

EXHIBIT LIST

**APPLICATION OF MEWBOURNE OIL COMPANY
TO AMEND ORDER NO. R-22184, EDDY COUNTY,
NEW MEXICO.**

Case No. 23466

MEWBOURNE OIL COMPANY'S EXHIBIT LIST

1. Application and Proposed Notice
2. Landman's Affidavit
3. Notice Affidavit
4. Affidavit of Publication

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION**APPLICATION OF MEWBOURNE OIL COMPANY
TO AMEND ORDER NO. R-22184, EDDY COUNTY,
NEW MEXICO.**Case No. 23466**APPLICATION**

Mewbourne Oil Company applies for an order amending Order No. R-22184, and in support thereof states:

1. Order No. R-22184 pooled all uncommitted mineral interest owners in the Bone Spring formation underlying a horizontal spacing unit comprised of the S/2S/2 of Section 1 and the S/2S/2 of Section 2, Township 20 South, Range 28 East, N.M.P.M., Eddy County, New Mexico.

2. Applicant proposes to drill the Desert Eagle 1/2 B2PM Fed Com. Well No. 1H and the Desert Eagle 1/2 B3PM Fed Com. Well No. 1H to depths sufficient to test the Bone Spring formation, with first take points in the SE/4SE/4 of Section 1 and last take points in the SW/4SW/4 of Section 2. Order No. R-22184 designates Applicant as operator of the wells.

3. This matter (Case No. 22236) was heard on April 21, 2022, and Order No. R-22184 was entered on July 11, 2022. Paragraph 19 of Order No. R-22184 requires the operator to commence the wells within one year of the date of issuance. Paragraph 20 of Order No. R-22184 provides that the order will terminate if the wells are not timely commenced, unless the operator "obtains an extension by amending this Order for good cause shown."

4. Applicant plans on drilling the wells, but would like an extension in order to collect more data from well results in the area, including some recently drilled by Applicant.

EXHIBIT |

Applicant will apply what it learns from these results in order to increase productivity and prevent economic waste. Thus good cause exists for Applicant's request for an extension.

5. Applicant requests an extension of the well commencement deadline of Order No. R-22184 to July 11, 2024.

WHEREFORE, applicant requests that, after notice and hearing, the Division enter its order amending Order No. R-22184 to extend the well commencement deadline to July 11, 2024.

Respectfully submitted,



James Bruce
Post Office Box 1056
Santa Fe, New Mexico 87504
(505) 982-2043

Attorney for Mewbourne Oil Company

Application of Mewbourne Oil Company to Amend Order No. R-22184, Eddy County, New Mexico. Mewbourne Oil Company seeks an order amending Order No. R-22184, entered on July 11, 2022, to extend the well commencement deadline one year, to July 1, 2024. Order No. R-22184 pooled mineral interest owners in the Bone Spring formation underlying a horizontal spacing unit comprised of the S/2S/2 of Section 1 and the S/2S/2 of Section 2, Township 20 South, Range 28 East, N.M.P.M., Eddy County, New Mexico, for the purpose of drilling the Desert Eagle 1/2 B2PM Fed Com. Well No. 1H and the Desert Eagle 1/2 B3PM Fed Com. Well No. 1H to depths sufficient to test the Bone Spring formation, with first take points in the SE/4SE/4 of Section 1 and last take points in the SW/4SW/4 of Section 2. It requires the commencement of drilling within one year of the date of the order unless the operator obtains an extension by amending the order for good cause shown. The unit is located approximately 14 miles north-northeast of Carlsbad, New Mexico.

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

**APPLICATION OF MEWBOURNE OIL COMPANY
TO AMEND ORDER NO. R-22184, EDDY COUNTY,
NEW MEXICO.**

Case No. 23466

SELF-AFFIRMED STATEMENT OF ARIANA RODRIGUES

Ariana Rodrigues deposes and states:

1. I am a landman for Mewbourne Oil Company ("Mewbourne"), and have personal knowledge of the matters stated herein. I have been qualified by the Division as an expert petroleum landman.
2. I am familiar with the application filed by Mewbourne in the above case. Pursuant to Division rules the following information is submitted in support of the application.
3. In this case Mewbourne seeks an order amending Order No. R-22184 to extend the well commencement deadline one year.
4. Order No. R-22184 (submitted as Attachment A) pooled mineral interest owners in the Bone Spring formation underlying a horizontal spacing unit comprised of the S/2S/2 of Section 1 and the S/2S/2 of Section 2, Township 20 South, Range 28 East, N.M.P.M., Eddy County, New Mexico, for purpose of drilling the proposed Desert Eagle 1/2 B2PM Fed Com. Well No. 1H and the Desert Eagle 1/2 B3PM Fed Com. Well No. 1H. Order No. R-22184 designates Mewbourne as operator of the wells.
5. This matter was heard on April 21, 2022, and Order No. R-22184 was entered on July 11, 2022. Paragraph 19 of Order No. R-22184 requires the operator to commence the wells within one year of the date of issuance. Paragraph 20 of Order No. R-22184 provides that the

EXHIBIT

2

order will terminate if the wells are not timely commenced, unless the operator "obtains an extension by amending of this Order for good cause shown."

6. Mewbourne plans on drilling the subject wells, but would like an extension in order to collect more data from well results in the area, including data from two offsetting wells recently drilled by Mewbourne. Mewbourne will apply the knowledge it acquires from the wells' results in order to increase productivity in the wells and prevent economic waste. Thus good cause exists for Mewbourne's request for an extension.

7. Mewbourne requests an extension of the well commencement deadline of Order No. R-22184 to July 11, 2024.


8. I submitted the names and current or last known addresses of the pooled, uncommitted mineral interest owners to Mewbourne's attorney. No opposition is expected because the interest owners have been notified of the request to amend the subject order, and have not objected.

9. Mewbourne is in good standing under the Division's Rules.

10. Granting this application will prevent waste and protect correlative rights.

I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 10 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

Date: 5/3/2023


Ariana Rodriguez

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

**IN THE MATTER OF APPLICATION FOR
COMPULSORY POOLING SUBMITTED BY
MEWBOURNE OIL COMPANY**

**CASE NO. 22236
ORDER NO. R-22184**

ORDER

The Director of the New Mexico Oil Conservation Division ("OCD"), having heard this matter through a Hearing Examiner on April 21, 2022, and after considering the testimony, evidence, and recommendation of the Hearing Examiner, issues the following Order.

FINDINGS OF FACT

1. Mewbourne Oil Company ("Operator") submitted an application ("Application") to compulsory pool the uncommitted oil and gas interests within the spacing unit ("Unit") described in Exhibit A. The Unit is expected to be a standard horizontal spacing unit. 19.15.16.15(B) NMAC. Operator seeks to be designated the operator of the Unit.
2. Operator will dedicate the well(s) described in Exhibit A ("Well(s)") to the Unit.
3. Operator proposes the supervision and risk charges for the Well(s) described in Exhibit A.
4. Operator identified the owners of uncommitted interests in oil and gas minerals in the Unit and provided evidence that notice was given.
5. The Application was heard by the Hearing Examiner on the date specified above, during which Operator presented evidence through affidavits in support of the Application. No other party presented evidence at the hearing.

CONCLUSIONS OF LAW

6. OCD has jurisdiction to issue this Order pursuant to NMSA 1978, Section 70-2-17.
7. Operator is the owner of an oil and gas working interest within the Unit.
8. Operator satisfied the notice requirements for the Application and the hearing as required by 19.15.4.12 NMAC.
9. OCD satisfied the notice requirements for the hearing as required by 19.15.4.9 NMAC.
10. Operator has the right to drill the Well(s) to a common source of supply at the



depth(s) and location(s) in the Unit described in Exhibit A.

11. The Unit contains separately owned uncommitted interests in oil and gas minerals.
12. Some of the owners of the uncommitted interests have not agreed to commit their interests to the Unit.
13. The pooling of uncommitted interests in the Unit will prevent waste and protect correlative rights, including the drilling of unnecessary wells.
14. This Order affords to the owner of an uncommitted interest the opportunity to produce his just and equitable share of the oil or gas in the pool.

ORDER

15. The uncommitted interests in the Unit are pooled as set forth in Exhibit A.
16. The Unit shall be dedicated to the Well(s) set forth in Exhibit A.
17. Operator is designated as operator of the Unit and the Well(s).
18. If the location of a well will be unorthodox under the spacing rules in effect at the time of completion, Operator shall obtain the OCD's approval for a non-standard location in accordance with 19.15.16.15(C) NMAC.
19. The Operator shall commence drilling the Well(s) within one year after the date of this Order, and complete each Well no later than one (1) year after the commencement of drilling the Well.
20. This Order shall terminate automatically if Operator fails to comply with Paragraph 19 unless Operator obtains an extension by amending this Order for good cause shown.
21. The infill well requirements in 19.15.13.9 NMAC through 19.15.13.12 NMAC shall be applicable.
22. Operator shall submit each owner of an uncommitted working interest in the pool ("Pooled Working Interest") an itemized schedule of estimated costs to drill, complete, and equip the well ("Estimated Well Costs").
23. No later than thirty (30) days after Operator submits the Estimated Well Costs, the owner of a Pooled Working Interest shall elect whether to pay its share of the Estimated Well Costs or its share of the actual costs to drill, complete and equip the well ("Actual Well Costs") out of production from the well. An owner of a Pooled Working Interest who elects to pay its share of the Estimated Well Costs shall render payment to Operator no later than thirty (30) days after the expiration of the election period, and shall be liable for operating costs, but not risk charges, for the

CASE NO. 22236
ORDER NO. R-22184

Page 2 of 7

well. An owner of a Pooled Working Interest who fails to pay its share of the Estimated Well Costs or who elects to pay its share of the Actual Well Costs out of production from the well shall be considered to be a "Non-Consenting Pooled Working Interest."

24. No later than one hundred eighty (180) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the Actual Well Costs. The Actual Well Costs shall be considered to be the Reasonable Well Costs unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Reasonable Well Costs after public notice and hearing.
25. No later than sixty (60) days after the expiration of the period to file a written objection to the Actual Well Costs or OCD's order determining the Reasonable Well Costs, whichever is later, each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs shall pay to Operator its share of the Reasonable Well Costs that exceed the Estimated Well Costs, or Operator shall pay to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs its share of the Estimated Well Costs that exceed the Reasonable Well Costs.
26. The reasonable charges for supervision to drill and produce a well ("Supervision Charges") shall not exceed the rates specified in Exhibit A, provided however that the rates shall be adjusted annually pursuant to the COPAS form entitled "Accounting Procedure-Joint Operations."
27. No later than within ninety (90) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the reasonable charges for operating and maintaining the well ("Operating Charges"), provided however that Operating Charges shall not include the Reasonable Well Costs or Supervision Charges. The Operating Charges shall be considered final unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Operating Charges after public notice and hearing.
28. Operator may withhold the following costs and charges from the share of production due to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs: (a) the proportionate share of the Supervision Charges; and (b) the proportionate share of the Operating Charges.
29. Operator may withhold the following costs and charges from the share of production due to each owner of a Non-Consenting Pooled Working Interest: (a) the proportionate share of the Reasonable Well Costs; (b) the proportionate share

of the Supervision and Operating Charges; and (c) the percentage of the Reasonable Well Costs specified as the charge for risk described in Exhibit A.

30. Operator shall distribute a proportionate share of the costs and charges withheld pursuant to paragraph 29 to each Pooled Working Interest that paid its share of the Estimated Well Costs.
31. Each year on the anniversary of this Order, and no later than ninety (90) days after each payout, Operator shall provide to each owner of a Non-Consenting Pooled Working Interest a schedule of the revenue attributable to a well and the Supervision and Operating Costs charged against that revenue.
32. Any cost or charge that is paid out of production shall be withheld only from the share due to an owner of a Pooled Working Interest. No cost or charge shall be withheld from the share due to an owner of a royalty interests. For the purpose of this Order, an unleased mineral interest shall consist of a seven-eighths (7/8) working interest and a one-eighth (1/8) royalty interest.
33. Except as provided above, Operator shall hold the revenue attributable to a well that is not disbursed for any reason for the account of the person(s) entitled to the revenue as provided in the Oil and Gas Proceeds Payment Act, NMSA 1978, Sections 70-10-1 *et seq.*, and relinquish such revenue as provided in the Uniform Unclaimed Property Act, NMSA 1978, Sections 7-8A-1 *et seq.*
34. The Unit shall terminate if (a) the owners of all Pooled Working Interests reach a voluntary agreement; or (b) the well(s) drilled on the Unit are plugged and abandoned in accordance with the applicable rules. Operator shall inform OCD no later than thirty (30) days after such occurrence.
35. OCD retains jurisdiction of this matter for the entry of such orders as may be deemed necessary.

STATE OF NEW MEXICO
OIL CONSERVATION DIVISION


ADRIENNE SANDOVAL
DIRECTOR
AES/jag

Date: 7/11/2022

CASE NO. 22236
ORDER NO. R-22184

Page 4 of 7

Exhibit A

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Page 15 of 29

COMPULSORY POOLING APPLICATION CHECKLIST**ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS**

Case:	22236
Date:	April 21, 2022
Applicant	Mewbourne Oil Company
Designated Operator & OGRID (affiliation if applicable)	Mewbourne Oil Company/OGRID No.14744
Applicant's Counsel:	James Bruce
Case Title:	Application of Mewbourne Oil Company for Compulsory Pooling, Eddy County, New Mexico
Entries of Appearance/Intervenors:	
Well Family	Desert Eagle wells
Formation/Pool	
Formation Name(s) or Vertical Extent:	Bone Spring Formation
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Entire Bone Spring formation
Pool Name and Pool Code:	Winchester; Bone Spring/Pool Code 65010
Well Location Setback Rules:	Statewide rules and current horizontal well rules
Spacing Unit Size:	Quarter-quarter sections/40 acres
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	320 acres
Building Blocks:	
Orientation:	East - West
Description: TRS/County	S/2S/2 §1 and S/2S/2 §2-20S-28E, NMPM, Eddy County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
Other Situations	
Depth Severance: Y/N. If yes, description	No
Proximity Tracts: If yes, description	No
Proximity Defining Well: if yes, description	
Applicant's Ownership in Each Tract	Exhibit 2-A
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non- standard)	Desert Eagle 1/2 B2PM Fed. Com. Well No. 1H API No. 30-015-Pending SHL: 1200 FSL & 205 FEL §1 BHL: 660 FSL & 100 FWL §2 FTP: 660 FSL & 100 FEL §1 LTP: 660 FSL & 100 FWL §2 Second Bone Spring/TVD 7492 feet/MD 17851 feet

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CASE NO. 22236
ORDER NO. R-22184

Page 5 of 7

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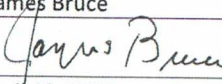
Page 16 of 29

	Desert Eagle 1/2 B3PM Fed. Com. Well No. 1H API No. 30-015-Pending SHL: 1170 FSL & 205 FEL \$1 BHL: 400 FSL & 100 FWL \$2 FTP: 400 FSL & 100 FEL \$1 LTP: 400 FSL & 100 FWL \$2 Third Bone Spring/TVD 8755 feet/MD 19086 feet
Horizontal Well First and Last Take Points	See above
Completion Target (Formation, TVD and MD)	See above
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$8000
Production Supervision/Month \$	\$800
Justification for Supervision Costs	Exhibit 2, page 2
Requested Risk Charge	Cost + 200%/Exhibit 2, page 2
Notice of Hearing	
Proposed Notice of Hearing	Exhibit 1
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit 4
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit 5
Ownership Determination	
Land Ownership Schematic of the Spacing Unit	Exhibit 2-A
Tract List (including lease numbers and owners)	Exhibit 2-A
Pooled Parties (including ownership type)	Exhibit 2-A
Unlocatable Parties to be Pooled	Exhibit 6
Ownership Depth Severance (including percentage above & below)	None
Joinder	
Sample Copy of Proposal Letter	Exhibit 2-B
List of Interest Owners (i.e. Exhibit A of JOA)	Exhibit 2-A
Chronology of Contact with Non-Joined Working Interests	Exhibit 2-B
Overhead Rates In Proposal Letter	Exhibit 2-B
Cost Estimate to Drill and Complete	Exhibit 2-C
Cost Estimate to Equip Well	Exhibit 2-C
Cost Estimate for Production Facilities	Exhibit 2-C
Geology	
Summary (including special considerations)	Exhibit 3
Spacing Unit Schematic	Exhibits 2-A and 3-A
Gunbarrel/Lateral Trajectory Schematic	Exhibits 3-C and 3-E
Well Orientation (with rationale)	Laydown/Exhibit 3

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CASE NO. 22236
ORDER NO. R-22184

Page 6 of 7

Target Information	Bone Spring	Page 17 of 29
HSU Cross Section	Exhibits 3-C and 3-E	
Depth Severance Discussion	Not Applicable	
Forms, Figures and Tables		
C-102	Exhibit 2-A	
Tracts	Exhibit 2-A	
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit 2-A	
General Location Map (including basin)	Exhibits 2-A and 3-A	
Well Bore Location Map	Exhibits 2-A and 3-A	
Structure Contour Map - Subsea Depth	Exhibit 3-A	
Cross Section Location Map (including wells)	Exhibit 3-B	
Cross Section (including Landing Zone)	Exhibits 3-C and 3-E	
Additional Information		
CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.		
Printed Name (Attorney or Party Representative):	James Bruce	
Signed Name (Attorney or Party Representative):		
Date:	April 19, 2022	

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CASE NO. 22236
ORDER NO. R-22184

Page 7 of 7

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

**APPLICATIONS OF MEWBOURNE OIL
COMPANY TO AMEND POOLING ORDERS,
EDDY COUNTY, NEW MEXICO.**

Case Nos. 23443 and 23465 - 23467

SELF-AFFIRMED STATEMENT OF NOTICE

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

James Bruce 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 Mewbourne Oil Company.
3. Mewbourne Oil Company 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 last known address, by certified mail. Copies of the notice letters and certified return receipts are attached hereto as AttachmentSs A and B.
5. Applicant has complied with the notice provisions of Division Rules.
6. I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 5 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

Date: 5/16/23


James Bruce

EXHIBIT 3

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

April 13, 2023

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Mewbourne Oil Company has filed the attached four applications with the New Mexico Oil Conservation Division seeking orders amending existing pooling orders to extend the well commencement deadlines for one year. The applications concern the following horizontal spacing units and wells located in Eddy County, New Mexico.

Case No. 23465: the N/2S/2 of Section 1 and the N/2S/2 of Section 2, Township 20 South, Range 28 East, NMPM. The unit will be dedicated to (i) the Desert Eagle 1/2 B2IL Fed. Com. Well No. 1H and (ii) the Desert Eagle 1/2 B3IL Fed. Com. Well No. 1H (Bone Spring wells);

Case No. 23466: the S/2S/2 of Section 1 and the S/2S/2 of Section 2, Township 20 South, Range 28 East, NMPM. The unit will be dedicated to (i) the Desert Eagle 1/2 B2PM Fed. Com. Well No. 1H and (ii) the Desert Eagle 1/2 B3PM Fed. Com. Well No. 1H (Bone Spring wells);

Case No. 23443: Lots 1-4 and the S/2N/2 (the N/2) of Section 1 and Lots 1-4 and the S/2N/2 (the N/2) of Section 2, Township 20 South, Range 28 East, NMPM. The unit will be dedicated to (i) the Desert Eagle 1/2 B2AD Fed. Com. Well No. 1H, (ii) the Desert Eagle 1/2 B2HE Fed. Com. Well No. 1H, and (iii) the Desert Eagle 1/2 B3AD Fed. Com. Well No. 1H (Bone Spring wells); and

Case No. 23467: the S/2 of Section 1 and the S/2 of Section 2, Township 20 South, Range 28 East, NMPM. The unit will be dedicated to the Desert Eagle 1/2 W0PM Fed. Com. Well No. 1H (a Wolfcamp well).

Also to be considered will be the designation of applicant as operator of the wells. These matters are scheduled for hearing at 8:15 a.m. on Thursday, May 4 2023. During the current circumstances, state buildings are closed to the public and the hearing will be conducted remotely. To view the hearing docket and to determine how to participate in an electronic hearing, go to <https://www.emnrd.nm.gov/ocd/hearing-info/>, or contact Marlene Salvidrez at Marlene.Salvidrez@emnrd.nm.gov. You are not required to attend this hearing, but as an owner

ATTACHMENT *A*

of an interest who may be affected by the applications, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting these matters 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 five business days before the hearing date. This statement may be filed online with the Division at ocd.hearings@emnrd.nm.gov, and should include: The name of the party and his or her attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate time the party will need to present his or her 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 Mewbourne Oil Company

Endeavor Energy Resources, LP
110 N Marienfeld Street
Midland, TX 79701

Alpha Energy Partners
PO Box 10701
Midland, TX 79702

OXY USA WTP Limited Partnership
5 Greenway Plaza
Suite 110
Houston, TX 77046-0521

OXY Y-1 Company
5 Greenway Plaza
Suite 110
Houston, TX 77046-0521
Attn: Clay Carroll

Heirs of Dwayne Hamilton
2603 Country Grove Trail
Mansfield, TX 76063

Heirs of Dwayne Hamilton
11618 Alejandra Ln
Frisco, TX 75035

Joe P Liberty
1918 Crescent Pl
Midland, TX 79705

Antares Oil Corporation
4380 S Syracuse Street
Suite 610
Denver, CO 80237

TXLA Oil and Gas LLC
6207 Lavendale Ave
Dallas, TX 75230

Clinton H. Dean
6006 Balcones
Unit #32
El Paso, TX 79912

Clinton H. Dean Jr.
3307 Wisteria Road
Columbus, MS 39705

Clinton H. Dean Jr.
4212 O'Keefe Drive
El Paso, TX 79902

The Heirs of Edward Egbert
6165 Los Felinos Cir
El Paso, TX 79912

Euratex Corporation
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Glade Park, CO 81523

The Heirs of Galen Egbert
2040 Forest Ave
San Jose, CA 95128

Gene Wood Joint Venture Account
3081 Flagship Drive
May, TX 76857

Gene Wood Joint Venture Account
PO Box 6692
Abilene, TX 79608

Tularosa Oil Company
PO Box 471349
Fort Worth, TX 76147

Togiak Resources LLC
PO Box 479
Artesia, NM 88211

Teryl Diane Meyers (Blue)
1943 Yajome Street
Napa, CA 94559

Teryl Diane Meyers (Blue)
205 Racquet Drive
Apt 6A
Ruidoso, NM 88345

Heirs of Homer L. Wedig
508 Fairway Drive
Kerrville, TX 78028

J. W. Davis
35 Havenhill Road
Artesia, NM 88210

J. W. Davis
7001 Cactus Trail
Midland, TX 79707

Trustees of the James M. and Lida
Rose Welch Trust
2705 Gaye Drive
Roswell, NM 88201

John A. Ponsford
6377 La Posta Drive
El Paso, TX 79912

Heirs of John T. Olive
112 Desert Garden Drive
Santa Teresa, NM 88008

M. E. Neesen
25147 Antler Drive
North Olmsted, OH 44070

Malcolm J. Miller, Jr.
5330 Bent Tree Forest Drive
Dallas, TX 75248

Malcolm J. Miller, Jr.
3925 Edgebrook
Midland, TX 79707

EXHIBIT

Malcolm J. Miller, Jr
PO Box 74
Quitman, fX75783

Malcolm J. Miller, Jr.
15316 Falmouth Avenue
Houston, TX 77084

Mallory L. Miller & Edna Louise
Miller, Personal Representative
210 Mesa Vista Road
Anthony, NM 88021

Mallory L. Miller & Edna Louise
Miller, Personal Representative
6595 Rio Dorado
La Mesa, NM 88044

Heirs of Martin T. Hart
5250 W Princeton Drive
Denver, CO 80235

The Farmer Family Trust
3301 S Haldeman
Artesia, NM 88210

Michael C. Dean
6006 Balcones
Unit #32
El Paso, TX 79912

Dorsar Investment Company
4855 N Mesa
Suite 120
El Paso, TX 79902

Walter Frederick Wigzell, Trustee of
the Wigzell 2009 Trust
1302 S Rusk Street
Weatherford, TX 76086

Richard Brace Wigzell, Trustee of
the Wigzell 2009 Trust
104 Deerhorn Ct.
Lakeway, TX 78734

Andrew Kenneth Wigzell, Trustee of
the Wigzell 2009 Trust
1248 Delmont Drive
Richardson, TX 75080

Penroc Oil Corporation
151 Calle Sur
Suite 174
Hobbs, NM 88240

Martina Barrera
802 West Alvarado
Artesia, NM 88210

Heirs of R. F. Haynsworth
PO Box 2338
Ruidoso, NM 88355

Richard J Vance and Lorraine
Vance, as Joint Tenants
434 Thornwood Drive
American Fork, UT 84003

James E West, Trustee of the Robert
N. Avery Family Trust
74-133 El Paseo
Suite E
Palm Desert, CA 92260

Robert R. Dean
6006 Balcones
Unit #32
El Paso, TX 79912

Sarador, a Partnership
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Suite 120
El Paso, TX 79912

Heirs of Sterling J. Talley
1401 Ventura Avenue
Midland, TX 79705

Heirs of Sterling J. Talley
7145 Cattails Drive
Wellington, CO 80549

Heirs of T. Welch
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Tucson, AZ 85748

V&S Supply Company
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Midland, TX 79702

Heirs of V. Burfiend
PO Box 1526
Brenham, TX 77833-1526

Heirs of V. Burfiend
505 Hillside Drive
Brenham, TX 77833

First National Bank, Trustee, Amtex
Petroleum Corporation, Trust 988
PO Box 270
Midland, TX 79702

First National Bank, Trustee, Amtex
Petroleum Corporation, Trust 988
501 N Colorado Street
Midland, TX 79701

Heirs of D. C. Underwood (David
Clifford Underwood)
4380 W Point Loma Blvd
Apt D
San Diego, CA 92107

Heirs of D. C. Underwood (David
Clifford Underwood)
9610 W Briarwood Circle
Sun City, AZ 85351

Eric Chancy Croft & Elizabeth Ann
Williamson, Trustees of the Charla
Geraldine Williamson Trust
PO Box 16
Midland, TX 79702

Lois Geraldine Williamson, P.R. of
the Estate of J. C. Williamson
802 Palomino
Midland, TX 79705

Lois Geraldine Williamson, P. R.
of the Estate of J. C. Williamson,
PO Box 16
Midland, TX79702

Vladin, LLC
P.O. Box 100
Artesia, NM 88202

Jo Ann Yates
256 North 26th Street
Artesia, NM 88210

Heirs of Martin T. Hart
2419 33rd Street
Santa Monica, CA 90405

**U.S. Postal Service™
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For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

Robert R. Dean
6006 Balcones
Unit #32
El Paso, TX 79912

1800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
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.

Richard J Vance and Lorraine Vance, as Joint Tenants
434 Thornwood Drive
American Fork, UT 84003

2. Article Number (Transfer from carrier label)
7022 1670 0002 1182 5219

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Richard J Vance* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Richard J Vance* C. Date of Delivery *04/22/23*

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

3. Service Type
☐ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Certified Mail®
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

Robert R. Dean
6006 Balcones
Unit #32
El Paso, TX 79912

1800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
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.

Robert R. Dean
6006 Balcones
Unit #32
El Paso, TX 79912

2. Article Number (Transfer from carrier label)
7022 1670 0002 1182 5219

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature *R. Dean* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *R. Dean* C. Date of Delivery *4-20-23*

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

3. Service Type
☐ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Certified Mail®
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

Richard J Vance and Lorraine Vance, as Joint Tenants
434 Thornwood Drive
American Fork, UT 84003

1800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
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.

Richard J Vance and Lorraine Vance, as Joint Tenants
434 Thornwood Drive
American Fork, UT 84003

2. Article Number (Transfer from carrier label)
7022 1670 0002 1182 5219

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Richard J Vance* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Richard J Vance* C. Date of Delivery *04/22/23*

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

3. Service Type
☐ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Certified Mail®
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

Domestic Return Receipt

**U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Heirs of John T. Olive
112 Desert Garden Drive
Santa Teresa, NM 88008

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2562 4960 2000 0560 7202

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

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.

Heirs of Dwayne Hamilton
11618 Alejandra Ln
Frisco, TX 75035

2. Article Number (Number from carrier label)

7021 0950 0002 0364 7284

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

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

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

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Signature Confirmation™

☐ Restricted Delivery

Postmark Here

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Heirs of John T. Olive
112 Desert Garden Drive
Santa Teresa, NM 88008

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

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.

Heirs of John T. Olive
112 Desert Garden Drive
Santa Teresa, NM 88008

2. Article Number (Number from carrier label)

7021 0950 0002 0364 7352

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

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

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

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Signature Confirmation™

☐ Restricted Delivery

Postmark Here

4822 4960 2000 0560 7202

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature \$

Postmark Here

Michael C. Dean
6006 Balcones
Unit #32
El Paso, TX 79912

City, State, ZIP+4®
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

0622 4950 2000 0560 1202

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
 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.

Mallory L. Miller & Edna Louise
Miller, Personal Representative
6595 Rio Dorado
La Mesa, NM 88044

2. Article Number 7021 0950 0002 0364 7383
 PS Form 3811, July 2020 PSN 7530-02-000-9053

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Collect on Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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

5. Article Number 7021 0950 0002 0364 7383
 PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

**U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature \$

Postmark Here

Michael C. Dean
6006 Balcones
Unit #32
El Paso, TX 79912

City, State, ZIP+4®
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

0622 4950 2000 0560 1202

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature \$

Postmark Here

Mallory L. Miller & Edna Louise
Miller, Personal Representative
6595 Rio Dorado
La Mesa, NM 88044

City, State, ZIP+4®
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To **M. E. Neesen**

Sent To **25147 Antler Drive**

Sent To **North Olmsted, OH 44070**

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7202 0560 2000 4930 7272

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

2. Print your name and address on the reverse so that we can return the card to you.

3. Attach this card to the back of the mailpiece, or on the front if space permits.

Clinton H. Dean
6006 Balcones
Unit #32
El Paso, TX 79912

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) **H. Dean**

C. Date of Delivery **4-20-22**

Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery

☐ Collect on Delivery Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To **Clinton H. Dean**

Sent To **6006 Balcones**

Sent To **Unit #32**

Sent To **El Paso, TX 79912**

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

2. Print your name and address on the reverse so that we can return the card to you.

3. Attach this card to the back of the mailpiece, or on the front if space permits.

M. E. Neesen
25147 Antler Drive
North Olmsted, OH 44070

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery

☐ Collect on Delivery Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

7202 0560 2000 4930 6072

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Postmark Here

Penroc Oil Corporation
151 Calle Sur
Suite 174
Hobbs, NM 88240

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2025 2817 2000 0297 2202

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

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.

Heirs of Homer L. Wedig
508 Fairway Drive
Kerrville, TX 78028

7021 0950 0002 0364 7147

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Heirs of Homer L. Wedig C. Date of Delivery 7-22-20

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

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

Article Number (Transfer from service label) **9590 9402 7543 2098 9444 85**

**U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Postmark Here

Heirs of Homer L. Wedig
508 Fairway Drive
Kerrville, TX 78028

7021 0950 0002 0364 7147

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

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.

Penroc Oil Corporation
151 Calle Sur
Suite 174
Hobbs, NM 88240

7022 1670 0002 1162 5202

Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Heirs of Homer L. Wedig C. Date of Delivery 7-22-20

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

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

Article Number (Transfer from service label) **9590 9402 7635 2122 8777 96**

2472 4960 2000 0560 1202

**U.S. Postal Service™
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Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$

Postmark Here

**Lois Geraldine Williamson, P. R.
of the Estate of J. C. Williamson,
PO Box 16
Midland, TX 79702**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2022 1670 0002 1182 5271

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.
 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:
**Heirs of V. Burfiend
505 Hillside Drive
Brenham, TX 77833**

2. Article Number (Transfer from service label)
 9590 9402 7635 2122 8778 33
 7022 1670 0002 1182 5240 (over \$500)
 PS Form 3811, July 2020 PSN 7530-02-000-9053

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Collect on Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

**U.S. Postal Service™
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Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$

Postmark Here

**Heirs of V. Burfiend
505 Hillside Drive
Brenham, TX 77833**

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.
 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:
**Lois Geraldine Williamson, P. R.
of the Estate of J. C. Williamson,
PO Box 16
Midland, TX 79702**

2. Article Number (Transfer from service label)
 9590 9402 7635 2122 8778 64
 7022 1670 0002 1182 5271
 PS Form 3811, July 2020 PSN 7530-02-000-9053

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Collect on Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

2022 1670 0002 1182 5271

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.
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.

TXLA Oil and Gas LLC
6207 Lavendale Ave
Dallas, TX 75230

9590 9402 7543 2098 9446 38

2. Article Number **7021 0950 0002 0364 7291** (over \$500)

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

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

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

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery
☐ Restricted Delivery

Postmark Here

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To \$

Street and \$

City, State \$

TXLA Oil and Gas LLC
6207 Lavendale Ave
Dallas, TX 75230

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™
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Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To \$

Street and \$

City, State \$

OXY USA WTP Limited Partnership
5 Greenway Plaza
Suite 110
Houston, TX 77046-0521

9590 9402 7543 2098 9446 14

2. Article Number **7021 0950 0002 0364 7277** (over \$500)

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

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

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

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery
☐ Restricted Delivery

Postmark Here

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postmark Here

OXY USA WTP Limited Partnership
5 Greenway Plaza
Suite 110
Houston, TX 77046-0521

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage \$
 Sent To \$
 Street and City, State, Zip+4

Postmark Here

First National Bank, Trustee, Amtex
Petroleum Corporation, Trust 988
PO Box 270
Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

1542 4950 2000 0560 1202

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
 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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
 B. Received by (Printed Name) ☐ Addressee
 C. Date of Delivery 4/20/20
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

2. Article Number 9590 9402 7635 2122 8775 12
 7021 0950 0002 0364 7321 (over \$500)
 PS Form 3811, July 2020 PSN 7530-02-000-9053

Tularosa Oil Company
PO Box 471349
Fort Worth, TX 76147

Domestic Return Receipt

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Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total \$
 Sent \$
 Street \$
 City, State, Zip+4

Postmark Here

First National Bank, Trustee, Amtex
Petroleum Corporation, Trust 988
PO Box 270
Midland, TX 79702

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
 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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
 B. Received by (Printed Name) ☐ Addressee
 C. Date of Delivery 3-25-23
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

2. Article Number 9590 9402 7635 2122 8776 42
 7021 0950 0002 0364 7451 (over \$500)
 PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

1262 4950 2000 0560 1202

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postmark Here

Heirs of Martin T. Hart
5250 W Princeton Drive
Denver, CO 80235

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postmark Here

Heirs of Martin T. Hart
5250 W Princeton Drive
Denver, CO 80235

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postmark Here

Heirs of D. C. Underwood (David
Clifford Underwood)
9610 W Briarwood Circle
Sun City, AZ 85351

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postmark Here

Heirs of D. C. Underwood (David
Clifford Underwood)
9610 W Briarwood Circle
Sun City, AZ 85351

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

1. Complete items 1, 2, and 3.
 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.

Heirs of R. F. Haynsworth
PO Box 2338
Ruidoso, NM 88355

2. Article Number (Transfer from service label)
 9590 9402 7635 2122 8777 03
 7022 1670 0002 1182 5110 (over \$500)

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery

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

Postmark Here

PS Form 3811, July 2020 PSN 7530-02-000-9053

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postmark Here

Endeavor Energy Resources, LP
110 N Marienfeld Street
Midland, TX 79701

PS Form 3800, April 2015 PSN 7530-02-000-3047

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

1. Complete items 1, 2, and 3.
 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.

Endeavor Energy Resources, LP
110 N Marienfeld Street
Midland, TX 79701

2. Article Number (Transfer from service label)
 9590 9402 7543 2098 9449 59
 7021 0950 0002 0364 7079

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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

Postmark Here

PS Form 3811, July 2020 PSN 7530-02-000-9053

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OFFICIAL USE

Certified Mail Fee
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postmark Here

Heirs of R. F. Haynsworth
PO Box 2338
Ruidoso, NM 88355

PS Form 3800, April 2015 PSN 7530-02-000-3047

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OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

The Heirs of Edward Egbert
6165 Los Felinos Cir
El Paso, TX 79912

City, State, ZIP+4[®]

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

9772 4960 2000 0560 7202

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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.

OXY Y-1 Company
5 Greenway Plaza
Suite 110
Houston, TX 77046-0521
Attn: Clay Carroll



9590 9402 7543 2098 9449 66

7021 0950 0002 0364 7086

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* ☒ Agent ☐ Addressee
- B. Received by (Printed Name) *[Signature]* C. Date of Delivery *4/27/23*
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
- ☐ Priority Mail Express[®]
 - ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail[®]
 - ☐ Certified Mail Restricted Delivery
 - ☐ Signature ConfirmationTM
 - ☐ Signature Confirmation Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery

City, State, ZIP+4[®]

PS Form 3800, April 2015 PSN 7530-02-000-9047

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OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
Here

OXY Y-1 Company
5 Greenway Plaza
Suite 110
Houston, TX 77046-0521
Attn: Clay Carroll

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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.

The Heirs of Edward Egbert
6165 Los Felinos Cir
El Paso, TX 79912



9590 9402 7543 2098 9449 97

7021 0950 0002 0364 7116

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* ☐ Agent ☒ Addressee
- B. Received by (Printed Name) *[Signature]* C. Date of Delivery *4-20-23*
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
- ☐ Priority Mail Express[®]
 - ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail[®]
 - ☐ Certified Mail Restricted Delivery
 - ☐ Signature ConfirmationTM
 - ☐ Signature Confirmation Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery

City, State, ZIP+4[®]

PS Form 3800, April 2015 PSN 7530-02-000-9047

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage \$

Postmark Here

Trustees of the James M. and Lida
 Rose Welch Trust
 2705 Gaye Drive
 Roswell, NM 88201

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

5172 4960 2000 0560 1202

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.
 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.

Gene Wood Joint Venture Account
3081 Flagship Drive
May, TX 76857

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
 B. Received by (Printed Name) ☒ Addressee
 C. Date of Delivery 4-22-23
 1. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

2. Article Number (Transfer from service label)
 9590 9402 7543 2098 9450 00
 7021 0950 0002 0364 7123
 PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

3. Service Type
☐ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Postage \$

Postmark Here

Gene Wood Joint Venture Account
3081 Flagship Drive
May, TX 76857

COMPLETE THIS SECTION ON DELIVERY

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

2. Article Number (Transfer from service label)
 9590 9402 7543 2098 9444 92
 7021 0950 0002 0364 7154
 PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

5172 4960 2000 0560 1202

96TS 28TT 2000 029T 2202

6E22 49E0 2000 0560 T202

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0; text-align: center;"> <p>Walter Frederick Wigzell, Trustee of the Wigzell 2009 Trust 1302 S Rusk Street Weatherford, TX 76086</p> </div>	<p>A. Signature <u>[Signature]</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>[Signature]</u> C. Date of Delivery <u>7/2/20</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>2. Article Number: 7022 1670 0002 1102 5196</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number: 7022 1670 0002 1102 5196</p>	<p><input type="checkbox"/> Restricted Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	

U.S. Postal Service[™] CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
Postage \$ _____	
Total F \$ _____	
Sent To \$ _____	
Street and Apt. No., or P.O. Box No. _____	
City, State, ZIP+4® _____	
Recipient Name (Print) _____	
Postmark Here _____	
Teryl Diane Meyers (Blue) 1943 Yajome Street Napa, CA 94559	

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Complete items 1, 2, and 3.

- 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

B. Received by (Printed Name)

C. Date of Delivery

D. Agent

E. Addressee

Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

Eric Chaney Croft & Elizabeth Ann
Williamson, Trustees of the Charla
Geraldine Williamson Trust
PO Box 16
Midland, TX 79702

9590 9402 7635 2122 8777 58

2. Article 7022 1670 0002 1182 5115

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Insured Mail (over \$500)
☐ Insured Mail Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

Total Post

Heirs of Sterling J. Talley
 7145 Cattails Drive
 Wellington, CO 80549

Sent To

City, State,

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

Total Post

Eric Chaney Croft & Elizabeth Ann
 Williamson, Trustees of the Charla
 Geraldine Williamson Trust
 PO Box 16
 Midland, TX 79702

Sent To

City, State,

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Complete items 1, 2, and 3.

- 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

B. Received by (Printed Name)

C. Date of Delivery

D. Agent

E. Addressee

Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

Heirs of Sterling J. Talley
 7145 Cattails Drive
 Wellington, CO 80549

9590 9402 7635 2122 8777 27

2. Article 7022 1670 0002 1182 5134

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Insured Mail (over \$500)
☐ Insured Mail Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™
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 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To \$

Street and \$

City, State \$

Heirs of Martin T. Hart
 2419 33rd Street
 Santa Monica, CA 90405

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To \$

Street and \$

City, State \$

Heirs of T. Welch
 1764 S Paige Creek PI
 Tucson, AZ 85748

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To \$

Street and \$

City, State \$

Heirs of Martin T. Hart
 2419 33rd Street
 Santa Monica, CA 90405

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ 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:

Vladin, LLC
 105 [REDACTED] Fourth Street P.O. Box 100
 Artesia, NM 88210

2. A [REDACTED] 7022 1670 0002 1182 5295 (over \$500)

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Every Restricted Delivery
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Priority Mail Express®

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

5. Received by (Print Name) Dr. Nery C. Date of Delivery 4-24-23

A. Signature ☒ Agent ☐ Addressee ☐

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total Postage \$
 Sent To \$
 Street and \$
 City, State, ZIP+4®

Vladin, LLC
 105 [REDACTED] P.O. Box 100
 Artesia, NM 88210

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 0950 0002 0364 7369

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee	\$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	
Postage	\$	
Total F	\$	
Sent To Malcolm J. Miller, Jr.		
3925 Edgebrook		
Midland, TX 79707		
City, State, ZIP+4 [®]		

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 0950 0002 0364 7345

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee	\$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	
Postage	\$	
Total	\$	
Sent To J. W. Davis		
7001 Cactus Trail		
Midland, TX 79707		
City, State, ZIP+4 [®]		

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 0950 0002 0364 7376

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Sent To Malcolm J. Miller, Jr		
PO Box 74		
Quitman, TX 75783		
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Postage	\$	
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Sent To Richard Brace Wigzell, Trustee of		
the Wigzell 2009 Trust		
104 Deerhorn Ct.		
Lakeway, TX 78734		
City, State, ZIP+4 [®]		

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<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	
Postage	\$	
Total Pos	\$	
Sent To Martina Barrera		
802 West Alvarado		
Artesia, NM 88210		
City, State, ZIP+4 [®]		

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<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	
Postage	\$	
Total Pos	\$	
Sent To James E West, Trustee of the Robert		
N. Avery Family Trust		
74-133 El Paseo		
Suite E		
Palm Desert, CA 92260		
City, State, ZIP+4 [®]		

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Sarador, a Partnership
4855 N Mesa
Suite 120
El Paso, TX 79912

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Jo Ann Yates
256 North 26th Street
Artesia, NM 88210

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Street and A

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The Farmer Family Trust
3301 S Haldeman
Artesia, NM 88210

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City, State, Z

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Malcolm J. Miller, Jr.
5330 Bent Tree Forest Drive
Dallas, TX 75248

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City, State, Z

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John A. Ponsford
6377 La Posta Drive
El Paso, TX 79912

Sent To

Street and A

City, State, Z

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J. W. Davis
35 Havenhill Road
Artesia, NM 88210

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Street and A

City, State, Z

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<input type="checkbox"/> Adult Signature Required	\$
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Sent To **Togiak Resources LLC**
PO Box 479
Artesia, NM 88211

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City, State, ZIP+4®

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Sent To **Alpha Energy Partners**
PO Box 10701
Midland, TX 79702

Street or Apt. No.

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<input type="checkbox"/> Adult Signature Required	\$
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Postage \$

Total Postage \$

Sent To **Euratex Corporation**
PO Box 94
Glade Park, CO 81523

Street and Apt. No.

City, State, ZIP+4®

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<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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Postage \$

Total Postage \$

Sent To **Antares Oil Corporation**
4380 S Syracuse Street
Suite 610
Denver, CO 80237

Street and Apt. No.

City, State, ZIP+4®

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<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
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Sent To **Joe P Liberty**
1918 Crescent Pl
Midland, TX 79705

Street and Apt. No.

City, State, ZIP+4®

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<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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Sent To **Andrew Kenneth Wigzell, Trustee of**
the Wigzell 2009 Trust
1248 Delmont Drive
Richardson, TX 75080

Street and Apt. No.

City, State, ZIP+4®

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<input type="checkbox"/> Certified Mail Restricted Delivery	\$	_____
<input type="checkbox"/> Adult Signature Required	\$	_____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	_____

Postage \$

Total Post \$

Sent To **Malcolm J. Miller, Jr.**

Street and **15316 Falmouth Avenue**

City, State, ZIP+4® **Houston, TX 77084**

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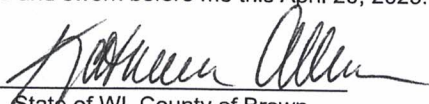
SANTA FE, NM 87504

I, a legal clerk of the **Carlsbad Current Argus**, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal notices and advertisements may be published; that the printed notice attached hereto was published in the regular and entire edition of said newspaper and not in supplement thereof in editions dated as follows:

04/20/2023


Legal Clerk

Subscribed and sworn before me this April 20, 2023:


State of WI, County of Brown
NOTARY PUBLIC


My commission expires

KATHLEEN ALLEN
Notary Public
State of Wisconsin

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PO #:
of Affidavits 1

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EXHIBIT

4

NOTICE

To: Endeavor Energy, Resources, LP, OXY Y-1 Company, Joe P. Liberty, Clinton H. Dean, Dwayne Hamilton, Antares Oil Corporation, TXLA Oil and Gas LLC, Edward Egbert, Galen Egbert, Togiak Resources LLC, J.W. Davis, Malcolm J. Miller, Jr., The Farmer Family Trust, Michael C. Dean, James E. West as Trustee of the Robert N. Avery Family Trust, Robert R. Dean, David C. Underwood a/k/a David Clifford Underwood, Gene Wood Joint Venture Account, Homer L. Wedig, Trustees of the James M. and Lida Rose Welch Trust, M.E. Neesen, Alpha Energy Partners, Dwayne Hamilton, Clinton H. Dean, Jr. Euratex Corporation, Teryl Diane Meyers (Blue), John A. Ponsford, OXY USA WTP Limited Partnership, Tularosa Oil Company, John T. Olive, Mallory L. Miller & Edna Louise Miller (as personal representatives), Richard Brace Wigzell as Trustee of the Wigzell 2009 Trust, Martin Berrera, Sterling J. Talley, V&S Supply Company, First National Bank as Trustee for Amtex Petroleum Corp. Trust 988, Martin T. Hart, Dorsar Investment Company, Andrew Kenneth Wigzell as Trustee of the Wigzell 2009 Trust, R.F. Haynsworth, V. Burfiend, Eric Chancy Croft & Elizabeth A. Williamson as Trustees of the Charla Geraldine Williamson Trust, Walter Frederick Wigzell as Trustee of the Wigzell 2009 Trust, Penroc Oil Corporation, Richard J. Vance, Lorraine Vance, Sarador a Partnership, T. Welch, Lois Geraldine Williamson as Trustee of the J.C. Williamson Trust, Vladin LLC, and Jo Ann Yates, or your heirs, devisees, successors, or assigns: Mewbourne Oil Company has filed four applications with the New Mexico Oil Conservation Division seeking orders amending existing pooling orders to extend the well commencement deadlines for one year. The applications concern the following horizontal spacing units and wells located in Eddy County, New Mexico.

Case No. 23465: the N/2S/2 of Section 1 and the N/2S/2 of Section 2, Township 20 South, Range 28 East, NMPM. The unit will be dedicated to (i) the Desert Eagle 1/2 B2IL Fed. Com. Well No. 1H and (ii) the Desert Eagle 1/2 B3IL Fed. Com. Well No. 1H (Bone Spring wells);

Case No. 23466: the S/2S/2 of Section 1 and the S/2S/2 of Section 2, Township 20 South, Range 28 East, NMPM. The unit will be dedicated to (i) the Desert Eagle 1/2 B2PM Fed. Com. Well No. 1H and (ii) the Desert Eagle 1/2 B3PM Fed. Com. Well No. 1H (Bone Spring wells);

Case No. 23443: Lots 1-4 and the S/2N/2 (the N/2) of Section 1 and Lots 1-4 and the S/2N/2 (the N/2) of Section 2, Township 20 South, Range 28 East, NMPM. The unit will be dedicated to (i) the Desert Eagle 1/2 B2AD Fed. Com. Well No. 1H, (ii) the Desert Eagle 1/2 B2HE Fed. Com. Well No. 1H, and (iii) the Desert Eagle 1/2 B3AD Fed. Com. Well No. 1H (Bone Spring wells); and

Case No. 23467: the S/2 of Section 1 and the S/2 of Section 2, Township 20 South, Range 28 East, NMPM. The unit will be dedicated to the Desert Eagle 1/2 W0PM Fed. Com. Well No. 1H (A Wolfcamp well).

Also to be considered will be the designation of applicant as operator of the wells. This matter is scheduled for hearing at 8:15 a.m. on Thursday, May 4 2023. During the current circumstances, state buildings are closed to the public and the hearing will be conducted remotely. To view the hearing docket and to determine how to participate in an electronic hearing, go to <https://www.emnrd.nm.gov/ocd/hearing-info/>, or contact Marlene Salvidrez at Marlene.Salvidrez@emnrd.nm.gov. You are not required to attend this hearing, but as an owner of an interest who may be affected by the application, you may appear and present testimony. Failure to appear at that time and become a party of re-

cord will preclude you from contesting this 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 five business days before the hearing date. This statement may be filed online with the Division at ocd.hearings@emnrd.nm.gov, and should include: The name of the party and his or her attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate time the party will need to present his or her 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. The attorney for applicant is James Bruce, P.O. Box 1056, Santa Fe, New Mexico 87504, jamesbruc@aol.com. The units are located approximately 14-1/2 miles northeast of Carlsbad, New Mexico.
#0005672283 Current Argus
April 20, 2023