

CIMAREX ENERGY CO.'S EXHIBIT LIST

**APPLICATIONS OF CIMAREX ENERGY CO. FOR
COMPULSORY POOLING, EDDY COUNTY, NEW
MEXICO.**

Case Nos. 22519 and 22520

**APPLICATIONS OF CHEVRON U.S.A. INC. FOR
COMPULSORY POOLING, EDDY COUNTY, NEW
MEXICO.**

Case Nos. 22343 and 22344

EXHIBITS OF CIMAREX ENERGY CO.

(PART I)

- A-1. Application and Proposed Notice (Case No. 22519)
- A-2. Application and Proposed Notice (Case No. 22520)
- B. Landman's Affidavit
- C. Geologist's Affidavit
- D. Engineers's Affidavit
- E-1. Affidavit of Publication (Case No, 22519)
- E-2. Affidavit of Publication (Case No, 22520)
- F-1: Certified Affidavit (Case No, 22519)
- F-2: Certified Affidavit (Case No, 22520)
- G-1. Pooling Checklist (Case No, 22519)
- G-2. Pooling Checklist (Case No, 22520)

Carlsbad Current Argus.

PART OF THE USA TODAY NETWORK

Affidavit of Publication

Ad # 0005116855


This is not an invoice

JAMES BRUCE ATTORNEY AT LAW
POBOX 1056

SANTA FE, NM 87504

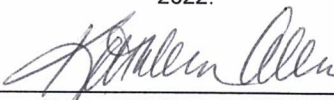
I, a legal clerk of the **Carlsbad Current Argus**, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal notices and advertisements 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:

02/05/2022

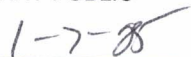


Legal Clerk

Subscribed and sworn before me this February 5, 2022:



State of WI, County of Brown
NOTARY PUBLIC



My commission expires

KATHLEEN ALLEN
Notary Public
State of Wisconsin

Ad # 0005116855
PO #: 05116855
of Affidavits 1

This is not an invoice

EXHIBIT **E1**

NOTICE

To: Chevron USA Inc., Premier Oil & Gas, Inc., MRC Permian Company, Sam H. Jolliffe IV, Teresa H. Jolliffe, Westall Oil & Gas, LLC, Allegro Royalty Pool, LLC, Sam L. Shackelford, Doug J. Schutz, Ross Duncan Properties LLC, Family Tree Corporation, Christi Lea Rucker, EnCore Permian Holdings LP, PetroLima, LLC, Robert Hepler, Belinda Lee Hepler, Chisos Minerals, LLC, Zella Marie Hepler, Marla Risher, Nora Wright, Betty Jonas, Frederick J. Jonas, Daniel Morgan Jonas, Janet L. Jonas, Francine Marilyn Hepler, deceased, Belinda Lee Hepler, Sharon Kay Hepler, Robert Gary Hepler, Ricky Lee Hepler, and Cheyenne S. Hepler, Weslyn Hepler, Eryn Hepler, and Charlene Hepler, or your heirs, devisees, successors or assigns: Cimarex Energy Co. has filed an application with the New Mexico Oil Conservation Division, seeking an order pooling uncommitted mineral interest owners in the Wolfcamp formation underlying the following described well unit:

Case No. 22519: the W/2 of Section 8, the W/2 of Section 17, and the W/2 of Section 20, Township 25 South, Range 27 East, NMPM. The unit will be dedicated to the White City 8-17-20 Fed. Com. Well Nos. 4H, 5H, 6H, and 7H.

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 risk involved in drilling, completing, and equipping the wells. The applications are scheduled to be heard at 8:15 a.m. on February 17, 2022. 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 this matter at a later date. The attorney for applicant is James Bruce, P.O. Box 1056, Santa Fe, New Mexico 87504, (505) 982-2043, jamesbruc@aol.com. The units are located approximately 5 miles northeast of Halfway, New

WEXICO.
#5116855, Current Argus,
Febraury 5, 2022

Carlsbad Current Argus.

PART OF THE USA TODAY NETWORK

Affidavit of Publication

Ad # 0005116897

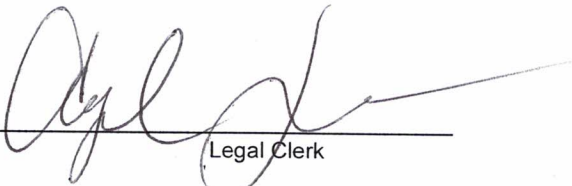
This is not an invoice

JAMES BRUCE ATTORNEY AT LAW
POBOX 1056

SANTA FE, NM 87504

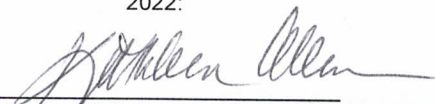
I, a legal clerk of the **Carlsbad Current Argus**, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal notices and advertisements 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:

02/05/2022

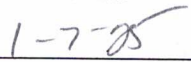


Legal Clerk

Subscribed and sworn before me this February 5, 2022:



State of WI, County of Brown
NOTARY PUBLIC



My commission expires

Ad # 0005116897
PO #: 5116897
of Affidavits 1

This is not an invoice

KATHLEEN ALLEN
Notary Public
State of Wisconsin

EXHIBIT *E2*

NOTICE

To: Chevron USA Inc., Premier Oil & Gas, Inc., MRC Permian Company, Sam H. Jolliffe IV, Teresa H. Jolliffe, Westall Oil & Gas, LLC, Allegro Royalty Pool, LLC, Sam L. Shackelford, Doug J. Schutz, Ross Duncan Properties LLC, Family Tree Corporation, Christi Lea Rucker, EnCore Permian Holdings LP, PetroLima, LLC, Robert Hepler, Belinda Lee Hepler, Chisos Minerals, LLC, Zella Marie Hepler, Marla Risher, Nora Wright, Betty Jonas, Frederick J. Jonas, Daniel Morgan Jonas, Janet L. Jonas, Francine Marilyn Hepler, deceased, Belinda Lee Hepler, Sharon Kay Hepler, Robert Gary Hepler, Ricky Lee Hepler, Cheyenne S. Hepler, Weslyn Hepler, Eryn Hepler, Charlene Hepler, Francis J. Beeman and wife, Bettye Jo Beeman, T.L. Rees and wife, Margaret D. Roos, Brian L. McGonagill and wife, Shirley C. McGonagill, Panagopoulos Enterprises, LLC, Martha Joy Stribling, Margaret Stribling, Robert Duncan Cain, Jr., Salem Pecos Stribling, John D. Stribling, Trabajo Del Spear, LP, Pamela Rae Cummings, Patricia Gae Stamps, Geneva Floyd Osborn, Klipstine & Hanratty, a Law Partnership (c/o James W. Klipstine), Sue Osborn Powell, Mary Camille Hall, John Edward Hall IV, Robert Scott Pace, Mary Lee Hall Stewart, Robert Craig Sandman (Inmate at Ware State Prison), Tim Paige, Eric Benally, Arturo M. Carrillo, Mark Anthony Carrillo, Stacy M. Ridge Davis, Amber Davis, Heather Davis, Estate of Clarence Weldon Ervin, Deceased (c/o Ruby Lillian Eldon), JoAnn McNeill, Patricia Ann Long, Marilyn Faye Bitsis, Neville Manning, Chasity Garza, Estate of Erma Jean Gregory, Deceased (c/o Mary White), William Ervin Gregory, Katharyn Irene Beckholt Gregory, Mary Helen Metcalf Gregory White, Daniel Aaron Taschner and wife Arin Nicole Bratcher Taschner, Louise M. (Mickey) Ratliff, Jr., John R and Brenda G. Diescher Living Trust (John R. Diescher and Brenda G. Diescher, Trustees), Estate of William L. Diescher III c/o Debrah Diescher as Voluntary Administrator, Mark A. Beeman, Robert B. Beeman, William Franklin Beeman, and Patricia Ann Beeman Allen Revocable Trust (Patricia Ann Beeman Allen, Trustee), or your heirs, devisees, successors or assigns: Cimarex Energy Co. has filed an application with the New Mexico Oil Conservation Division, seeking an order pooling uncommitted mineral interest owners in the Wolfcamp formation underlying the following described well unit:

Case No. 22520: the E/2 of Section 8, the E/2 of Section 17, and the E/2 of Section 20, Township 25 South, Range 27 East, NMPM. The unit will be dedicated to the White City 8-17-20 Fed. Com. Well Nos. 17H, 18H, 20H, 21H, and 22H.

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 risk involved in drilling completing, and equipping the wells. The applications are scheduled to be heard at 8:15 a.m. on February 17, 2022. 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.d.state.nm.us/OCD/hearings or see the instructions posted on the Division's website, <http://emnr.d.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 this matter at a later date. The attorney for applicant is James Bruce, P.O. Box 1056, Santa Fe, New Mexico 87504, (505) 982-2043, jamesbruce@aol.com. The unit is located approximately 5 miles northeast of Halfway, New Mexico.
#5116897, Current Argus, February 5, 2022

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

APPLICATION OF CIMAREX ENERGY CO.
FOR COMPULSORY POOLING, EDDY COUNTY,
NEW MEXICO.

Case No. 22519

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 addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
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: 3/11/22



James Bruce

EXHIBIT F-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

January 27, 2022

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application, filed with the New Mexico Oil Conservation Division by Cimarex Energy Co., seeking an order pooling uncommitted mineral interest owners in the Wolfcamp formation underlying the following described well unit:

Case No. 22519: the W/2 of Section 8, the W/2 of Section 17, and the W/2 of Section 20, Township 25 South, Range 27 East, NMPM. The unit will be dedicated to the White City 8-17-20 Fed. Com. Well Nos. 4H, 5H, 6H, and 7H.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 17, 2022. 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.

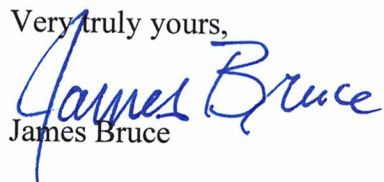
NOTE: Overriding royalty owners are not subject to the cost recovery, risk charge, and operating charges requested in the application.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement. 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

ATTACHMENT **A**

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, prominent initial "J".

James Bruce

Attorney for Cimarex Energy Co.

W/2 Wolfcamp

Cimarex Energy Co.
600 N. Marienfeld St., Ste 600
Midland, TX 79701

Chevron USA Inc.
6301 Deauville Blvd.
Midland, TX 79706

Premier Oil & Gas, Inc.
1096 Mechem Drive, Suite G-16
Ruidoso, NM 88345

MRC Permian Company
5400 LBJ Freeway, Suite 1500
Dallas, TX 75240

Sam H. Jolliffe IV
1607 17th St. W. Apt. 307
Billings, MT 59102

Teresa H. Jolliffe
1610 N. N St.
Midland, TX 79701

Westall Oil & Gas, LLC
P.O. Box 4
Loco Hills, NM 88255

Allegro Royalty Pool, LLC
15 E 5th St., Ste. 3300
Tulsa, OK 74103

Ross Duncan Properties LLC
P.O. Box 647
Artesia, NM 88211

Family Tree Corporation
915 S. Pearl Street
Denver, CO. 80209

Christi Lea Rucker
234 South Buena Vista Street, Apt. B
Redlands, CA 92373

EnCore Permian Holdings LP
P.O. Box 1113
Midland, TX 79702

PetroLima, LLC
P.O. Box 1113
Midland, TX 79702

EXHIBIT

A

Robert Hepler
41175 Mount Rd.
Anza, CA 92539

Belinda Lee Hepler
59500 Ramsey Rd., Apt. 568
Anza, CA 92539

**Francine Marilyn Hepler, deceased,
and Belinda Lee Hepler, Sharon Kay
Hepler, Robert Gary Hepler, Ricky
Lee Hepler, and Cheyenne S. Hepler
59500 Ramsey Rd., Apt. 568
Anza, CA 92539**

Chisos Minerals, LLC
1111 Bagby St., Suite 2150
Houston, TX 77002

Zella Marie Hepler
1303 East Orchid Lane #15
Carlsbad, NM 88220

Marla Risher
2007 W. Pepper Tree Cir.
Carlsbad, NM 88220

Nora Wright
1303 E Orchard Ln., TRLR 15
Carlsbad, NM 88220

**Betty Jonas
607 E. Hill Ave.
Gallup, NM 87301**

**Frederick J. Jonas
13032 Emerson St.
Thornton, CO 80241**

**Daniel Morgan Jonas
525 41st St.
Ogden, UT 84403**

**Janet L. Jonas
615 Quailbrush Dr. NW
Albuquerque, NM 87121**

Weslyn Hepler
1303 Orchard Ln., TRLR 18
Carlsbad, NM 88220

Eryn Hepler
603 N. 9th St.
Carlsbad, NM 88220

Charlene Hepler
4309 Sycamore St.
Carlsbad, NM 88220

Sam L. Shackelford
1906 Mechem Drive
Ruidoso, NM 88345

Doug J. Schultz
P.O. Box 973
Santa Fe, NM 87504

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:

Daniel Morgan Jonas
525 41st St.
Ogden, UT 84403

9590 9402 6769 1074 4362 03
7021 0950 0002 0364 6140

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
Daniel Morgan Jonas 2-18-22

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®
 Signature Confirmation™
 Signature Confirmation™ Restricted Delivery
 Insured Mail Restricted Delivery (over \$500)

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 and Fees \$

Sent To Daniel Morgan Jonas
525 41st St.
Ogden, UT 84403

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

- 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:

Charlene Hepler
4309 Sycamore St.
Carlsbad, NM 88220

9590 9402 6769 1074 4362 41
7021 0350 0001 3336 8170

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
Charlene Hepler 02/10/2022

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®
 Signature Confirmation™
 Signature Confirmation™ Restricted Delivery
 Insured Mail 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 and Fees \$

Sent To Charlene Hepler
4309 Sycamore St.
Carlsbad, NM 88220

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
Charlene Hepler 02/10/2022

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®
 Signature Confirmation™
 Signature Confirmation™ Restricted Delivery
 Insured Mail Restricted Delivery

Postmark Here

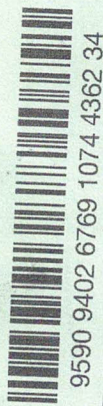
Domestic Return Receipt

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:

Eryn Hepler
603 N. 9th St.
Carlsbad, NM 88220



7020 0950 0002 0364 6164

Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

CW

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Eryn Hepler Agent Addressee
- B. Received by (Printed Name) _____ C. Date of Delivery 02/07/22
- 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
 - 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

Postage

Total Postage and Fees

Sent To

Betty Jones
607 E. Hill Ave.
Gallup, NM 87301

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

7020 0950 0002 0364 6164

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

Total Postage and Fees

Sent To

Eryn Hepler
603 N. 9th St.
Carlsbad, NM 88220

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

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:

Betty Jones
607 E. Hill Ave.
Gallup, NM 87301



7020 0640 0000 1388 2483

Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

CW

COMPLETE THIS SECTION ON DELIVERY

- A. Signature X CV-19 TM Agent Addressee
- B. Received by (Printed Name) CV-19 JONAS C. Date of Delivery 02/04/22
- 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
 - Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

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:

Allegro Royalty Pool, LLC
15 E 5th St., Ste. 3300
Tulsa, OK 74103

9590 9402 5760 0003 2695 94

2. Article # **7020 0640 0000 1388 2353** (over space)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) SW Date of Delivery 2/10/22

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

Domestic Return Receipt CW

**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 Allegro Royalty Pool, LLC
15 E 5th St., Ste. 3300
Tulsa, OK 74103

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:

MRC Permian Company
5400 LBJ Freeway, Suite 1500
Dallas, TX 75240

9590 9402 5760 0003 2695 56

2. Article # **7020 0640 0000 1388 2315**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) Stowh Date of Delivery 2/10/22

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

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

Domestic Return Receipt CW

**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 MRC Permian Company
5400 LBJ Freeway, Suite 1500
Dallas, TX 75240

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:

Ross Duncan Properties LLC
 P.O. Box 647
 Artesia, NM 88211

9590 9402 5760 0003 2696 00

2. Article Number (7)
 7020 0640 0000 1388 2360

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 WATTS

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®
 Return Receipt for Merchandise
 Collect on Delivery
 Signature Confirmation Restricted Delivery

Insured Mail (over \$500)

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 Ross Duncan Properties LLC
 P.O. Box 647
 Artesia, NM 88211

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:

Family Tree Corporation
 915 S. Pearl Street
 Denver, CO. 80209

9590 9402 6769 1074 4360 74

2. Article Number (7)
 7020 0640 0000 1388 2377

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 Ryan Fowler

C. Date of Delivery
 2/11/22

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

3. Service Type
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Signature Confirmation Restricted Delivery

Insured Mail (over \$500)

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 Family Tree Corporation
 915 S. Pearl Street
 Denver, CO. 80209

City, State, ZIP+4®

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 Postage and Fees \$

Sent To Family Tree Corporation
 915 S. Pearl Street
 Denver, CO. 80209

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

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 Fee \$ _____

Sent To Francine Marilyn Hepler, deceased, and Belinda Lee Hepler, Sharon Kay Hepler, Robert Gary Hepler, Ricky Lee Hepler, and Cheyenne S. Hepler 59500 Ramsey Rd., Apt. 508 Azusa, CA 92539

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

0202 0490 0000 1388 8921 2542

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:

Zella Marie Hepler
1303 East Orchid Lane #15
Carlsbad, NM 88220

2. Article Addressed to:

7020 0640 0000 1388 2452

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Adult 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

Signature Confirmation™

Collect on Delivery

Collect on Delivery Restricted Delivery

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 \$ _____

Sent To Francine Marilyn Hepler, deceased, and Belinda Lee Hepler, Sharon Kay Hepler, Robert Gary Hepler, Ricky Lee Hepler, and Cheyenne S. Hepler 59500 Ramsey Rd., Apt. 508 Azusa, CA 92539

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

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:

Francine Marilyn Hepler, deceased, and Belinda Lee Hepler, Sharon Kay Hepler, Robert Gary Hepler, Ricky Lee Hepler, and Cheyenne S. Hepler 59500 Ramsey Rd., Apt. 508 Azusa, CA 92539

2. Article Number (Transfer from carrier label)

9590 9402 6769 1074 4361 35

7020 0640 0000 1388 2438

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Adult Signature Agent Addressee

B. Received by (Printed Name) ROBERT HEPLER C. Date of Delivery 2-7-22

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

Signature Confirmation™

Collect on Delivery

Collect on Delivery Restricted Delivery

Restricted Delivery

0202 0490 0000 1388 8921 2542

**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 Chevron USA Inc.
6301 Deauville Blvd.
Midland, TX 79706

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

6566 5950 2000 0365 9959

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:

Chisos Minerals, LLC
1111 Bagby St., Suite 2150
Houston, TX 77002

9590 9402 6769 1074 4361 42

2. Article 7020 0640 0000 1388 2445

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] Agent Addressee

B. Received by (Printed Name) Thomas C. Date of Delivery 2/14

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™

Collect on Delivery, Restricted Delivery

led Delivery CU

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 and Fees \$

Sent To Chisos Minerals, LLC
1111 Bagby St., Suite 2150
Houston, TX 77002

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

5462 8887 0000 0490 0202

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:

Chevron USA Inc.
6301 Deauville Blvd.
Midland, TX 79706

9590 9402 6746 1074 2512 70

2. Article 7021 0950 0002 0365 9959

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] Agent Addressee

B. Received by (Printed Name) Thomas C. Date of Delivery 2/14

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™

Collect on Delivery, Restricted Delivery

Restricted Delivery CU

Domestic Return Receipt

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:

Belinda Lee Hepler
59500 Ramsey Rd., Apt. 568
Anza, CA 92539

2. Article
7020 0640 0000 1388 2421

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) Robert Hepler C. Date of Delivery 2-1-22

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
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt CW

**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 \$

Total Postage and Fees \$

Sent To
Belinda Lee Hepler
59500 Ramsey Rd., Apt. 568
Anza, CA 92539

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

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:

Robert Hepler
41175 Mount Rd.
Anza, CA 92539

2. A
7020 0640 0000 1388 2421

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) Robert Hepler C. Date of Delivery 2/1/22

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
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt CW

**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 \$

Total Postage and Fees \$

Sent To
Robert Hepler
41175 Mount Rd.
Anza, CA 92539

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

**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
Robert Hepler
41175 Mount Rd.
Anza, CA 92539

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

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:

Westall Oil & Gas, LLC
P.O. Box 4
Loco Hills, NM 88255

9590 9402 5760 0003 2695 87

2. Article Number: 7020 0640 0000 1388 2346

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): *Skylar Valencia* C. Date of Delivery: *2-7-22*

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
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery
- Priority Mail Express®

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: Westall Oil & Gas, LLC
P.O. Box 4
Loco Hills, NM 88255

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

City, State, ZIP+4® _____

Postmark Here

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

7020 0640 0000 1388 2308

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT CW
 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 Premier Oil & Gas, Inc.
 1096 Mechem Drive, Suite G-16
 Ruidoso, NM 88345

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

7020 0640 0000 1388 2391

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT CW
 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 EnCore Permian Holdings LP
 P.O. Box 1113
 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

7020 0640 0000 1388 2469

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT CW
 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 Marla Risher
 2007 W. Pepper Tree Cir.
 Carlsbad, NM 88220

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

7020 0640 0000 1388 2407

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT CW
 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 PetroLima, LLC
 P.O. Box 1113
 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

7020 0640 0000 1388 2506

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 Postage and Fees \$

Sent To Janet L. Jonas
 615 Quailbrush Dr. NW
 Albuquerque, NM 87121

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

7020 0640 0000 1388 2490

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT CW
 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 Frederick J. Jonas
 13032 Emerson St.
 Thornton, CO 80241

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

7020 0640 0000 1388 2322

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT CW
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 Postage and Fees \$	
Sent To Sam H. Jolliffe IV 1607 17 th St. W. Apt. 307 Billings, MT 59102	
Street and Apt. No., or PO	
City, State, ZIP+4®	

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

7020 0640 0000 1388 2339

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT CW
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 Postage and Fees \$	
Sent To Teresa H. Jolliffe 1610 N. N St. Midland, TX 79701	
Street and Apt. No., or PO Box No.	
City, State, ZIP+4®	

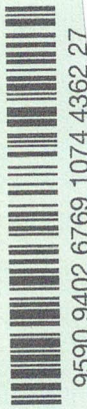
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Weslyn Hepler
1303 Orchard Ln., TRLR 18
Carlsbad, NM 88220



2. Article No.

7021 0950 0002 0364 6157

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
 If YES, enter delivery address below: No

3. Service Type

Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Restricted Delivery Signature Confirmation™
 Insured Mail Signature Confirmation Restricted Delivery
 Insured Mail Restricted Delivery (over \$500)

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 \$ _____

Postmark Here

Sent To
 Weslyn Hepler
 1303 Orchard Ln., TRLR 18
 Carlsbad, NM 88220

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

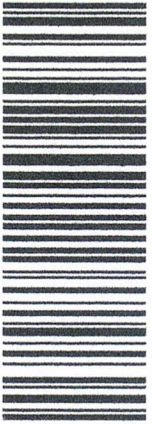
PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

James Bruce
PO Box 1056
Santa Fe, NM 87504



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
CERTIFIED MAIL®



7020 0640 0000 1388 2384

S92543.028

\$7.53
US POSTAGE
FIRST CLASS
062513292392
87501
000131996



AL

2/5

Christi Lea Rucker
234 South Buena Vista Street, Apt. B
Redlands, CA 92373

NIXIE 911 DE 1 0002/24/22
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
BC: 87504105656 *2255-00029-02-43

UNC



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 \$

Postmark
Here

Total Postage and Fees \$

Sent To

Christi Lea Rucker
234 South Buena Vista Street, Apt. B
Redlands, CA 92373

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

7020 0640 0000 1388 2384

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:

Sam H. Joliffe IV
1607 17th St. W. Apt. 307
Billings, MT 59102



9590 9402 5760 0003 2695 63

2. Article Number **7020 0640 0000 1388 2322**
 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
 If YES, enter delivery address below: No

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

Domestic Return Receipt

**U.S. Postal Service™
 CERTIFIED MAIL® RECEIPT CW
 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

Sam L. Shackelford
1906 Mechem Drive
Ruidoso, NM 88345

Street and Apt. No., or POE

City, State, ZIP+4®

Postmark Here

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

See Reverse for Instructions