

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

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Seely (WFC)
46882-0001
Postage \$ 1.80
Certified Fee 2.10
Return Receipt Fee (Endorsement Required) 1.50
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 4.40



Sent To
Boswell Interests Ltd.
1320 Lake Street
Fort Worth, Texas 76102

- 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:

Boswell Interests Ltd.
1320 Lake Street
Fort Worth, Texas 76102

A. Received by (Please Print Clearly) B. Date of Delivery
6-10-02

C. Signature
X Armando Lopez
 Agent
 Addressee

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 (Copy fr) 7001 1140 0002 5600 8050

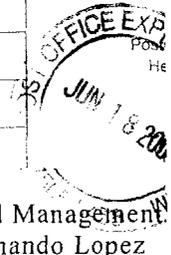
PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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

WFC/Seely
Postage \$.80
Certified Fee 2.10
Return Receipt Fee (Endorsement Required) 1.50
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 4.40



Sent To
Bureau of Land Management
Attention: Armando Lopez
2909 W. 2nd Street
Roswell, New Mexico 88201

- 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:

Bureau of Land Management
Attention: Armando Lopez
2909 W. 2nd Street
Roswell, New Mexico 88201

A. Received by (Please Print Clearly) B. Date of Delivery
6-15-02

C. Signature
X Armando Lopez
 Agent
 Addressee

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 (Copy fr) 7001 1140 0002 5600 8210

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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

Seely (WFC)
46882-0001
Postage \$ 1.80
Certified Fee 2.10
Return Receipt Fee (Endorsement Required) 1.50
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 4.40



Sent To
Burnett Oil Company
801 Cherry Street,
Fort Worth, Texas 76102

- 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:

Burnett Oil Company
801 Cherry Street, Suite 1500
Fort Worth, Texas 76102

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature
X Armando Lopez
 Agent
 Addressee

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 (Copy from) 7001 1140 0002 5600 8067

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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

Seely (wfc) Postage 46882.0001	\$ 1.80
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.40



Sent To
 CEB Oil Company
 1320 Lake Street
 Fort Worth, Texas 76102

PS Form 3800, J

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:
 CEB Oil Company
 1320 Lake Street
 Fort Worth, Texas 76102

2. Article Number (7001 1140 0002 5600 8074

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 6-24-02

C. Signature
 Margo Hooper Agent
 Addressee

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

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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

Seely (wfc) Postage 46882.0001	\$ 1.80
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.40



Sent To
 Commissioner of Public Lands
 New Mexico State Land Office
 Attention: Pete Martinez
 Post Office Box 1148
 Santa Fe, NM 87504-114

PS Form 3800, J

- 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:
 Commissioner of Public Lands
 New Mexico State Land Office
 Attention: Pete Martinez
 Post Office Box 1148
 Santa Fe, NM 87504-1148

2. Article Number (Copy) 7001 1140 0002 5600 8128

A. Received by (Please Print Clearly) B. Date of Delivery
 JUN 19 2002

C. Signature
 X [Signature] Agent
 Addressee

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

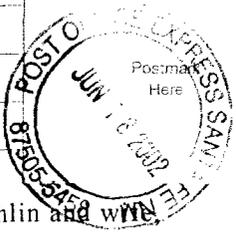
3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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

Seely (wfc) Postage 46882.0001	\$ 1.80
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.40



Sent To
 Merlyn W. Dahlin and wife
 Ruth G. Dahlin
 3220 North Freeway
 Fort Worth, Texas 76111

PS Form 3800, J

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

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

OFFICIAL

Seely (wfc)
 Postage \$ 1.80
 46882.0001
 Certified Fee 2.10
 Return Receipt Fee (Endorsement Required) 1.50
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 4.40

Sent To
 EAB Oil Company
 1320 Lake Street
 Fort Worth, Texas 76102

POST OFFICE
 JUN 18 2002
 87505-5458

PS Form 3800, July 1999

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:
 EAB Oil Company
 1320 Lake Street
 Fort Worth, Texas 76102

2. Article Number (C) 7001 1140 0002 5600 8081

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

A. Received by (Please Print Clearly) B. Date of Delivery
 6-20-02

C. Signature
 X *Theresa Lopez* Agent Addressee

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

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

4. Restricted Delivery? (Extra Fee) Yes

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

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

OFFICIAL

Seely (wfc)
 Postage \$ 1.80
 46882.0001
 Certified Fee 2.10
 Return Receipt Fee (Endorsement Required) 1.50
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 4.40

Sent To
 Express Air Drilling, Inc.
 3838 Oak Lawn Avenue
 Two Turtle Creek Village
 Dallas, Texas 75219-4516

POST OFFICE
 JUN 18 2002
 87505-5458

PS Form 3800, July 1999

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:
 Express Air Drilling, Inc.
 3838 Oak Lawn Avenue
 Two Turtle Creek Village
 Dallas, Texas 75219-4516

2. Article Number (C) 7001 1140 0002 5600 8104

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

A. Received by (Please Print Clearly) B. Date of Delivery
 6/21/02

C. Signature
 X *Stacy* Agent Addressee

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

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

4. Restricted Delivery? (Extra Fee) Yes

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

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

OFFICIAL

wfc/seely
 Postage \$ 1.80
 Certified Fee 2.10
 Return Receipt Fee (Endorsement Required) 1.50
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 4.40

Sent To
 Michael J. Havel and
 A. Havel
 7607 Chalkstone
 Dallas, Texas 75248

POST OFFICE
 JUN 18 2002
 87505-5458

PS Form 3800, July 1999

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:
 Michael J. Havel and Wife, Kathleen
 A. Havel
 7607 Chalkstone
 Dallas, Texas 75248

2. Article Number (Cop) 7001 1140 0002 5600 8173

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

A. Received by (Please Print Clearly) B. Date of Delivery
 Kathy Havel 6/21/02

C. Signature
 X *Kathy Havel* Agent Addressee

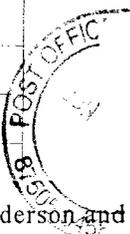
D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) Yes

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

wFC (Seely)
 Postage \$ 1.80
 Certified Fee 2.10
 Return Receipt Fee (Endorsement Required) 1.50
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 4.40



Sent To David L. Henderson and wife,
 Dawn Henderson
 815 West 10th Street
 Fort Worth Texas 76102

PS Form 3800, 3

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 David L. Henderson and wife,
 Dawn Henderson
 815 West 10th Street
 Fort Worth Texas 76102

2. Article Number (Copy from) 7001 1140 0002 5600 8166

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature
 X *Elana Throggner* Agent Addressee

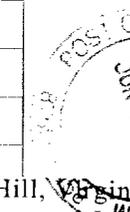
D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

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

4. Restricted Delivery? (Extra Fee) Yes

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

Seely (wFC)
 Postage \$ 1.80
 Certified Fee 2.10
 Return Receipt Fee (Endorsement Required) 1.50
 Restricted Delivery Fee (Endorsement Required) 4.40
 Total Postage & Fees \$ 4.40



Sent To James Robert Hill, Virginia Glenn Hill Lattimore and John A. Styrsky, Trustees of the and Emma Hill Trust Es
 Suite 1802, 500 W. 7th Stre
 Fort Worth, Texas 76102-4

PS Form 3800, 3

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

1. Article Addressed to:
 James Robert Hill, Virginia Glenn Hill Lattimore and John A. Styrsky, Trustees of the Houston and Emma Hill Trust Estate
 Suite 1802, 500 W. 7th Street, Unit 16
 Fort Worth, Texas 76102-4772

2. Article Number (Copy from) 7001 1140 0002 5600 8111

A. Received by (Please Print Clearly) B. Date of Delivery
 Ellen Daniels 6-20-99

C. Signature
 X *Ellen Daniels* Agent Addressee

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

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

wFC/Seely
 Postage \$ 1.80
 Certified Fee 2.10
 Return Receipt Fee (Endorsement Required) 1.50
 Restricted Delivery Fee (Endorsement Required) 4.40
 Total Postage & Fees \$ 4.40



Sent To John P. Oil Company
 1320 Lake Street
 Fort Worth, Texas 76102

PS Form 3800, 3

- 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:
 John P. Oil Company
 1320 Lake Street
 Fort Worth, Texas 76102

2. Article Number (Copy from) 7001 1140 0002 5600 8203

A. Received by (Please Print Clearly) B. Date of Delivery
 Margo Hooper 6-20-99

C. Signature
 X *Margo Hooper* Agent Addressee

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

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Seely (wfc)
Postage \$.80

Certified Fee 2.10

Return Receipt Fee (Endorsement Required) 1.50

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$ 4.40

POST OFFICE
JUN 18 2002
9505-5456

Sent To
PVB Oil Company
1320 Lake Street
Fort Worth, Texas 76102

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

1. Article Addressed to:
PVB Oil Company
1320 Lake Street
Fort Worth, Texas 76102

2. Article Number (Copy from se 7001 1140 0002 5600 8135)

A. Received by (Please Print Clearly) B. Date of Delivery
6-20-02

C. Signature
X *M. Hopper* Agent Addressee

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

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

4. Restricted Delivery? (Extra Fee) Yes

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

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

Seely/wfc
Postage \$.80

Certified Fee 2.10

Return Receipt Fee (Endorsement Required) 1.50

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$ 4.40

POST OFFICE

Sent To
SSV&H Associates
815 West 10th Street
Fort Worth, Texas 76102

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

1. Article Addressed to:
SSV&H Associates
815 West 10th Street
Fort Worth, Texas 76102

2. Article Number (Copy fro 7001 1140 0002 5600 8197)

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature
X *D. Abundis* Agent Addressee

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

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

4. Restricted Delivery? (Extra Fee) Yes

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

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

Seely (wfc)
Postage \$.80

Certified Fee 2.10

Return Receipt Fee (Endorsement Required) 1.50

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$ 4.40

POST OFFICE

Sent To
C. W. Seely and wife, Ian B.
815 West 10th Street
Fort Worth, Texas 76102

Street, Apt. N; or PO Box No.
City, State, ZH

1. Article Addressed to:
C. W. Seely and wife, Ian B. Seely
815 West 10th Street
Fort Worth, Texas 76102

2. Article Number (C 7001 1140 0002 5600 8142)

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature
X *D. Abundis* Agent Addressee

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

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

4. Restricted Delivery? (Extra Fee) Yes

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

Postage	\$ 1.80
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.40



Sent To
J. Cleo Thompson and
James Cleo Thompson, Jr.,
325 North St. Paul, Suite 4
Dallas, Texas 76201

PS Form 3800

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

J. Cleo Thompson and
James Cleo Thompson, Jr., L.P.
325 North St. Paul, Suite 4300
Dallas, Texas 76201

2. Article Number (Copy from _____)
7001 1140 0002 5600 8159

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

- 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:

WES-TEX Drilling Company, L.P.
P. O. Box 3739
Abilene, Texas 79604

2. Article Number (Copy from _____)
7001 1140 0002 5600 8180

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
P. Robbins **JUN 21 2002**

C. Signature
X P. Robbins Agent Addressee

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

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

4. Restricted Delivery? (Extra Fee) Yes

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

Postage	\$ 1.80
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.40



Sent To
WES-TEX Drilling Compa
P. O. Box 3739
Abilene, Texas 79604

PS Form 3800