798
CONETA OK 74429-0790

GEOGYNE NEMINEE CORPORATION

MARJORIE M HUBZACH
TRUST U/A 6/23/77
DONALD M HUBZACH TR
NORTHERN TRUST CO TR
PO BOX 226270
DALLAS TX 75222-6270

THE HOME-STAKE OIL & GAS CORP.
15 E 5TH ST S 2800
TULSA OK 74103

THE HOME-STAKE ROYALTY CORP
15 E 5TH ST S 2800
TULSA OK 74103

GEORGE R JONES
P O BOX 10255
MIDLAND TX

79782

LYETH OIL TRUST
KANALY TRUST COMPANY
SUCCESSOR CORPORATE TR
4880 POST OAK PLACE DR 8139
HOUSTON TX 77027

LELAND STANFORD JUNIOR
UNIVERSITY BOARD OF TRUSTEES
C/O THE STANFORD MONT CO
MINERALS ADMINISTRATION
2770 SAND HILL RD
MENLO PARK CA 94025

MARILYN M LAM REVOCABLE TRUST
MARILYN M LAM TR
JAMES B LAM TR
PO BOX 29628
OKLAHOMA CITY OK 73186-0628

JIMMY B MOREY REVOCABLE TRUST
JIMMY B MOREY TR
MARY M MOREY TR
9830 N PENNSYLVANIA PL STE 189
OKLAHOMA CITY OK 73120

ELYSE SAUNDERS PATTERSON
TRUST S
EDWARD T HATHENY JR TR
COMMERCE BK KANSAS CITY TR
ATTN TRUST REAL EST DEPT
C/O COMMERCE BK KANSAS CITY
PO BOX 13366
KANSAS CITY MO 64199-3366

PENTAGON OIL CO
PO BOX 391
KILGORE TX 75463

PETRAST CORPORATION OF
AMERICA
C/O ACCT 207512
NATIONSBANK OF TEXAS NA
PO BOX 840728
DALLAS TX 75284-0728

338 LIMITED PARTNERSHIP
P O BOX 987
ROSEMELL NM

88201

FRIEDA H SCHACHNER
201 SAINT PAULS AVE
JERSEY CITY NJ 07304

JANE D SPEIGHT
PO BOX 1687
LOVINGTON NM 88268

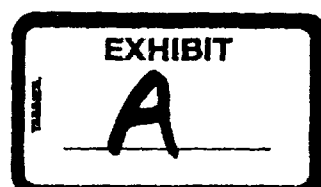
ONEZ NORMAN MOREY
TRUST
LIBERTY BANK & TRUST OF
OKLAHOMA CITY NA CO-TR
JAMES H MOREY CO-TR
TRUST NO 1141074008
PO BOX 3538
TULSA OK 74101

TEXACO EXPLORATION AND
PRODUCTION INC
PO BOX 280778
HOUSTON TX 77216-0778

THE TOLES COMPANY
P O BOX 1580
ROSEMELL NM 88202-1580

WILLIAM B WATSON AGENT INC
PO BOX 470425
FORT WORTH TX 76147-0425

ATLANTIC RICHFIELD COMPANY
PO BOX 91828
DALLAS TX 75391-0288



JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

SUITE B
612 OLD SANTA FE TRAIL
SANTA FE, NEW MEXICO 87501

(505) 982-2043
(505) 982-2151 (FAX)

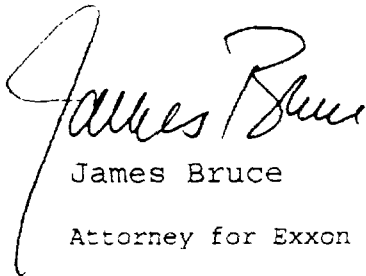
December 17, 1997

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Geodyne Nominee Corporation
c/o Samson Companies
2 West 2nd Street
Tulsa, Oklahoma 74103

Enclosed is a copy of an application filed at the New Mexico Oil Conservation Division by Exxon Corporation requesting approval for lease commingling of Oil Center-Blinbry Pool production from the lease and lands described in the application. This matter will be heard at 8:15 a.m. on Thursday, January 8, 1998 at the Division's offices at 2040 South Pacheco Street, Santa Fe, New Mexico 87505. As an interest owner in the lease, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

Very truly yours,

A handwritten signature in cursive script that reads "James Bruce". The signature is written in dark ink and is positioned above the printed name and title.

James Bruce

Attorney for Exxon Corporation

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to Atlantic Richfield Company	
Street & Number P. O. Box 910355	
Post Office, State, & ZIP Code Dallas, Tx 75391-0355	
Postage	\$ 55
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	
Postmark or Date	

P 329 636 485

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and 4a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kk, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz

3. Article Addressed to:
Chaparral Royalty Co.
P. O. Box 66687
Houston, Texas 77266

4a. Article Number
P 329 636 443

4b. Service Type
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
☐ COD

7. Date of Delivery
DEC 23 1994

8. Addressee's Address (Only if requested and fee is paid)
DEC 23 1994

5. Received By: (Print Name)
X [Signature]

6. Signature: (Addressee or Agent)
X [Signature]

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and 4a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kk, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz

3. Article Addressed to:
Atlantic Richfield Company
P. O. Box 910355
Dallas, Texas 75391-0355

4a. Article Number
P 329 636 485

4b. Service Type
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
☐ COD

7. Date of Delivery
DEC 22 1994

8. Addressee's Address (Only if requested and fee is paid)
DEC 22 1994

5. Received By: (Print Name)
X [Signature]

6. Signature: (Addressee or Agent)
X [Signature]

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to Chaparral Royalty Co.	
Street & Number P.O. Box 66687	
Post Office, State, & ZIP Code Houston, Tx. 77266	
Postage	\$ 55
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.80
Postmark or Date	

P 329 636 443

Thank you for using Return Receipt Service.

SENDER:

- Complete items 1 and 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

4a. Article Number: P 329 636 445

4b. Service Type:

Registered ☐ Certified ☒ Insured ☐ COD ☐

Express Mail ☐ Return Receipt for Merchandise ☐

7. Date of Delivery:

8. Addressee's Address (Only if requested and fee is paid):

5. Received By: (Print Name)

6. Signature: *Lisa Bowers*

Domestic Return Receipt

PS Form 3811, December 1994

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to: The Toles Company

Street & Number: P. O. Box 1300

Post Office, State, & ZIP Code: Roswell, NM 88202-1300

Postage: \$ 55

Certified Fee: 1.35

Special Delivery Fee:

Restricted Delivery Fee:

Return Receipt Showing to Whom & Date Delivered: 1.10

Return Receipt Showing to Whom, Date, & Addressee's Address:

TOTAL Postage & Fees: \$ 3.00

Postmark or Date:

PS Form 3800, April 1995

P 329 636 445

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to: Colonial Royalties Ltd Ptnsp

Street & Number: P. O. Box 790

Post Office, State, & ZIP Code: Coweta, Oklahoma 74429-0790

Postage: \$ 55

Certified Fee: 1.35

Special Delivery Fee:

Restricted Delivery Fee:

Return Receipt Showing to Whom & Date Delivered: NM 10

Return Receipt Showing to Whom, Date, & Addressee's Address:

TOTAL Postage & Fees: 1.35

Postmark or Date:

PS Form 3800, April 1995

Thank you for using Return Receipt Service.

SENDER:

- Complete items 1 and 2 for additional services.
- Complete items 3, 4, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

4a. Article Number: P 329 636 493

4b. Service Type:

Registered ☐ Certified ☒ Insured ☐ COD ☐

Express Mail ☐ Return Receipt for Merchandise ☐

7. Date of Delivery:

8. Addressee's Address (Only if requested and fee is paid):

5. Received By: (Print Name)

6. Signature: *Lisa Bowers*

Domestic Return Receipt

PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

SENDER:
I also wish to receive the following services (for an extra fee):
1. ☐ Addressed Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:
Frieda M. Schachner
201 Saint Pauls Avenue
Jersey City NJ 07306

4a. Article Number
P 329 636 480

4b. Service Type
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
Frieda M. Schachner

6. Signature: (Addressee or Agent)
Frieda M. Schachner

7. Date of Delivery
DEC 22 1994

8. Addressee's Address (Only if requested and fee is paid)
201 Saint Pauls Avenue
Jersey City NJ 07306

9. Postage
\$ 5.35

10. Certified Fee
1.35

11. Special Delivery Fee

12. Restricted Delivery Fee

13. Return Receipt Showing to Whom & Date Delivered

14. Return Receipt Showing to Whom, Date, & Addressee's Address

15. TOTAL Postage & Fees
\$ 6.70

16. Postmark or Date
DEC 22 1994

Domestic Return Receipt

PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

P 329 636 482

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

SENDER:
I also wish to receive the following services (for an extra fee):
1. ☐ Addressed Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:
Texaco Exploration and Production
P. O. Box 200773
Houston, Texas 77216-0773

4a. Article Number
P 329 636 482

4b. Service Type
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
Frieda M. Schachner

6. Signature: (Addressee or Agent)
Frieda M. Schachner

7. Date of Delivery
DEC 22 1994

8. Addressee's Address (Only if requested and fee is paid)
201 Saint Pauls Avenue
Jersey City NJ 07306

9. Postage
\$ 5.35

10. Certified Fee
1.35

11. Special Delivery Fee

12. Restricted Delivery Fee

13. Return Receipt Showing to Whom & Date Delivered

14. Return Receipt Showing to Whom, Date, & Addressee's Address

15. TOTAL Postage & Fees
\$ 6.70

16. Postmark or Date
DEC 22 1994

Domestic Return Receipt

PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

SENDER:
I also wish to receive the following services (for an extra fee):
1. ☐ Addressed Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:
Texaco Exp. & Prod. Inc.
P. O. Box 200773
Houston, Texas 77216-0773

4a. Article Number
P 329 636 482

4b. Service Type
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
Frieda M. Schachner

6. Signature: (Addressee or Agent)
Frieda M. Schachner

7. Date of Delivery
DEC 22 1994

8. Addressee's Address (Only if requested and fee is paid)
201 Saint Pauls Avenue
Jersey City NJ 07306

9. Postage
\$ 5.35

10. Certified Fee
1.35

11. Special Delivery Fee

12. Restricted Delivery Fee

13. Return Receipt Showing to Whom & Date Delivered

14. Return Receipt Showing to Whom, Date, & Addressee's Address

15. TOTAL Postage & Fees
\$ 6.70

16. Postmark or Date
DEC 22 1994

Domestic Return Receipt

PS Form 3811, December 1994

P 329 636 480

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

SENDER:
I also wish to receive the following services (for an extra fee):
1. ☐ Addressed Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:
Frieda M. Schachner
201 Saint Pauls Avenue
Jersey City NJ 07306

4a. Article Number
P 329 636 480

4b. Service Type
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
Frieda M. Schachner

6. Signature: (Addressee or Agent)
Frieda M. Schachner

7. Date of Delivery
DEC 22 1994

8. Addressee's Address (Only if requested and fee is paid)
201 Saint Pauls Avenue
Jersey City NJ 07306

9. Postage
\$ 5.35

10. Certified Fee
1.35

11. Special Delivery Fee

12. Restricted Delivery Fee

13. Return Receipt Showing to Whom & Date Delivered

14. Return Receipt Showing to Whom, Date, & Addressee's Address

15. TOTAL Postage & Fees
\$ 6.70

16. Postmark or Date
DEC 22 1994

Domestic Return Receipt

PS Form 3811, December 1994

PS Form 3800, April 1995

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to		June D. Speight	
Street & Number		P. O. Box 1607	
Post Office, State, & ZIP Code		Lovington, NM 88260	
Postage	\$	55	
Certified Fee		1.35	
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered		1.10	
Return Receipt Showing to Whom, Date, & Addressee's Address			
TOTAL Postage & Fees		3.00	
Postmark & Date		DEC 18 1994	

P 329 636 441

SENDER:

Complete items 1 and 2 for additional services.

Complete items 3, 4a, and 4b.
Print your name and address on the reverse of this form so that we can return this card to you.

Attach this form to the front of the mailpiece, or on the back if space does not permit.

Write "Return Receipt Requested" on the mailpiece below the article number.

The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

George R. Jones
P. O. Box 10253
Midland, Tx 79702

4a. Article Number

P 329 636 471

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☒ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-19-97

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

X

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER:

Complete items 1 and 2 for additional services.

Complete items 3, 4a, and 4b.
Print your name and address on the reverse of this form so that we can return this card to you.

Attach this form to the front of the mailpiece, or on the back if space does not permit.

Write "Return Receipt Requested" on the mailpiece below the article number.

The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

June D. Speight
P. O. Box 1607
Lovington, New Mexico 88260

4a. Article Number

P 329 636 441

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☒ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

18

5. Received By: (Print Name)

June D. Speight
X

6. Signature (Addressee or Agent)

X

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P 329 636 471

US Postal Service

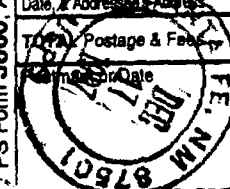
Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to		George R. Jones	
Street & Number		P. O. Box 10253	
Post Office, State, & ZIP Code		Midland, Tx 79702	
Postage	\$	55	
Certified Fee		1.35	
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered		1.10	
Return Receipt Showing to Whom, Date, & Addressee's Address			
TOTAL Postage & Fees	\$	3.00	
Postmark & Date		DEC 18 1994	

PS Form 3800, April 1995



SENDER:

- Complete items 1 and 4b. or additional services.
- Complete items 3, 4a, 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

Is your RETURN ADDRESS completed on the reverse side?

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to: Jimmy D. Morey Tr./Mary H. Morey
Jimmy D. Morey Revocable Trust

Street & Number
9320 N. Pennsylvania Pl. #159

Post Office, State, & ZIP Code
Oklahoma City, Ok 73120

Postage	\$ <u>55</u>
Certified Fee	<u>1.35</u>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	<u>1.10</u>
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	<u>61.35</u>
Postmark or Date	

3. Article Addressed to:
Jimmy D. Morey Revocable Trust
Marilyn M. Law Trust
James B. Law Tr.
P. O. Box 20628
Oklahoma City, Oklahoma

4a. Article Number
P 329 636 475

4b. Service Type
☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X [Signature]

6. Signature: (Addressee or Agent)

8. Addressee's Address (Only if requested and fee is paid)

P 329 636 475

SENDER:

- Complete items 1 and 4b. or additional services.
- Complete items 3, 4a, 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

Is your RETURN ADDRESS completed on the reverse side?

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to: Jimmy D. Morey Tr./Mary H. Morey
Jimmy D. Morey Revocable Trust

Street & Number
9320 N. Pennsylvania Pl. #159

Post Office, State, & ZIP Code
Oklahoma City, Ok. 73120

Postage	\$ <u>55</u>
Certified Fee	<u>1.35</u>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	<u>1.10</u>
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	<u>61.35</u>
Postmark or Date	

3. Article Addressed to:
Jimmy D. Morey Revocable Trust
Jimmy D. Morey Tr
Marilyn M. Law Trust
3230 N. Pennsylvania Pl. #159
Oklahoma City, Ok. 73120

4a. Article Number
P 329 636 475

4b. Service Type
☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X [Signature]

6. Signature: (Addressee or Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3800, December 1994

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to: Marilyn M. Law Revocable Tr.

Street & Number
P. O. Box 20628

Post Office, State, & ZIP Code
Oklahoma City, Ok 73156-0628

Postage	\$ <u>55</u>
Certified Fee	<u>1.35</u>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	<u>1.10</u>
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	<u>57.45</u>
Postmark or Date	

3. Article Addressed to:
Marilyn M. Law, Revocable Trust
Marilyn M. Law Trust
James B. Law Tr.
P. O. Box 20628
Oklahoma City, Oklahoma

4a. Article Number
P 329636 474

4b. Service Type
☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X [Signature]

6. Signature: (Addressee or Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3800, April 1995

PS Form 3811, December 1994

Domestic Return Receipt

Domestic Return Receipt

P 329 636 474

Thank you for using Return Receipt Service.

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to: Marilyn M. Law Revocable Tr.

Street & Number
P. O. Box 20628

Post Office, State, & ZIP Code
Oklahoma City, Ok 73156-0628

Postage	\$ <u>55</u>
Certified Fee	<u>1.35</u>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	<u>1.10</u>
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	<u>57.45</u>
Postmark or Date	

3. Article Addressed to:
Marilyn M. Law, Revocable Trust
Marilyn M. Law Trust
James B. Law Tr.
P. O. Box 20628
Oklahoma City, Oklahoma

4a. Article Number
P 329636 474

4b. Service Type
☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X [Signature]

6. Signature: (Addressee or Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3800, April 1995

PS Form 3811, December 1994

Domestic Return Receipt

Domestic Return Receipt

P 329 636 474

Thank you for using Return Receipt Service.

SENDER:

- Complete items 1 and/or additional services.
- Complete items 3, 4a, 4b, 4c, 4d, 4e, 4f, 4g, 4h, 4i, 4j, 4k, 4l, 4m, 4n, 4o, 4p, 4q, 4r, 4s, 4t, 4u, 4v, 4w, 4x, 4y, 4z, 4aa, 4ab, 4ac, 4ad, 4ae, 4af, 4ag, 4ah, 4ai, 4aj, 4ak, 4al, 4am, 4an, 4ao, 4ap, 4aq, 4ar, 4as, 4at, 4au, 4av, 4aw, 4ax, 4ay, 4az, 4ba, 4bb, 4bc, 4bd, 4be, 4bf, 4bg, 4bh, 4bi, 4bj, 4bk, 4bl, 4bm, 4bn, 4bo, 4bp, 4bq, 4br, 4bs, 4bt, 4bu, 4bv, 4bw, 4bx, 4by, 4bz, 4ca, 4cb, 4cc, 4cd, 4ce, 4cf, 4cg, 4ch, 4ci, 4cj, 4ck, 4cl, 4cm, 4cn, 4co, 4cp, 4cq, 4cr, 4cs, 4ct, 4cu, 4cv, 4cw, 4cx, 4cy, 4cz, 4da, 4db, 4dc, 4dd, 4de, 4df, 4dg, 4dh, 4di, 4dj, 4dk, 4dl, 4dm, 4dn, 4do, 4dp, 4dq, 4dr, 4ds, 4dt, 4du, 4dv, 4dw, 4dx, 4dy, 4dz, 4ea, 4eb, 4ec, 4ed, 4ee, 4ef, 4eg, 4eh, 4ei, 4ej, 4ek, 4el, 4em, 4en, 4eo, 4ep, 4eq, 4er, 4es, 4et, 4eu, 4ev, 4ew, 4ex, 4ey, 4ez, 4fa, 4fb, 4fc, 4fd, 4fe, 4ff, 4fg, 4fh, 4fi, 4fj, 4fk, 4fl, 4fm, 4fn, 4fo, 4fp, 4fq, 4fr, 4fs, 4ft, 4fu, 4fv, 4fw, 4fx, 4fy, 4fz, 4ga, 4gb, 4gc, 4gd, 4ge, 4gf, 4gg, 4gh, 4gi, 4gj, 4gk, 4gl, 4gm, 4gn, 4go, 4gp, 4gq, 4gr, 4gs, 4gt, 4gu, 4gv, 4gw, 4gx, 4gy, 4gz, 4ha, 4hb, 4hc, 4hd, 4he, 4hf, 4hg, 4hi, 4hj, 4hk, 4hl, 4hm, 4hn, 4ho, 4hp, 4hq, 4hr, 4hs, 4ht, 4hu, 4hv, 4hw, 4hx, 4hy, 4hz, 4ia, 4ib, 4ic, 4id, 4ie, 4if, 4ig, 4ih, 4ii, 4ij, 4ik, 4il, 4im, 4in, 4io, 4ip, 4iq, 4ir, 4is, 4it, 4iu, 4iv, 4iw, 4ix, 4iy, 4iz, 4ja, 4jb, 4jc, 4jd, 4je, 4jf, 4jg, 4jh, 4ji, 4jj, 4jk, 4jl, 4jm, 4jn, 4jo, 4jp, 4jq, 4jr, 4js, 4jt, 4ju, 4jv, 4jw, 4jx, 4jy, 4jz, 4ka, 4kb, 4kc, 4kd, 4ke, 4kf, 4kg, 4kh, 4ki, 4kj, 4kk, 4kl, 4km, 4kn, 4ko, 4kp, 4kq, 4kr, 4ks, 4kt, 4ku, 4kv, 4kw, 4kx, 4ky, 4kz, 4la, 4lb, 4lc, 4ld, 4le, 4lf, 4lg, 4lh, 4li, 4lj, 4lk, 4ll, 4lm, 4ln, 4lo, 4lp, 4lq, 4lr, 4ls, 4lt, 4lu, 4lv, 4lw, 4lx, 4ly, 4lz, 4ma, 4mb, 4mc, 4md, 4me, 4mf, 4mg, 4mh, 4mi, 4mj, 4mk, 4ml, 4mm, 4mn, 4mo, 4mp, 4mq, 4mr, 4ms, 4mt, 4mu, 4mv, 4mw, 4mx, 4my, 4mz, 4na, 4nb, 4nc, 4nd, 4ne, 4nf, 4ng, 4nh, 4ni, 4nj, 4nk, 4nl, 4nm, 4nn, 4no, 4np, 4nq, 4nr, 4ns, 4nt, 4nu, 4nv, 4nw, 4nx, 4ny, 4nz, 4oa, 4ob, 4oc, 4od, 4oe, 4of, 4og, 4oh, 4oi, 4oj, 4ok, 4ol, 4om, 4on, 4oo, 4op, 4oq, 4or, 4os, 4ot, 4ou, 4ov, 4ow, 4ox, 4oy, 4oz, 4pa, 4pb, 4pc, 4pd, 4pe, 4pf, 4pg, 4ph, 4pi, 4pj, 4pk, 4pl, 4pm, 4pn, 4po, 4pp, 4pq, 4pr, 4ps, 4pt, 4pu, 4pv, 4pw, 4px, 4py, 4pz, 4qa, 4qb, 4qc, 4qd, 4qe, 4qf, 4qg, 4qh, 4qi, 4qj, 4qk, 4ql, 4qm, 4qn, 4qo, 4qp, 4qq, 4qr, 4qs, 4qt, 4qu, 4qv, 4qw, 4qx, 4qy, 4qz, 4ra, 4rb, 4rc, 4rd, 4re, 4rf, 4rg, 4rh, 4ri, 4rj, 4rk, 4rl, 4rm, 4rn, 4ro, 4rp, 4rq, 4rr, 4rs, 4rt, 4ru, 4rv, 4rw, 4rx, 4ry, 4rz, 4sa, 4sb, 4sc, 4sd, 4se, 4sf, 4sg, 4sh, 4si, 4sj, 4sk, 4sl, 4sm, 4sn, 4so, 4sp, 4sq, 4sr, 4ss, 4st, 4su, 4sv, 4sw, 4sx, 4sy, 4sz, 4ta, 4tb, 4tc, 4td, 4te, 4tf, 4tg, 4th, 4ti, 4tj, 4tk, 4tl, 4tm, 4tn, 4to, 4tp, 4tq, 4tr, 4ts, 4tt, 4tu, 4tv, 4tw, 4tx, 4ty, 4tz, 4ua, 4ub, 4uc, 4ud, 4ue, 4uf, 4ug, 4uh, 4ui, 4uj, 4uk, 4ul, 4um, 4un, 4uo, 4up, 4uq, 4ur, 4us, 4ut, 4uu, 4uv, 4uw, 4ux, 4uy, 4uz, 4va, 4vb, 4vc, 4vd, 4ve, 4vf, 4vg, 4vh, 4vi, 4vj, 4vk, 4vl, 4vm, 4vn, 4vo, 4vp, 4vq, 4vr, 4vs, 4vt, 4vu, 4vv, 4vw, 4vx, 4vy, 4vz, 4wa, 4wb, 4wc, 4wd, 4we, 4wf, 4wg, 4wh, 4wi, 4wj, 4wk, 4wl, 4wm, 4wn, 4wo, 4wp, 4wq, 4wr, 4ws, 4wt, 4wu, 4wv, 4ww, 4wx, 4wy, 4wz, 4xa, 4xb, 4xc, 4xd, 4xe, 4xf, 4xg, 4xh, 4xi, 4xj, 4xk, 4xl, 4xm, 4xn, 4xo, 4xp, 4xq, 4xr, 4xs, 4xt, 4xu, 4xv, 4xw, 4xx, 4xy, 4xz, 4ya, 4yb, 4yc, 4yd, 4ye, 4yf, 4yg, 4yh, 4yi, 4yj, 4yk, 4yl, 4ym, 4yn, 4yo, 4yp, 4yq, 4yr, 4ys, 4yt, 4yu, 4yv, 4yw, 4yx, 4yy, 4yz, 4za, 4zb, 4zc, 4zd, 4ze, 4zf, 4zg, 4zh, 4zi, 4zj, 4zk, 4zl, 4zm, 4zn, 4zo, 4zp, 4zq, 4zr, 4zs, 4zt, 4zu, 4zv, 4zw, 4zx, 4zy, 4zz
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

Is your RETURN ADDRESS completed on the reverse side?

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail. (See reverse)
Do not use for return receipt for Registered Mail.

Sent to
Elyse Saunders Patterson Trust
c/o Commerce Bank Kansas City

3. Article Addressed to:
Edward T. Matheny Jr. Trust
Attn: Trust Real Estate Dept.
c/i Commerce Bank Kansas City
P. O. Box 13366
Kansas City, Mo. 64199-3366

4a. Article Number
P 329 636 476

4b. Service Type
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
7. Date of Delivery
DEC 23 1997

4c. Certified
☒ Certified
☐ Insured
☐ COD

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)
Rodney McClinton

6. Signature: (Addressee or Agent)
X Rodney McClinton

Postage \$ 5.55
Certified Fee 1.35
Special Delivery Fee
Restricted Delivery Fee
Return Receipt Showing to Whom & Date Delivered 1.10
Return Receipt Showing to Whom, Date, & Addressee's Address
TOTAL Postage & Fees 3.90
Postage & Date

PS Form 3800, April 1995

SENDER:

- Complete items 1 and/or additional services.
- Complete items 3, 4a, 4b, 4c, 4d, 4e, 4f, 4g, 4h, 4i, 4j, 4k, 4l, 4m, 4n, 4o, 4p, 4q, 4r, 4s, 4t, 4u, 4v, 4w, 4x, 4y, 4z, 4aa, 4ab, 4ac, 4ad, 4ae, 4af, 4ag, 4ah, 4ai, 4aj, 4ak, 4al, 4am, 4an, 4ao, 4ap, 4aq, 4ar, 4as, 4at, 4au, 4av, 4aw, 4ax, 4ay, 4az, 4ba, 4bb, 4bc, 4bd, 4be, 4bf, 4bg, 4bh, 4bi, 4bj, 4bk, 4bl, 4bm, 4bn, 4bo, 4bp, 4bq, 4br, 4bs, 4bt, 4bu, 4bv, 4bw, 4bx, 4by, 4bz, 4ca, 4cb, 4cc, 4cd, 4ce, 4cf, 4cg, 4ch, 4ci, 4cj, 4ck, 4cl, 4cm, 4cn, 4co, 4cp, 4cq, 4cr, 4cs, 4ct, 4cu, 4cv, 4cw, 4cx, 4cy, 4cz, 4da, 4db, 4dc, 4dd, 4de, 4df, 4dg, 4dh, 4di, 4dj, 4dk, 4dl, 4dm, 4dn, 4do, 4dp, 4dq, 4dr, 4ds, 4dt, 4du, 4dv, 4dw, 4dx, 4dy, 4dz, 4ea, 4eb, 4ec, 4ed, 4ee, 4ef, 4eg, 4eh, 4ei, 4ej, 4ek, 4el, 4em, 4en, 4eo, 4ep, 4eq, 4er, 4es, 4et, 4eu, 4ev, 4ew, 4ex, 4ey, 4ez, 4fa, 4fb, 4fc, 4fd, 4fe, 4ff, 4fg, 4fh, 4fi, 4fj, 4fk, 4fl, 4fm, 4fn, 4fo, 4fp, 4fq, 4fr, 4fs, 4ft, 4fu, 4fv, 4fw, 4fx, 4fy, 4fz, 4ga, 4gb, 4gc, 4gd, 4ge, 4gf, 4gg, 4gh, 4gi, 4gj, 4gk, 4gl, 4gm, 4gn, 4go, 4gp, 4gq, 4gr, 4gs, 4gt, 4gu, 4gv, 4gw, 4gx, 4gy, 4gz, 4ha, 4hb, 4hc, 4hd, 4he, 4hf, 4hg, 4hi, 4hj, 4hk, 4hl, 4hm, 4hn, 4ho, 4hp, 4hq, 4hr, 4hs, 4ht, 4hu, 4hv, 4hw, 4hx, 4hy, 4hz, 4ia, 4ib, 4ic, 4id, 4ie, 4if, 4ig, 4ih, 4ii, 4ij, 4ik, 4il, 4im, 4in, 4io, 4ip, 4iq, 4ir, 4is, 4it, 4iu, 4iv, 4iw, 4ix, 4iy, 4iz, 4ja, 4jb, 4jc, 4jd, 4je, 4jf, 4jg, 4jh, 4ji, 4jj, 4jk, 4jl, 4jm, 4jn, 4jo, 4jp, 4jq, 4jr, 4js, 4jt, 4ju, 4jv, 4jw, 4jx, 4jy, 4jz, 4ka, 4kb, 4kc, 4kd, 4ke, 4kf, 4kg, 4kh, 4ki, 4kj, 4kk, 4kl, 4km, 4kn, 4ko, 4kp, 4kq, 4kr, 4ks, 4kt, 4ku, 4kv, 4kw, 4kx, 4ky, 4kz, 4la, 4lb, 4lc, 4ld, 4le, 4lf, 4lg, 4lh, 4li, 4lj, 4lk, 4ll, 4lm, 4ln, 4lo, 4lp, 4lq, 4lr, 4ls, 4lt, 4lu, 4lv, 4lw, 4lx, 4ly, 4lz, 4ma, 4mb, 4mc, 4md, 4me, 4mf, 4mg, 4mh, 4mi, 4mj, 4mk, 4ml, 4mm, 4mn, 4mo, 4mp, 4mq, 4mr, 4ms, 4mt, 4mu, 4mv, 4mw, 4mx, 4my, 4mz, 4na, 4nb, 4nc, 4nd, 4ne, 4nf, 4ng, 4nh, 4ni, 4nj, 4nk, 4nl, 4nm, 4nn, 4no, 4np, 4nq, 4nr, 4ns, 4nt, 4nu, 4nv, 4nw, 4nx, 4ny, 4nz, 4oa, 4ob, 4oc, 4od, 4oe, 4of, 4og, 4oh, 4oi, 4oj, 4ok, 4ol, 4om, 4on, 4oo, 4op, 4oq, 4or, 4os, 4ot, 4ou, 4ov, 4ow, 4ox, 4oy, 4oz, 4pa, 4pb, 4pc, 4pd, 4pe, 4pf, 4pg, 4ph, 4pi, 4pj, 4pk, 4pl, 4pm, 4pn, 4po, 4pp, 4pq, 4pr, 4ps, 4pt, 4pu, 4pv, 4pw, 4px, 4py, 4pz, 4qa, 4qb, 4qc, 4qd, 4qe, 4qf, 4qg, 4qh, 4qi, 4qj, 4qk, 4ql, 4qm, 4qn, 4qo, 4qp, 4qq, 4qr, 4qs, 4qt, 4qu, 4qv, 4qw, 4qx, 4qy, 4qz, 4ra, 4rb, 4rc, 4rd, 4re, 4rf, 4rg, 4rh, 4ri, 4rj, 4rk, 4rl, 4rm, 4rn, 4ro, 4rp, 4rq, 4rr, 4rs, 4rt, 4ru, 4rv, 4rw, 4rx, 4ry, 4rz, 4sa, 4sb, 4sc, 4sd, 4se, 4sf, 4sg, 4sh, 4si, 4sj, 4sk, 4sl, 4sm, 4sn, 4so, 4sp, 4sq, 4sr, 4ss, 4st, 4su, 4sv, 4sw, 4sx, 4sy, 4sz, 4ta, 4tb, 4tc, 4td, 4te, 4tf, 4tg, 4th, 4ti, 4tj, 4tk, 4tl, 4tm, 4tn, 4to, 4tp, 4tq, 4tr, 4ts, 4tt, 4tu, 4tv, 4tw, 4tx, 4ty, 4tz, 4ua, 4ub, 4uc, 4ud, 4ue, 4uf, 4ug, 4uh, 4ui, 4uj, 4uk, 4ul, 4um, 4un, 4uo, 4up, 4uq, 4ur, 4us, 4ut, 4uu, 4uv, 4uw, 4ux, 4uy, 4uz, 4va, 4vb, 4vc, 4vd, 4ve, 4vf, 4vg, 4vh, 4vi, 4vj, 4vk, 4vl, 4vm, 4vn, 4vo, 4vp, 4vq, 4vr, 4vs, 4vt, 4vu, 4vv, 4vw, 4vx, 4vy, 4vz, 4wa, 4wb, 4wc, 4wd, 4we, 4wf, 4wg, 4wh, 4wi, 4wj, 4wk, 4wl, 4wm, 4wn, 4wo, 4wp, 4wq, 4wr, 4ws, 4wt, 4wu, 4wv, 4ww, 4wx, 4wy, 4wz, 4xa, 4xb, 4xc, 4xd, 4xe, 4xf, 4xg, 4xh, 4xi, 4xj, 4xk, 4xl, 4xm, 4xn, 4xo, 4xp, 4xq, 4xr, 4xs, 4xt, 4xu, 4xv, 4xw, 4xx, 4xy, 4xz, 4ya, 4yb, 4yc, 4yd, 4ye, 4yf, 4yg, 4yh, 4yi, 4yj, 4yk, 4yl, 4ym, 4yn, 4yo, 4yp, 4yq, 4yr, 4ys, 4yt, 4yu, 4yv, 4yw, 4yx, 4yy, 4yz, 4za, 4zb, 4zc, 4zd, 4ze, 4zf, 4zg, 4zh, 4zi, 4zj, 4zk, 4zl, 4zm, 4zn, 4zo, 4zp, 4zq, 4zr, 4zs, 4zt, 4zu, 4zv, 4zw, 4zx, 4zy, 4zz
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail. (See reverse)
Do not use for return receipt for Registered Mail.

Sent to
Elyse Saunders Patterson Trust
c/o Commerce Bank Kansas City

3. Article Addressed to:
Edward T. Matheny Jr. Trust
Attn: Trust Real Estate Dept.
c/i Commerce Bank Kansas City
P. O. Box 13366
Kansas City, Mo. 64199-3366

4a. Article Number
P 329 636 476

4b. Service Type
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
7. Date of Delivery
DEC 23 1997

4c. Certified
☒ Certified
☐ Insured
☐ COD

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)
Rodney McClinton

6. Signature: (Addressee or Agent)
X Rodney McClinton

Postage \$ 5.55
Certified Fee 1.35
Special Delivery Fee
Restricted Delivery Fee
Return Receipt Showing to Whom & Date Delivered 1.10
Return Receipt Showing to Whom, Date, & Addressee's Address
TOTAL Postage & Fees 3.90
Postage & Date

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail. (See reverse)
Do not use for return receipt for Registered Mail.

Sent to
Liberty Bank & Trust Of Ok

3. Article Addressed to:
James M. Morey CoTr
Trust No. 1143074006
P. O. Box 3538
Tulsa, Oklahoma 74101

4a. Article Number
P 329 636 481

4b. Service Type
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
7. Date of Delivery
DEC 23 1997

4c. Certified
☒ Certified
☐ Insured
☐ COD

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)
BENJAMIN

6. Signature: (Addressee or Agent)
X B

Postage \$ 5.55
Certified Fee 1.35
Special Delivery Fee
Restricted Delivery Fee
Return Receipt Showing to Whom & Date Delivered 1.10
Return Receipt Showing to Whom, Date, & Addressee's Address
TOTAL Postage & Fees 3.90
Postage & Date

PS Form 3800, April 1995

Thank you for using Return Receipt Service.

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail. (See reverse)
Do not use for return receipt for Registered Mail.

Sent to
Liberty Bank & Trust Of Ok

3. Article Addressed to:
James M. Morey CoTr
Trust No. 1143074006
P. O. Box 3538
Tulsa, Oklahoma 74101

4a. Article Number
P 329 636 481

4b. Service Type
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
7. Date of Delivery
DEC 23 1997

4c. Certified
☒ Certified
☐ Insured
☐ COD

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)
BENJAMIN

6. Signature: (Addressee or Agent)
X B

Postage \$ 5.55
Certified Fee 1.35
Special Delivery Fee
Restricted Delivery Fee
Return Receipt Showing to Whom & Date Delivered 1.10
Return Receipt Showing to Whom, Date, & Addressee's Address
TOTAL Postage & Fees 3.90
Postage & Date

PS Form 3800, April 1995

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

SENDER:

- Complete items 1 and 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

William M. Watson / Agent Inc.
P. O. Box 470425
Fort Worth, TX 76147-0425

4a. Article Number

P 329 636 484

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery

12/20/97

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

William M. Watson

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

Domestic Return Receipt

**US Postal Service
Receipt for Certified Mail**

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to: Lyeth Oil Trust Kanaly Trust Company	
Street & Number 4550 Post Oak Place Dr.	
Post Office, State, & ZIP Code Houston, Tx 77027 #139	
Postage	\$.55
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.40
Postmark per Date	DEC 20 1997

PS Form 3800, April 1995

SENDER:

- Complete items 1 and 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Lyeth Oil Trust
Kanaly Trust Company
4550 Post Oak Place Dr. #139
Houston, Texas 77027

4a. Article Number

P 329 636 472

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery

12-22-97

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

William M. Watson

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

PS Form 3800 April 1995

**US Postal Service
Receipt for Certified Mail**

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to: Wm. M. Watson Agent Inc	
Street & Number P. O. Box 470425	
Post Office, State, & ZIP Code Ft. Worth, Tx 76147-0425	
Postage	\$.55
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.40
Postmark per Date	DEC 20 1997

P 329 636 484

Thank you for using Return Receipt Service

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to: **Archbishopric of New York**
P. O. Box 470425
Ft. Worth, Tx 76147-0425

Postage: \$ 3.35
Certified Fee: 1.35
Special Delivery Fee:
Restricted Delivery Fee:
Return Receipt Showing to Whom & Date Delivered: 1.10
Return Receipt Showing to Whom, Date, & Addressee's Address:
TOTAL Postage & Fees: \$ 4.70
Postmaster's Date: 12/22/94

3. Article Addressed to: **Archbishopric of New York**
4a. Article Number: **P 329 636 444**
4b. Service Type:
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
7. Date of Delivery: **DEC 22 1994**
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) **WILLIAM B. WATSON**
6. Signature: (Addressee or Agent) **WILLIAM B. WATSON**

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ to receive the following services (for an extra fee):
2. ☐ Addressee's Address
3. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ Complete items 1 and 2 for additional services.
2. ☐ Complete items 3, 4a, a., and 4b.
3. ☐ Print your name and address on the reverse of this form so that we can return this card to you.
4. ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. ☐ Write "Return Receipt Requested" on the mailpiece below the article number.
6. ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

1. ☐ to receive the following services (for an extra fee):
2. ☐ Addressee's Address
3. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ Complete items 1 and 2 for additional services.
2. ☐ Complete items 3, 4a, a., and 4b.
3. ☐ Print your name and address on the reverse of this form so that we can return this card to you.
4. ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. ☐ Write "Return Receipt Requested" on the mailpiece below the article number.
6. ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

Thank you for using Return Receipt Service

PS Form 3811, December 1994

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to: **Donald W. Huszagh Tr**
Northern Trust Co Tr
P. O. Box 226270
Dallas, Tx 75222-6270

Postage: \$ 55
Certified Fee: 1.35
Special Delivery Fee:
Restricted Delivery Fee:
Return Receipt Showing to Whom & Date Delivered: 1.10
Return Receipt Showing to Whom, Date, & Addressee's Address:
TOTAL Postage & Fees: \$ 56.35
Postmaster's Date: 12/22/94

3. Article Addressed to: **Donald W. Huszagh Tr**
4a. Article Number: **P 329 636 447**
4b. Service Type:
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
7. Date of Delivery: **DEC 22 1994**
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) **WILLIAM B. WATSON**
6. Signature: (Addressee or Agent) **WILLIAM B. WATSON**

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ to receive the following services (for an extra fee):
2. ☐ Addressee's Address
3. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ Complete items 1 and 2 for additional services.
2. ☐ Complete items 3, 4a, a., and 4b.
3. ☐ Print your name and address on the reverse of this form so that we can return this card to you.
4. ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. ☐ Write "Return Receipt Requested" on the mailpiece below the article number.
6. ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

1. ☐ to receive the following services (for an extra fee):
2. ☐ Addressee's Address
3. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ Complete items 1 and 2 for additional services.
2. ☐ Complete items 3, 4a, a., and 4b.
3. ☐ Print your name and address on the reverse of this form so that we can return this card to you.
4. ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. ☐ Write "Return Receipt Requested" on the mailpiece below the article number.
6. ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

Thank you for using Return Receipt Service

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to: **Archbishopric of New York**
P. O. Box 470425
Ft. Worth, Tx 76147-0425

Postage: \$ 3.35
Certified Fee: 1.35
Special Delivery Fee:
Restricted Delivery Fee:
Return Receipt Showing to Whom & Date Delivered: 1.10
Return Receipt Showing to Whom, Date, & Addressee's Address:
TOTAL Postage & Fees: \$ 4.70
Postmaster's Date: 12/22/94

3. Article Addressed to: **Archbishopric of New York**
4a. Article Number: **P 329 636 444**
4b. Service Type:
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
7. Date of Delivery: **DEC 22 1994**
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) **WILLIAM B. WATSON**
6. Signature: (Addressee or Agent) **WILLIAM B. WATSON**

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ to receive the following services (for an extra fee):
2. ☐ Addressee's Address
3. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ Complete items 1 and 2 for additional services.
2. ☐ Complete items 3, 4a, a., and 4b.
3. ☐ Print your name and address on the reverse of this form so that we can return this card to you.
4. ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. ☐ Write "Return Receipt Requested" on the mailpiece below the article number.
6. ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

1. ☐ to receive the following services (for an extra fee):
2. ☐ Addressee's Address
3. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ Complete items 1 and 2 for additional services.
2. ☐ Complete items 3, 4a, a., and 4b.
3. ☐ Print your name and address on the reverse of this form so that we can return this card to you.
4. ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. ☐ Write "Return Receipt Requested" on the mailpiece below the article number.
6. ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

Thank you for using Return Receipt Service

PS Form 3811, December 1994

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to: **Donald W. Huszagh Tr**
Northern Trust Co Tr
P. O. Box 226270
Dallas, Tx 75222-6270

Postage: \$ 55
Certified Fee: 1.35
Special Delivery Fee:
Restricted Delivery Fee:
Return Receipt Showing to Whom & Date Delivered: 1.10
Return Receipt Showing to Whom, Date, & Addressee's Address:
TOTAL Postage & Fees: \$ 56.35
Postmaster's Date: 12/22/94

3. Article Addressed to: **Donald W. Huszagh Tr**
4a. Article Number: **P 329 636 447**
4b. Service Type:
☐ Registered
☐ Express Mail
☒ Return Receipt for Merchandise
7. Date of Delivery: **DEC 22 1994**
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) **WILLIAM B. WATSON**
6. Signature: (Addressee or Agent) **WILLIAM B. WATSON**

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ to receive the following services (for an extra fee):
2. ☐ Addressee's Address
3. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ Complete items 1 and 2 for additional services.
2. ☐ Complete items 3, 4a, a., and 4b.
3. ☐ Print your name and address on the reverse of this form so that we can return this card to you.
4. ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. ☐ Write "Return Receipt Requested" on the mailpiece below the article number.
6. ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

1. ☐ to receive the following services (for an extra fee):
2. ☐ Addressee's Address
3. ☐ Restricted Delivery
Consult postmaster for fee.

1. ☐ Complete items 1 and 2 for additional services.
2. ☐ Complete items 3, 4a, a., and 4b.
3. ☐ Print your name and address on the reverse of this form so that we can return this card to you.
4. ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. ☐ Write "Return Receipt Requested" on the mailpiece below the article number.
6. ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

SENDER:

- Complete items 1 and 2 for additional services.
- Complete items 3, 4a, 4b, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

Is your RETURN ADDRESS completed on the reverse side?

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to Home-Stake Royalty Corp.	
Street & Number 15 E. 5th St., Suite 2800	
Post Office, State, & ZIP Code Tulsa, Ok 74103	
Postage	\$ 5.55
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 7.00
Postmark & Date	DEC 2 2 1997

PS Form 3800, April 1995

P 329 636 449

I also wish to receive the following services (for an extra fee):	
1. ☐ Addressee's Address	
2. ☐ Restricted Delivery	
Consult postmaster for fee.	
4a. Article Number	P 329 636 448
4b. Service Type	☒ Certified ☐ Insured ☐ COD
5. Received By: (Print Name)	
6. Signature (Addressee or Agent)	<i>Tulua Moore</i>
7. Date of Delivery	DEC 2 2 1997
8. Addressee's Address (Only if requested and fee is paid)	

Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER:

- Complete items 1 and 2 for additional services.
- Complete items 3, 4a, 4b, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

I also wish to receive the following services (for an extra fee):	
1. ☐ Addressee's Address	
2. ☐ Restricted Delivery	
Consult postmaster for fee.	
4a. Article Number	P 329 636 449
4b. Service Type	☒ Certified ☐ Insured ☐ COD
5. Received By: (Print Name)	
6. Signature (Addressee or Agent)	<i>Tulua Moore</i>
7. Date of Delivery	DEC 2 2 1997
8. Addressee's Address (Only if requested and fee is paid)	

Domestic Return Receipt

PS Form 3811, December 1994

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to Home-Stake Oil & Gas	
Street & Number 15 E. 5th, Suite 2800	
Post Office, State, & ZIP Code Tulsa, Oklahoma 74103	
Postage	\$ 5.55
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 7.00
Postmark & Date	DEC 2 2 1997

PS Form 3800, April 1995

P 329 636 448

Domestic Return Receipt

Thank you for using Return Receipt Service.

Fold at line over top of envelope

SENDER:

Is your RETURN ADDRESS completed on the reverse side?

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
 2. ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

SSG Limited Partnership
P. O. Box 967
Roswell, NM 88201

4a. Article Number

P 329 636 479

4b. Service Type

- ☐ Registered ☒ Certified
- ☐ Express Mail ☐ Insured
- ☒ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

SSG Limited Partnership

6. Signature: (Addressee or Agent)

SSG Limited Partnership
X by Sue S. Noland

Domestic Return Receipt

PS Form 3800, December 1994 Gen. Pub.

Thank you for using Return Receipt Service.

P 329 636 479

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to	
SSG Limited Partnership	
Street & Number	
P. O. Box 967	
Post Office, State, & ZIP Code	
Roswell NM 88201	
Postage	\$ 55
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom & Date Delivered (Addressee's Address)	
TOTAL Postage & Fees	3.00
Postmark or Date	

PS Form 3800 April 1995