

CASE NOS. 21063 - 21065

**APPLICATIONS OF
MATADOR PRODUCTION COMPANY FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO**

EXHIBITS – PART II

A. Landman's Affidavit

{ B-1. Affidavit of Notice
B-2. Affidavit of Publication

C Geologist's Affidavit

D. Applications and Proposed Notices

E. Pooling Checklists

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

APPLICATIONS OF MATADOR PRODUCTION
COMPANY FOR COMPULSORY POOLING, LEA
COUNTY, NEW MEXICO.

Case Nos. 21063 - 21065

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 Matador Production Company.
3. Matador Production 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 applications filed herein.
4. Notice of the applications was provided to the interest owners, at their last known addresses, by certified mail. Copies of the notice letters and certified return receipts are attached hereto as Attachment A.
5. Matador Production 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: 7/13/21

James Bruce
James Bruce

EXHIBIT **B-1**

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

September 30, 2020

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed are copies of the following applications filed with the New Mexico Oil Conservation Division by Matador Production Company:

1. Case No. 21063, for compulsory pooling of the Nina Cortell Fed. Com. Well Nos. 125H and 131H, Bone Spring wells in the W/2W/2 of Section 3 and the W/2W/2 of Section 10;
2. Case No. 21064, for compulsory pooling of the Nina Cortell Fed. Com. Well Nos. 126H, 132H, and 112H, Bone Spring wells in the E/2W/2 of Section 3 and the E/2W/2 of Section 10; and
3. Case No. 21065, for compulsory pooling of the Nina Cortell Fed. Com. Well No. 202H, a Wolfcamp well in the E/2W/2 of Section 3 and the E/2W/2 of Section 10

all in Township 22 South, Range 32 East, NMPM, Lea County, New Mexico.

These matters are scheduled for hearing at 8:15 a.m. on Thursday, October 22, 2020. During the COVID-19 Public Health Emergency, state buildings are closed to the public and the hearing will be conducted remotely. To determine the location of the hearing or to participate in an electronic hearing, go to emnrd.state.nm.us/OCD/hearings or see the instructions posted on the Division's website, <http://emnrd.state.nm.us/OCD/announcements.html>.

You are not required to attend this hearing, but as an owner 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.

ATTACHMENT

A

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, October 15, 2020. This statement may be filed online with the Division at ocd.hearings@state.nm.us, 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,

A handwritten signature in blue ink that reads "James Bruce". The signature is written in a cursive style with a large initial "J".

James Bruce

Attorney for Matador Production Company

EXHIBIT A

Abyss, Inc.
3100 Lantana Lane
Midland, TX 79705

Adley Properties LLC
P.O. Box 3327
Midland, TX 79702

Beverly Jean Renfro Barr,
Trustee of the Family Trust created
under the Last Will and Testament of
Richard Kevin Barr, deceased
8027 Chalk Knoll Dr.
Austin, TX 78735

Capstan Properties, LP
P.O. Box 11025
Midland, TX 79702

ConocoPhillips Company
600 North Dairy Ashford
Houston, TX 77079

Cynthia Mae Wilson,
Trustee of the Bypass Trust created
under the Last Will and Testament of
Scott E. Wilson
4601 Mirador Drive
Austin, TX 78735

David Pietenpol
4714 Valley Ridge Court
Fort Collins, CO 80526

Frankie Jo Mills, Trustee of
The Jimmy Mills 2005 GST Trust
1602 Avenue J
Abernathy, TX 79311

Frankie Jo Mills, Trustee of
The Jimmy Mills GST Trust
1602 Avenue J
Abernathy, TX 79311

Hunt Oil Company
1445 Ross at Field
Dallas, TX 75202

Jack Lowry
15001 Spencer Mountain Road
Jones, OK 73049

Judson Land and Minerals, LP
3736 Bee Cave Rd.
Suite #1, PMB-181
Austin, TX 78746

Karen V. and William H. Martin Energy, Ltd.
P.O. Box 2230
Midland, TX 79702

Lyra Properties, LLC
P.O. Box 3970
Decatur, GA 30031

Magic Dog Oil & Gas, Ltd.
P.O. Box 10708
Midland, TX 79702

Marjean Martin Murphy, Trustee of the
Marjean Martin Murphy Heritage Trust
u/t/a dated August 22, 2014
P.O. Box 2423
Boerne, TX 78006

Mountain Lion Oil & Gas, LLC
7941 Katy Freeway
#117
Houston, TX 77024

Ostrich Oil & Gas, LLC
405 N. Marienfeld
Suite 200
Midland, TX 79701

Peanut Oil Co.
P.O. Box 8243
Horseshoe Bay, TX 78657

Rebecca B. Dehlinger and husband,
Mark T. Dehlinger
3100 Lantana Lane
Midland, TX 79705

Richard C. Geesaman and wife,
Breida Geesaman
820 Pine
Gold Hill, Boulder, CO 80302

W/K Land Company
330 Airport Road
Boulder, CO 80301

USPS Tracking®

FAQs >

Track Another Package +

Tracking Number: 70192970000076429416

Remove X

Your item was delivered to an individual at the address at 1:33 pm on October 5, 2020 in MIDLAND, TX 79701.

✓ Delivered, Left with Individual

October 5, 2020 at 1:33 pm
MIDLAND, TX 79701

Get Updates ▾

Text & Email Updates

Tracking History

Product Information

7019 2970 0000 7642 9416

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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	\$
Postage	\$
Total Postage and Fee:	Ostrich Oil & Gas, LLC
	405 N. Marienfeld
	Suite 200
Sent To	Midland, TX 79701
Street and Apt. No., or P.O. Box No.	
City, State, ZIP+4®	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

Feedback

Can't find what you're looking for?

Go to our FAQs section to find answers to your tracking questions.

James Bruce
P.O. Box 1056

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- 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 and Fees

Sent To Hunt Oil Company
1445 Ross at Field
Street and Apt. No., or PO Box, Dallas, TX 75202

City, State, ZIP+4®

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Postmark
Here

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

CERTIFIED MAIL®



0 0000 7642 9331

[Handwritten signature]

NIXIE

9861376848
ANK

Hunt Oil Company
1445 Ross at Field

US POSTAGE
FIRST-CLASS
062513292292
87501
000124420



81003.97

James Bruce

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

Postage

Total Postage and Fees

Sent To W/K Land Company
330 Airport Road
Street and Apt. No., or PO Box No., Boulder, CO 80301

City, State, ZIP+4®

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

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

CERTIFIED MAIL®



0000 7642 9454

[Handwritten signature]

W/K Land Company

NIXIE

808 DE 1 0010/08/20

RETURN TO SENDER
NO SUCH NUMBER
UNABLE TO FORWARD

NSN

BC: 87504105656 *0520-07801-03-34

81003.82

US POSTAGE
FIRST-CLASS
062513292292
87501
000124420





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

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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	\$

Postage \$

Total Postage and Fees \$

Sent To Peanut Oil Co.
P.O. Box 8243
Horseshoe Bay, TX 78657

Street and Apt. No., or P.O. Box

City, State, ZIP+4®

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10.5.20

NOTICE
NOTICE
TURNED

87504>1056

Peanut Oil Co.
P.O. Box 8243

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

80187504105656



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

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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	\$

Postage \$

Total Postage and Fees \$

Sent To Capstan Properties, LP
P.O. Box 11025
Midland TX 79702

Street and Apt. No., or P.O. Box

City, State, ZIP+4®

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10.5.20

NOTICE
NOTICE
TURNED

87504>1056

Capstan Properties, LP
P.O. Box 11025

RETURN TO SENDER
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UNABLE TO FORWARD

8018750411025



7019 2970 0000 7642 9300

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Extra Services & Fees <i>(check box, add fee as appropriate)</i>	
<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 Postage and Fees \$ _____	
Sent To <i>Street and Apt. No., or PO Box No.</i>	David Pietenpol 4714 Valley Ridge Court Fort Collins, CO 80526
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Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Postmark
Here

Sent To _____

ConocoPhillips Company
600 North Dairy Ashford
Houston, TX 77079

Street and Apt. No., or PO Box _____

City, State, ZIP+4® _____

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2826 2492 0000 0262 6702

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

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.

Article Addressed to:

Karen V. and William H. Martin Energy, Ltd.
P.O. Box 2230
Midland, TX 79702

A. Signature Kay idell Agent Addressee

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

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

3. Service Type

Adult Signature

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Restricted Delivery

Domestic Return Receipt



9590 9402 5941 0062 9941 88

2. Article 7019 2970 0000 7642 9362

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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 and Fees \$ _____

Postmark
Here

Sent To _____

Karen V. and William H. Martin Energy, Ltd.
P.O. Box 2230
Midland, TX 79702

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

City, State, ZIP+4® _____

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

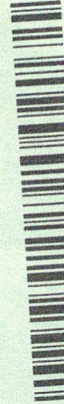
2926 2492 0000 0262 6702

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:

ConocoPhillips Company
600 North Dairy Ashford
Houston, TX 77079



9590 9402 5941 0062 9651 26

2. Article Number (Transfer from carrier label)

7019 2970 0000 7642 9267

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Kay idell Agent Addressee

B. Received by (Printed Name) Kay idell C. Date of Delivery 10/6/20

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

Collect on Delivery Restricted Delivery

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Restricted Delivery

Domestic Return Receipt

NC

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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

Frankie Jo Mills, Trustee of
The Jimmy Mills 2005 GST Trust
1602 Avenue J
Abernathy, TX 79311

Sent To
Street and Apt. No., or
City, State, ZIP+4®

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

2796 2492 0000 0262 6702

COMPLETE THIS SECTION ON DELIVERY

A. Signature XCS 7/8 6/19 Agent Addressee
B. Received by (Printed Name) Mark T. Dehlinger 10.05.20 C. Date of Delivery
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

Rebecca B. Dehlinger and husband,
Mark T. Dehlinger
3100 Lantana Lane
Midland, TX 79705

9590 9402 5941 0062 9942 63

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
 Return Receipt for Merchandise
 Signature Confirmation

Domestic Return Receipt

2. Article Number (Transfer from envelope label) (over \$500) 7019 2970 0000 7642 9317 NC

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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

Rebecca B. Dehlinger and husband,
Mark T. Dehlinger
3100 Lantana Lane
Midland, TX 79705

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

0246 2492 0000 0262 6702

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:

Frankie Jo Mills, Trustee of
The Jimmy Mills 2005 GST Trust
1602 Avenue J
Abernathy, TX 79311

9590 9402 5941 0062 9651 57

2. Article Number (Transfer from envelope label) (over \$500) 7019 2970 0000 7642 9317 NC

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature X 1101-0-19 Agent Addressee
B. Received by (Printed Name) C. Date of Delivery 10-5-2020
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Adult Signature
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt

7019 2970 0000 7642 9317 (over \$500) NC

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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 and Fees \$

Sent To \$

Adley Properties LLC
P.O. Box 3327
Midland, TX 79702

Street and Apt. No., or PO Box

City, State, ZIP+4®

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7019 2970 0000 0262 6702

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:

Marjean Martin Murphy, Trustee of the Marjean Martin Murphy Heritage Trust w/a dated August 22, 2014
P.O. Box 2423
Boerne, TX 78006

2. Article Addressed to:

7019 2970 0000 7642 9393 (over \$500) **NC**

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X Murphy Date of Delivery

B. Received by (Printed Name) **Marjean Murphy**

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

Adult Signature Restricted Delivery

Certified Mail®

Return Receipt for Merchandise

Certified Mail Restricted Delivery

Signature Confirmation™

Collect on Delivery Restricted Delivery

Signature Confirmation Restricted Delivery

Domestic Return Receipt

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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 and Fees \$

Sent To \$

Adley Properties LLC
P.O. Box 3327
Midland, TX 79702

Street and Apt. No., or PO Box

City, State, ZIP+4®

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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:

Adley Properties LLC
P.O. Box 3327
Midland, TX 79702

2. Article Addressed to:

7019 2970 0000 7642 9256 (over \$500) **PC**

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X [Signature] Date of Delivery

B. Received by (Printed Name) **LARRY HILL**

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

Adult Signature Restricted Delivery

Certified Mail®

Return Receipt for Merchandise

Certified Mail Restricted Delivery

Signature Confirmation™

Collect on Delivery Restricted Delivery

Signature Confirmation Restricted Delivery

Domestic Return Receipt

7019 2970 0000 0262 6702

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. Article Addressed to:

Jack Lowry
15001 Spencer Mountain Road
Jones, OK 73049



9590 9402 5941 0062 9941 71

7019 2970 0000 7642 9348

(over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X** Agent Addressee
B. Received by (Printed Name) **AG R+Y** C. Date of Delivery **10/5/2008**
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
 Collect on Delivery Restricted Delivery
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

7019 2970 0000 7642 9348

(over \$500)

Domestic Return Receipt

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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 \$
Postage \$
Total Postage and Fees \$

Cynthia Mae Wilson,
Trustee of the Bypass Trust created
under the Last Will and Testament of
Scott E. Wilson
4601 Mirador Drive
Austin, TX 78735

Street and Apt. No., or P.O. Box
City, State, ZIP+4®
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions

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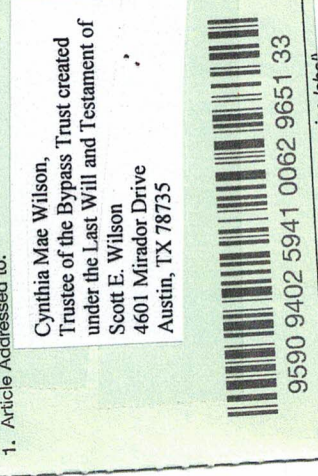
Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$

Jack Lowry
15001 Spencer Mountain Road
Jones, OK 73049

Street and Apt. No., or P.O. Box
City, State, ZIP+4®
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
Cynthia Mae Wilson,
Trustee of the Bypass Trust created
under the Last Will and Testament of
Scott E. Wilson
4601 Mirador Drive
Austin, TX 78735



9590 9402 5941 0062 9651 33

7019 2970 0000 7642 9294

(over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X** Agent Addressee
B. Received by (Printed Name) **Cynthia M Wilson** C. Date of Delivery
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
 Collect on Delivery Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt

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

Mountain Lion Oil & Gas, LLC
7941 Katy Freeway
#117
Houston, TX 77024

Total Postage and

Sent To

Street and Apt. No., or P.O. Box

City, State, ZIP+4®

See Reverse for Instructions

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

6046 2492 0000 0262 6702

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

Collect on Delivery

Collect on Delivery Restricted Delivery

Merchandise

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Domestic Return Receipt

NC

PS Form 3811, July 2015 PSN 7530-02-000-9053

1. Article Addressed to:

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.

Magic Dog Oil & Gas, Ltd.
P.O. Box 10708
Midland, TX 79702

9590 9402 5941 0062 9942 18

7019 2970 0000 7642 9386

2. Article Number (Transfer from service label)

Article Addressed to:

PS Form 3811, July 2015 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 \$

Postage

Total Postage and Fees

Sent To

Street and Apt. No., or P.O. Box

City, State, ZIP+4®

Magic Dog Oil & Gas, Ltd.
P.O. Box 10708
Midland, TX 79702

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

See Reverse for Instructions

9496 2492 0000 0262 6702

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

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.

Mountain Lion Oil & Gas, LLC
7941 Katy Freeway
#117
Houston, TX 77024

9590 9402 5941 0062 9942 32

7019 2970 0000 7642 9409

2. Article Number

PS Form 3811, July 2015 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

Collect on Delivery

Collect on Delivery Restricted Delivery

Merchandise

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Domestic Return Receipt

NC

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

Postage \$
Total Postage and Fees \$
Sent To
Frankie Jo Mills, Trustee of
The Jimmy Mills GST Trust
1602 Avenue J
Abernathy, TX 79311
City, State, Zip+4

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

4266 2492 0000 0262 6702

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X *Brett Croft* Addressee
B. Received by (Printed Name) *Brett Croft* C. Date of Delivery *10-5-20*
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®
 Return Receipt for Merchandise
 Collect on Delivery Restricted Delivery
 Signature Confirmation™
Restricted Delivery

2. Article Addressed to:
7019 2970 0000 7642 9355
(over 3500) *NC*
Domestic Return Receipt

PS Form 3811, July 2015 PSN 7530-02-000-9053

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:

Judson Land and Minerals, LP
3736 Bee Cave Rd.
Suite #1, PMB-181
Austin, TX 78746



9590 9402 5941 0062 9941 95

2. Article Addressed to:
7019 2970 0000 7642 9355
(over 3500) *NC*
Domestic Return Receipt

PS Form 3811, July 2015 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

Postage \$
Total Postage and Fees \$

Sent To
Judson Land and Minerals, LP
3736 Bee Cave Rd.
Suite #1, PMB-181
Austin, TX 78746
City, State, Zip+4

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

5566 2492 0000 0262 6702

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:

Frankie Jo Mills, Trustee of
The Jimmy Mills GST Trust
1602 Avenue J
Abernathy, TX 79311



9590 9402 5941 0062 9651 64

2. Article Addressed to:
7019 2970 0000 7642 9324
(over 3500) *NC*
Domestic Return Receipt

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X *1101 C-19* Addressee
B. Received by (Printed Name) *1101 C-19* C. Date of Delivery *10-5-2020*
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®
 Return Receipt for Merchandise
 Collect on Delivery Restricted Delivery
 Signature Confirmation™
Restricted Delivery

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

Postage
Total Postage and
\$
Sent To
\$
Street and Apt. No.,
City, State, ZIP+4®
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Beverly Jean Renfro Barr,
Trustee of the Family Trust created
under the Last Will and Testament of
Richard Kevin Barr, deceased
8027 Chalk Knoll Dr.
Austin, TX 78735

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Beverly Barr
B. Received by (Printed Name)
Beverly Barr
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
 Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt
7019 2970 0000 7642 9379
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Linda Johnson
B. Received by (Printed Name)
Linda Johnson
C. Date of Delivery
10-17-20
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®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt
7019 2970 0000 7642 9379
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

1. Article
Beverly Jean Renfro Barr,
Trustee of the Family Trust created
under the Last Will and Testament of
Richard Kevin Barr, deceased
8027 Chalk Knoll Dr.
Austin, TX 78735

2. Article
7019 2970 0000 7642 9379
PS Form 3811, July 2015 PSN 7530-02-000-9053

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.

Lyra Properties, LLC
P.O. Box 3970
Decatur, GA 30031

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 and Fees \$
Sent To \$
Street and Apt. No., or PO Box
City, State, ZIP+4®
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

Postmark Here

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 and Postage \$

Sent To Richard C. Geesaman and wife,
Breida Geesaman
820 Pine
Street and Apt. No.: Gold Hill, Boulder, CO 80302

City, State, Zip+4® See Reverse for Instructions

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) *CS PRG (bvlr)*

C. Date of Delivery *10/05/20*

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

1. Article Addressed to:

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.

2. Article Addressed to: *NC*

3. Service Type

Priority Mail Express®

Registered Mail™

Adult Signature Restricted Delivery

Certified Mail®

Return Receipt for Merchandise

Signature Confirmation™

Collect on Delivery Restricted Delivery

Collect on Delivery Restricted Delivery

Postage \$

Total Postage and Postage \$

Sent To Abyss, Inc.
3100 Lantana Lane
Midland, TX 79705

City, State, Zip+4® See Reverse for Instructions

PS Form 3811, July 2015 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

Postmark Here

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 and Fees \$

Sent To Abyss, Inc.
3100 Lantana Lane
Midland, TX 79705

City, State, Zip+4® See Reverse for Instructions

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) *COVID-19*

C. Date of Delivery

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below: *520 Pine*

1. Article Addressed to:

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.

2. Article Addressed to: *NC*

3. Service Type

Priority Mail Express®

Registered Mail™

Adult Signature Restricted Delivery

Certified Mail®

Return Receipt for Merchandise

Signature Confirmation™

Collect on Delivery Restricted Delivery

Postage \$

Total Postage and Fees \$

Sent To Richard C. Geesaman and wife,
Breida Geesaman
820 Pine
Gold Hill, Boulder, CO 80302

City, State, Zip+4® See Reverse for Instructions

PS Form 3811, July 2015 PSN 7530-02-000-9053

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

January 30, 2020

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed are copies of the following applications filed with the New Mexico Oil Conservation Division by Matador Production Company:

1. Case No. 21063, for compulsory pooling of the Nina Cortell Fed. Com. Well Nos. 125H and 131H, Bone Spring wells in the W/2W/2 of Section 3 and the W/2W/2 of Section 10;
2. Case No. 21064, for compulsory pooling of the Nina Cortell Fed. Com. Well Nos. 126H, 132H, and 112H, Bone Spring wells in the E/2W/2 of Section 3 and the E/2W/2 of Section 10;
3. Case No. 21065, for compulsory pooling of the Nina Cortell Fed. Com. Well No. 202H, a Wolfcamp well in the E/2W/2 of Section 3 and the E/2W/2 of Section 10

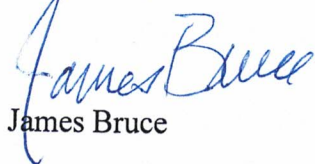
all in Township 22 South, Range 32 East, NMPM, Lea County, New Mexico.

These matters are re-scheduled for hearing at 8:15 a.m. on Thursday, February 20, 2020, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by these 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 Regulations to file a Pre-Hearing Statement no later than Thursday, February 13, 2013. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The name of the party and

its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,

A handwritten signature in blue ink that reads "James Bruce". The signature is written in a cursive style with a large initial "J".

James Bruce

Attorney for Matador Production Company

EXHIBIT A

Ostrich Oil and Gas, LLC
Suite 200
405 North Marienfeld
Midland, Texas 79701

COG Operating LLC
600 West Illinois Avenue
Midland, Texas 79701

ConocoPhillips Company
600 North Dairy Ashford
Houston, Texas 77079

Ning C.

9668 0027 0000 0497 6702

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 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.

COG Operating LLC
 600 West Illinois Avenue
 Midland, Texas 79701

9590 9402 4582 8278 6167 82

2. Article Addressed to:
 7019 1640 0000 1700 8996 (over \$500)

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 B. Received by (Printed Name) Addressee
 C. Date of Delivery 2/4/20

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

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

Postmark Here

PS Form 3811, July 2015 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

Total Postage and Fees \$
 Sent To ConocoPhillips Company
 600 North Dairy Ashford
 Houston, Texas 77079
 Street and Apt. No., or P.O.
 City, State, ZIP+4®

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

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 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.

ConocoPhillips Company
 600 North Dairy Ashford
 Houston, Texas 77079

9590 9402 4582 8278 6167 75

2. Article Addressed to:
 7019 1640 0000 1700 8996

COMPLETE THIS SECTION ON DELIVERY

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

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

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

Postmark Here

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

6006 0027 0000 0497 6702

7019 2280 0002 1748 1499

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

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

MIDLAND, TX 79701

OFFICIAL USE

Certified Mail Fee \$3.55

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

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.70

Total Postage and Fees \$7.10

Sent To Ostrich Oil and Gas, LLC
Suite 200
Street and Apt. No., 405 North Marienfeld
City, State, ZIP+4® Midland, Texas 79701

Postmark Here
FEB 21 2020
02/21/2020

050087501

USPS

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

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

October 1, 2020

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

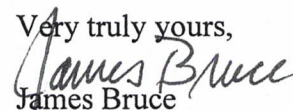
Ladies and gentlemen:

Enclosed is an application for compulsory pooling (Case No. 21063), filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding two Bone Spring wells in the W/2W/2 of Section 3 and the W/2W/2 of Section 10, Township 22 South, Range 32 East, N.M.P.M., Lea County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, October 22, 2020. During the COVID-19 Public Health Emergency, state buildings are closed to the public and the hearing will be conducted remotely. To determine the location of the hearing or to participate in an electronic hearing, go to emnrd.state.nm.us/OCD/hearings or see the instructions posted on the Division's website, <http://emnrd.state.nm.us/OCD/announcements.html>.

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 record 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 Thursday, October 15, 2020. This statement may be filed online with the Division at ocd.hearings@state.nm.us, 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 Matador Production Company

EXHIBIT

A

BXP Royalty, LP
P.O. Box 9023
Dallas, TX 75209

Coal Gas Mart, LLC
7521 NW 130th Street
Oklahoma City, OK 73142

COG Operating LLC
600 W. Illinois Avenue
Midland, TX 79701

Crownrock Minerals, L.P.
P.O. Box 51933
Midland, TX 79710

Custer & Wright
P.O. Box 2334
Midland, TX 79702

Jastrow Family Oil & Gas, LLC
6300 Bee Cave Road
Building 1, 6th Floor
Austin, TX 78746

John Lawrence Thoma,
Trustee of the Cornerstone Family Trust
P.O. Box 17656
Golden, CO 80402

Kingdom Investments, Limited
1601 Elm St.
Suite 3400
Dallas, TX 75201

LRF JR, LLC
P.O. Box 11327
Midland, TX 79702

McVay Drilling Company
P.O. Box 2450
Hobbs, NM 88240

Randall Capps, a single man
P.O. Box 6025
Midland, TX 79704

Stellar Opportunity Fund, LP
11110 N. Country Squire
Houston, TX 77024

Vision Energy, Inc.
P.O. Box 2459
Carlsbad, NM 88221

WPX Energy Permian, LLC
3500 One Williams
Center MD 35
Tulsa, OK 74172

USPS Tracking®

FAQs >

Track Another Package +

Tracking Number: 70192970000076429461

Remove X

Your item was delivered to an individual at the address at 7:41 am on October 13, 2020 in TULSA, OK 74172.

✓ Delivered, Left with Individual

October 13, 2020 at 7:41 am
TULSA, OK 74172

Get Updates ▾

Text & Email Updates

Tracking History

Product Information

7019 2970 0000 7642 9461

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)	
<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 Postage and Fees	\$
Sent To	WPX Energy Permian, LLC
Street and Apt. No., or PO	3500 One Williams
City, State, ZIP+4®	Center MD 35 Tulsa OK 74172
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

Postmark Here

Feedback

Can't find what you're looking for?

Go to our FAQs section to find answers to your tracking questions.

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)

<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 Postage and Fees \$

Sent To Coal Gas Mart, LLC

Street and Apt. No., or P.O. Box 7521 NW 130th Street

City, State, Zip+4® Oklahoma City, OK 73142

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

7029 2970 0000 0262 6702

TOP OF ENVELOPE TO THE RIGHT
 ADDRESS FOLD AT DOTTED LINE

FIED MAIL®

0000 7642 9584

stamps.com
 S81003.73

\$7.05
 US POSTAGE
 FIRST CLASS
 062513292292
 87501
 000124426

USPS
 eSolutions

Coal Gas Mart, LLC
 7521 NW 130th Street
 Oklahoma City, OK 73142

NIXIE 731 DE 1 0010/26/20

RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD

BC: 87504105656 *0557-09213-26-25

UNC 87504>1056

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)

<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 Postage and Fees \$

Sent To Kingdom Investments, Limited

Street and Apt. No., or P.O. Box 1601 Elm St. Suite 3400

City, State, Zip+4® Dallas, TX 75201

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

Jan 2256 2492 0000 0262 6702

ENVELOPE TO THE RIGHT
 FOLD AT DOTTED LINE

FIED MAIL®

0 7642 9522

stamps.com
 3.76

\$7.05
 US POSTAGE
 FIRST CLASS
 062513292292
 87501
 000124426

USPS
 eSolutions

Kingdom Investments, Limited
 1601 Elm St.
 Suite 3400

NIXIE 750 FE 1 0010/26/20

RETURN TO SENDER
 NOT DELIVERABLE AS ADDRESSED
 UNABLE TO FORWARD

932608892301323

**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 and Fees \$ _____

Customer & Wright
P.O. Box 2334
Midland, TX 79702

City, State, ZIP+4® _____

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

9596 2492 0000 0262 6702

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

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.

Article Addressed to:

Crownrock Minerals, L.P.
P.O. Box 51933
Midland, TX 79710

Article Number (Transfer from another mailpiece)
7019 2970 0000 7642 9560

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) Wilson Shelby C. Date of Delivery 10/01/2010

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

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Collect on Delivery Return Receipt for Merchandise

Certified Mail Restricted Delivery Signature Confirmation™

Restricted Delivery Signature Confirmation Restricted Delivery

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 and Fees \$ _____

Customer & Wright
P.O. Box 2334
Midland, TX 79702

City, State, ZIP+4® _____

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.

1. Article Addressed to:

Customer & Wright
P.O. Box 2334
Midland, TX 79702



9590 9402 5941 0062 9650 41

2. Article Number (Transfer from another mailpiece)

7019 2970 0000 7642 9553

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name) Wilson Shelby C. Date of Delivery 10-7-20
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
- Adult Signature Priority Mail Express®
- Adult Signature Restricted Delivery Registered Mail™
- Certified Mail® Registered Mail Restricted Delivery
- Certified Mail Restricted Delivery Return Receipt for Merchandise
- Collect on Delivery Signature Confirmation™
- Restricted Delivery Signature Confirmation Restricted Delivery
- Domestic Return Receipt

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

9596 2492 0000 0262 6702

**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 and Fees \$

Sent To **McVay Drilling Company**
 P.O. Box 2450
 Hobbs, NM 88240

Street and Apt. No., or City, State, ZIP+4®

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

Postmark Here

9506 2492 0000 0262 6702

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:

Vision Energy, Inc.
 P.O. Box 2459
 Carlsbad, NM 88221

9590 9402 5941 0062 9674 65

2. Article (over \$500)

7019 2970 0000 7642 9478

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 B. Received by (Printed Name) C. Date of Delivery
 Aileen L. Grier 10-5-20
 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
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

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 and Fees \$

Sent To **McVay Drilling Company**
 P.O. Box 2450
 Hobbs, NM 88240

Street and Apt. No., or City, State, ZIP+4®

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

Postmark Here

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:

McVay Drilling Company
 P.O. Box 2450
 Hobbs, NM 88240

9590 9402 5941 0062 9674 96

2. Article (over \$500)

7019 2970 0000 7642 9508

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 B. Received by (Printed Name) C. Date of Delivery
 Waret McCauley 10/7/20
 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
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt

9506 2492 0000 0262 6702

**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 and Fees \$

Sent To **Vision Energy, Inc.**
 P.O. Box 2459
 Carlsbad, NM 88221

Street and Apt. No., or City, State, ZIP+4®

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

Postmark Here

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.

Article Addressed to:

Stellar Opportunity Fund, LP
11110 N. Country Squire
Houston, TX 77024



9590 9402 5941 0062 9674 72

2. Article 7019 2970 0000 7642 9485

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature *X [Signature]*
B. Received by (Printed Name) *Singer*
C. Date of Delivery *10/15/20*
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®, Collect on Delivery, Collect on Delivery Restricted Delivery, Signature Confirmation™, Signature Confirmation Restricted Delivery

NC 63

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 John Lawrence Thoma,
Trustee of the Cornerstone Family Trust
P.O. Box 17656
Street and Apt. Golden, CO 80402
City, State, Zip+4®

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

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- 1. Article Addressed to:
John Lawrence Thoma,
Trustee of the Cornerstone Family Trust
P.O. Box 17656
Golden, CO 80402
- 2. A. 7019 2970 0000 7642 9539

1. Article Addressed to:

John Lawrence Thoma,
Trustee of the Cornerstone Family Trust
P.O. Box 17656
Golden, CO 80402



9590 9402 5941 0062 9650 27

2. A 7019 2970 0000 7642 9539

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature *X [Signature]*
B. Received by (Printed Name) *John Thoma*
C. Date of Delivery *10/15/20*
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®, Collect on Delivery, Collect on Delivery Restricted Delivery, Signature Confirmation™, Signature Confirmation Restricted Delivery

Domestic Return Receipt

NC 63

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 and Fees \$

Sent To Stellar Opportunity Fund, LP
11110 N. Country Squire
Houston, TX 77024
Street and Apt. No., or POE
City, State, Zip+4®

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

See Reverse for Instructions

2012 9702 0000 2642 9515

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 and Fees \$ _____

Sent To **LRF JR, LLC**

P.O. Box 11327

Street and Apt. No., or PO **Midland, TX 79702**

City, State, ZIP+4® _____

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

Postmark Here

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.


Article Addressed to:

Randall Capps, a single man
P.O. Box 6025
Midland, TX 79704

2. Article N **7019 2970 0000 7642 9492** Delivery **NC 63**

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent Addressee

B. Received by (Printed Name) **Randall Capps** 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®

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

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

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

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 and Fees \$ _____

Sent To **Randall Capps, a single man**

P.O. Box 6025

Street and Apt. No., Midland, TX 79704

City, State, ZIP+4® _____

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

Postmark Here

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.

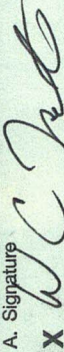
Article Addressed to:

LRF JR, LLC
P.O. Box 11327
Midland, TX 79702

2. Article **7019 2970 0000 7642 9515** (OVER 35.00) **NC 63**

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent Addressee

B. Received by (Printed Name) **W C TATE** Date of Delivery **10/6/20**

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®

Return Receipt for Merchandise

Collect on Delivery - Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

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

Total Postage and Fees \$
Jastrow Family Oil & Gas, LLC
6300 Bec Cave Road
Building 1, 6th Floor
Austin, TX 78746

Sent To
Street and Apt. No., or
City, State, ZIP+4®

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

9456 2492 0000 2970 0000 7642 6702

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
BXP Royalty, LP
P.O. Box 9023
Dallas, TX 75209

2. Article 7019 2970 0000 7642 9591 (over \$500) NC 63
Domestic Return Receipt

3. Service Type
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Certified Mail®
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

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

A. Signature Agent Addressee
 Murre
 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:

COMPLETE THIS SECTION ON DELIVERY

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

1. Article Addressed to:
Jastrow Family Oil & Gas, LLC
6300 Bec Cave Road
Building 1, 6th Floor
Austin, TX 78746

2. Article 7019 2970 0000 7642 9546 (over \$500) NC 63
Domestic Return Receipt

3. Service Type
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Certified Mail®
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

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

Total Postage and Fees \$
BXP Royalty, LP
P.O. Box 9023
Dallas, TX 75209

Sent To
Street and Apt. No., or PO Box
City, State, ZIP+4®

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

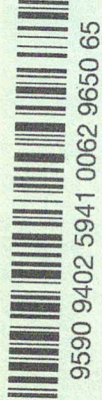
7656 2492 0000 2970 0000 7642 6702

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:

COG Operating LLC
600 W. Illinois Avenue
Midland, TX 79701



2. Article No. 7019 2970 0000 7642 9577

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] Agent
 Addressee
 B. Received by (Printed Name) [Signature] C. Date of Delivery 10-5-20
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail Restricted Delivery (over \$500)
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

NC 63 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 and Fees \$ _____

Sent To COG Operating LLC
600 W. Illinois Avenue
Street and Apt. No., or Midland, TX 79701
 City, State, Zip+4® _____

Postmark Here

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

Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA

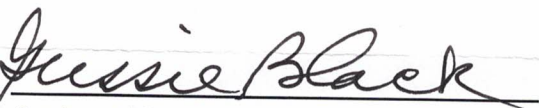
I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated
June 30, 2021
and ending with the issue dated
June 30, 2021.



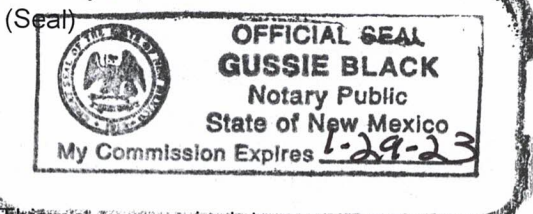
Publisher

Sworn and subscribed to before me this
30th day of June 2021.



Business Manager

My commission expires
January 29, 2023



This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said

LEGAL NOTICE June 30, 2021

NOTICE

To: Ostrich Oil & Gas, LLC, W/K Land Company, Capstan Properties, LP, Peanut Oil Co., Hunt Oil Company, and David Pietenpol (as to all three cases), and WPX Energy Permian, LLC, Kingdom Investments, Limited, and Coal Gas Mart, LLC (as to Case No. 21063 only), or your successors or assigns: Matador Production Company has filed applications with the New Mexico Oil Conservation Division seeking orders pooling all mineral interests in the following well units:

(a) the Bone Spring formation underlying a horizontal spacing unit comprised of the W/2W/2 of Section 3 and W/2W/2 of Section 10, Township 22 South, Range 32 East, NMPM. The unit will be dedicated to the Nina Cortell Well Nos. 125H and 131H (Case No. 21063);

(b) the Bone Spring formation underlying a horizontal spacing unit comprised of the E/2W/2 of Section 3 and E/2W/2 of Section 10, Township 22 South, Range 32 East, NMPM. The unit will be dedicated to the Nina Cortell Well Nos. 126H, 132H, and 112H (Case No. 21064); and

(c) the Wolfcamp formation underlying a horizontal spacing unit comprised of the E/2W/2 of Section 3 and E/2W/2 of Section 10, Township 22 South, Range 32 East, NMPM. The unit will be dedicated to the Nina Cortell Well No. 202H (Case No. 21065).

All of these lands are located in Lea County, New Mexico. Also to be considered will be the cost of drilling and completing the wells and the allocation of the cost thereof, as well as actual operating costs and charges for supervision, designation of applicant as operator of the wells and a 200% charge for the risk involved in drilling and completing the wells.

The applications are scheduled to be heard at 8:15 a.m. on July 15, 2021. During the COVID-19 Public Health Emergency, state buildings are closed to the public and the hearing will be conducted remotely. To determine the location of the hearing or to participate in an electronic hearing, go to emnr.state.nm.us/OCD/hearings or see the instructions posted on the Division's website, <http://emnr.state.nm.us/OCD/announcements.html>. As an interest owner in the well units, you have the right to enter an appearance and participate in the cases. Failure to appear 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 Thursday, July 8, 2021. This statement may be filed online with the Division at ocd.hearings@state.nm.us, 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. As a working interest owner in the well units you have the right to enter an appearance and participate in the cases. Failure to appear will preclude you from contesting these matters at a later date. The attorney for applicant is James Bruce, P.O. Box 1056, Santa Fe, New Mexico 87504. The units are located approximately 10 miles south-southeast of Halfway, New Mexico. #36605

01101711

00255819

JAMES BRUCE
JAMES BRUCE, ATTORNEY AT LAW
P.O. BOX 1056
SANTA FE, NM 87504

EXHIBIT **B-2**