

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

**APPLICATION OF COLGATE OPERATING,
LLC FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NOS. 22864

EXHIBIT INDEX

Compulsory Pooling Checklist

Exhibit A	Self-Affirmed Statement of Travis Macha
A-1	Application & Proposed Notice of Hearing
A-2	C102 for Well
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A-4	Sample Well Proposal Letter and AFEs
A-5	Chronology of Contact
Exhibit B	Self-Affirmed Statement of John M. Anthony
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B-2	Cross-Section Locator Map
B-3	Wolfcamp – Structure Map
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B-5	Stratigraphic Cross-Section
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Exhibit C	Affidavit of Dana S. Hardy
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COMPULSORY POOLING APPLICATION CHECKLIST**ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS**

Case No.:	22864
Hearing Date:	7/7/2022
Applicant	Colgate Operating, LLC
Designated Operator & OGRID	371449
Applicant's Counsel	Hinkle Shanor LLP
Case Title	Application of Colgate Operating, LLC for Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors	Doyle and Margaret Hartman
Well Family	Robin Federal Com
Formation/Pool	
Formation Name(s) or Vertical Extent	Wolfcamp Formation
Primary Product (Oil or Gas)	Oil
Pooling this vertical extent	Wolfcamp Formation
Pool Name and Pool Code	WC-025 G-08 S203429P; Wolfcamp Pool, Code 98247
Well Location Setback Rules	Standard
Spacing Unit Size	280-acre
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	280
Building Blocks	quarter-quarter
Orientation	North/South
Description: TRS/County	W/2 E/2 of Section 17 and W/2 NW/4 and NW/4 SW/4 of Section 20, Township 20 South, Range 34 East, Lea County, New Mexico
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
Other Situations	
Depth Severance: Y/N. If yes, description	No
Proximity Tracts: If yes, description	No
Proximity Defining Well: if yes, description	N/A
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	Add wells as needed
Well #1	Robin Federal Com 201H (API # pending) SHL: 1480' FSL & 1315' FEL, Unit L, Section 20, T20S-R34E BHL: 10' FNL & 990' FWL, Unit D, Section 17, T20S-R34E Completion Target: Wolfcamp (Approx. 11,170' TVD) Well Orientation: North to South
Horizontal Well First and Last Take Points	Exhibit A-2
Completion Target (Formation, TVD and MD)	Exhibit A-4
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$8,000.00
Production Supervision/Month \$	\$800.00
Justification for Supervision Costs	Exhibit A
Requested Risk Charge	200%
Notice of Hearing	
Proposed Notice of Hearing	Exhibit A-1
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit C-3

Proof of Published Notice of Hearing (10 days before hearing)	Exhibit C-4
Ownership Determination	
Land Ownership Schematic of Spacing Unit	Exhibit A-3
Tract List (including lease numbers & owners)	Exhibit A-3
Pooled Parties (including ownership type)	Exhibit A-3
Unlocatable Parties to be Pooled	Exhibit A
Ownership Depth Severance (including percentage above & below)	N/A
Joinder	
Sample Copy of Proposal Letter	Exhibit A-4
List of Interest Owners (ie Exhibit A of JOA)	Exhibit A-3
Chronology of Contact with Non-Joined Working Interests	Exhibit A-5
Overhead Rates In Proposal Letter	Exhibit A-4
Cost Estimate to Drill and Complete	Exhibit A-4
Cost Estimate to Equip Well	Exhibit A-4
Cost Estimate for Production Facilities	Exhibit A-4
Geology	
Summary (including special considerations)	Exhibit B
Spacing Unit Schematic	Exhibit B-2
Gross Isopach	N/A
Well Orientation (with rationale)	Exhibit B
Target Formation	Exhibit B
HSU Cross Section	Exhibits B-4, B-5
Depth Severance Discussion	N/A
Forms, Figures and Tables	
C-102	Exhibit A-2
Tracts	Exhibit A-3
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit A-3
General Location Map (including basin)	Exhibit B-1
Well Bore Location Map	Exhibit B-2
Structure Contour Map - Subsea Depth	Exhibit B-3
Cross Section Location Map (including wells)	Exhibit B-2
Cross Section (including Landing Zone)	Exhibits B-4, B-5
Additional Information	
CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.	
Printed Name (Attorney or Party Representative):	Dana S. Hardy
Signed Name (Attorney or Party Representative):	/s/ Dana S. Hardy
Date:	7/5/2022

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

**APPLICATION OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NO. 22864

**SELF-AFFIRMED STATEMENT
OF TRAVIS MACHA**

1. I am a Senior Landman at Colgate Operating, LLC (“Colgate”) and am over 18 years of age. I have personal knowledge of the matters addressed herein and am competent to provide this Self-Affirmed Statement. I have previously testified before the New Mexico Oil Conservation Division (“Division”) and my credentials as an expert in petroleum land matters were accepted and made a matter of record.

2. I am familiar with the land matters involved in the above-referenced cases. Copies of Colgate’s applications and proposed hearing notices are attached as **Exhibit A-1**.

3. None of the parties proposed to be pooled in this case indicated opposition to this matter proceeding by affidavit; therefore I do not expect any opposition at hearing.

4. Colgate seeks an order pooling all uncommitted interests in the WC-025 G-08 S203429P; Wolfcamp Pool (Code 98247) within the Wolfcamp formation underlying a 280-acre, more or less, standard horizontal spacing unit comprised of the W/2 W/2 of Section 17 and the W/2 NW/4 and NW/4 SW/4 of Section 20, Township 20 South, Range 34 East, Lea County, New Mexico (“Unit”). The S/2 SW/4 of Section 20 is not included in the proposed spacing unit because it has been and remains unleased federal minerals. The acreage will not be stranded.

5. The Unit will be dedicated to the **Robin Federal Com 201H** well (“Well”) to be horizontally drilled from a surface hole location in the NW/4 SW/4 (Unit L) of Section 20 to a bottom hole location in the NW/4 NW/4 (Unit D) of Section 17.

6. The completed interval of the Well will be orthodox.
7. **Exhibit A-2** contains the C-102 for the Well.
8. **Exhibit A-3** contains a plat identifying ownership by tract in the Unit. This exhibit also includes any applicable lease numbers, a unit recapitulation, and the interests Colgate seeks to pool highlighted in yellow. The exhibit also identifies any unlocatable interests.
9. **Exhibit A-4** contains a sample well proposal letter and AFEs sent to working interest owners for the Well. The estimated costs reflected on the AFEs are fair and reasonable and comparable to the cost of other wells of similar depth and length drilled in the subject formation in the area.
10. Colgate has conducted a diligent search of all county public records including phone directories and computer databases.
11. In my opinion, Colgate made a good-faith effort to reach voluntary joinder of uncommitted interests in the Well as indicated by the chronology of contact described in **Exhibit A-5**.
12. Colgate requests overhead and administrative rates of \$8,000 per month while the Well is being drilled and \$800 per month while the Well is producing. These rates are fair and are comparable to the rates charged by Colgate and other operators in the vicinity.
13. The attached exhibits were either prepared by me or under my supervision or were compiled from company business records.
14. In my opinion, the granting of Colgate's application would serve the interests of conservation, the protection of correlative rights, and the prevention of waste.
15. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony 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.

A handwritten signature in blue ink, appearing to read 'Travis Macha', is written over a horizontal line.

Travis Macha

6/23/2022

Date

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

**APPLICATION OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NO. 22864

APPLICATION

Pursuant to NMSA § 70-2-17, Colgate Operating, LLC (“Applicant”) (OGRID No. 371449) applies for an order pooling all uncommitted interests within the Wolfcamp formation underlying a 280-acre, more or less, standard horizontal spacing unit comprised of the W/2 W/2 of Section 17 and the W/2 NW/4 and NW/4 SW/4 of Section 20, Township 20 South, Range 34 East, Lea County, New Mexico (“Unit”). In support of its application, Applicant states the following.

1. Applicant is a working interest owner in the Unit and has the right to drill wells thereon.
2. The Unit will be dedicated to the **Robin Federal Com 201H** well (“Well”) to be horizontally drilled from a surface hole location in the NW/4 SW/4 (Unit L) of Section 20 to a bottom hole location in the NW/4 NW/4 (Unit D) of Section 17.
3. The completed interval of the Well will be orthodox.
4. Applicant has undertaken diligent, good-faith efforts to obtain voluntary agreements from all interest owners to participate in the drilling of the Well but has been unable to obtain voluntary agreements from all interest owners.
5. The pooling of uncommitted interests will avoid the drilling of unnecessary wells, prevent waste, and protect correlative rights.
6. In order to allow Applicant to obtain its just and fair share of the oil and gas underlying the subject lands, all uncommitted mineral interests in the Unit should be pooled and Applicant should be designated the operator of the Well and Unit.

Colgate Operating, LLC
Case No. 22864
Exhibit A-1

WHEREFORE, Applicant requests this application be set for hearing on July 7, 2022, and that after notice and hearing, the Division enter an order:

- A. Pooling all uncommitted interests in the Unit;
- B. Approving the Well in the Unit;
- C. Designating Applicant as operator of the Unit and the Well to be drilled thereon;
- D. Authorizing Applicant to recover its costs of drilling, equipping and completing the Well;
- E. Approving the actual operating charges and costs of supervision while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and
- F. Imposing a 200% penalty for the risk assumed by Applicant in drilling and completing the Well against any working interest owner who does not voluntarily participate in the drilling of the Well.

Respectfully submitted,

HINKLE SHANOR LLP

/s/ Dana S. Hardy
Dana S. Hardy
Jaclyn McLean
P.O. Box 2068
Santa Fe, NM 87504-2068
Phone: (505) 982-4554
dhardy@hinklelawfirm.com
jmclean@hinklelawfirm.com
Counsel for Colgate Operating, LLC

Application of Colgate Operating, LLC for Compulsory Pooling, Lea County, New Mexico.

Applicant applies for an order pooling all uncommitted interests in the Wolfcamp formation underlying a 280-acre, more or less, standard horizontal spacing unit comprised of the W/2 W/2 of Section 17 and the W/2 NW/4 and NW/4 SW/4 of Section 20, Township 20 South, Range 34 East, Lea County, New Mexico ("Unit"). The Unit will be dedicated to the Robin Federal Com 201H well ("Well") to be horizontally drilled from a surface hole location in the NW/4 SW/4 (Unit L) of Section 20 to a bottom hole location in the NW/4 NW/4 (Unit D) of Section 17. Also to be considered will be the cost of drilling and completing the Well and the allocation of the costs, the designation of Applicant as the operator of the Well, and a 200% charge for the risk involved in drilling and completing the Well. The Well is located approximately 27.12 miles southwest of Hobbs, New Mexico.

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number		2 Pool Code Code 98247		3 Pool Name WC-025 G-08 S203429P; Wolfcamp Pool	
4 Property Code		5 Property Name ROBIN FED COM			6 Well Number 201H
7 OGRID No. 371449		8 Operator Name COLGATE ENERGY LLC			9 Elevation 3657.73'

10 Surface Location

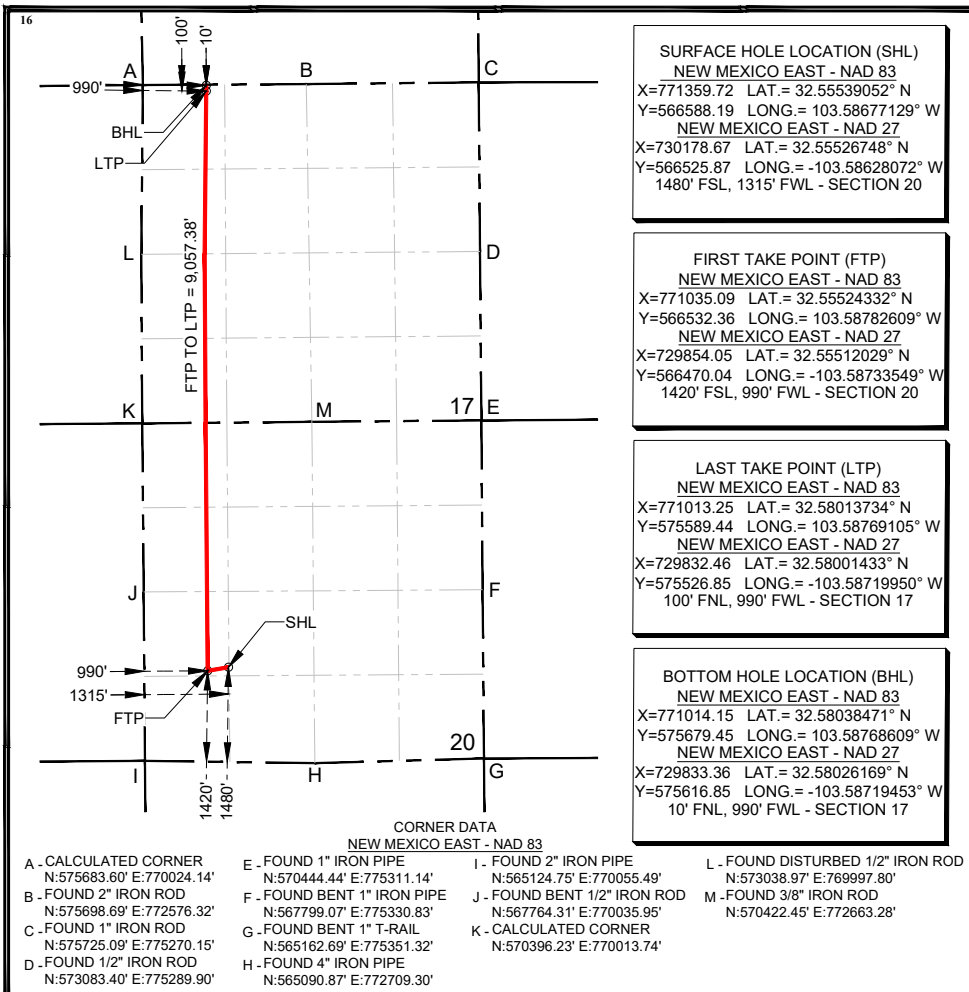
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	20	20-S	34-E		1480'	SOUTH	1315'	WEST	LEA

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	17	20-S	34-E		10'	NORTH	990'	WEST	LEA

12 Dedicated Acres 280	13 Joint or Infill	14 Consolidation Code	15 Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



17 OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature _____ Date _____

Printed Name _____

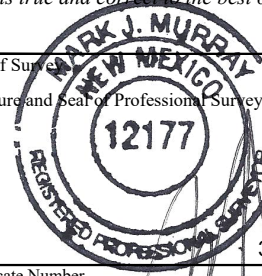
E-mail Address _____

18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Date of Survey _____

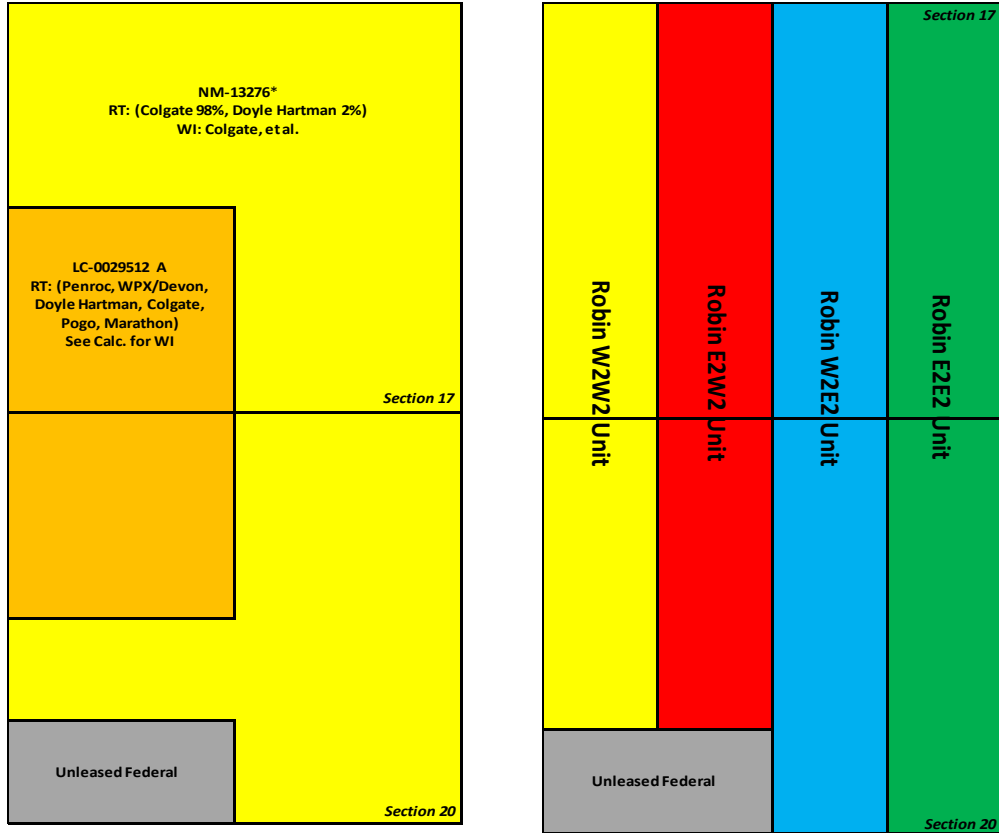
Signature and Seal of Professional Surveyor: _____



Certificate Number _____ 3/28/2022

Colgate Operating, LLC
Case No. 22864
Exhibit A-2

Land Exhibit: W2W2 - Robin Federal Com (WOLFCAMP)
 Section 17 & 20: W2W2, T20S-R34E, Lea Co., NM - Containing 280.00 Acres



E2E2		Documents Sent		Certified Mail Number	Notes
Owner	Pooling?	Proposal	JOA		
Colgate Production, LLC	N/A	Y	Y	N/A	
Marathon Oil Permian	Y	Y	Y	7021 2720 0001 4876 8032	
Pogo Resources	Y	Y	Y	7021 2720 0001 4876 7769	
Southwest Royalties	Y	Y	Y	Receipt confirmed via email attached	Signed AFEs, Not JOA or Coms yet
Tierra Media Resources	N	Y	Y	7021 2720 0001 4876 7783	No leasehold in E2E2
Larry Nermyr	Y	Y	Y	7021 2720 0001 4876 8025	
Estate of Ruth Sutton	Y	Y	Y	7021 2720 0001 4876 7967	UNLOCATABLE
Grey Wolf Land	N	Y	Y	7021 2720 0001 4876 8056	All documents executed
Doyle Hartman	Y	Y	Y	7021 2720 0001 2312 5713	Record Title Only - Yet to Sign Com Agreement
Penroc Oil Corp	Y	N	N	7021 2720 0000 2076 5999	Record Title Only - Yet to Sign Com Agreement
WPX Energy Permian LLC	Y	N	N	7021 2720 0000 2076 6002	Record Title Only - Yet to Sign Com Agreement

*Please Note Oxy USA, Inc. has assigned all rights and interest unto Colgate Production, LLC. Record title transfers are processing with the BLM

Offered JOA Basis - (1280.00 Gross Acres) - Leasehold interest pursuant to County Chain of Title										
Tract	Gross Acres	Colgate	Marathon	Tierra Media	Nermyr	Grey Wolf	Sutton	Pogo	Southwest	
Sec 17: SW	160	88.711%	10.760%	0.490%	0.016%	0.016%	0.008%	0.000%	0.000%	
Sec 20: NW	160	88.711%	10.760%	0.490%	0.016%	0.016%	0.008%	0.000%	0.000%	
Sec 17: SE, N2	480	98.711%	0.760%	0.000%	0.016%	0.016%	0.008%	0.098%	0.392%	
Sec 20: E2, N2SW	400	98.711%	0.760%	0.000%	0.016%	0.016%	0.008%	0.098%	0.392%	
TOTAL	1200									

Robin W2W2 Unit Capitulation Summary										
Tract	Gross Acres	Colgate	Marathon	Tierra Media	Nermyr	Grey Wolf	Sutton	Pogo	Southwest	
Robin 1200.00 Acre JOA Offering	1200	96.044%	3.427%	0.131%	0.016%	0.016%	0.008%	0.072%	0.287%	
Robin W2W2 AS-POOLED Unit	280	92.997%	6.474%	0.280%	0.016%	0.011%	0.012%	0.042%	0.168%	

Colgate Operating, LLC
 Case No. 22864
 Exhibit A-3

Robin Federal Com - Sections 17 & 20 ORRI Owner Pooling List			
ORRI Owner	Address	Ratification Sent?	Notes
Crump Family Trust C/O Bank of America	P.O. Box 80308 Dallas, TX 75252	Yes	
Dakota Resources, Inc.	4519 Santa Rosa Dr. Midland, TX 79707	Yes	
Fedro & Associates	P.O. Box 10872 Midland, TX 79702	Yes	Not Pooling
Frances George, Anna Lesniak 2001 Trust C/O Bank of America	P.O. Box 80308 Dallas, TX 75252	Yes	
J.L. Crump Testamentary Trust, by Jessie Blevins Crump, et al, Trustees	P.O. Box 80308 Dallas, TX 75252	Yes	
Joe and Jessie Crump Memorial Fund	P.O. Box 80308 Dallas, TX 75252	Yes	
JESSICA ANN FURLONG 2001 TRUST C/O BANK OF AMERICA	P.O. Box 80308 Dallas, TX 75252	Yes	
JESSIE BLEVINS CRUMP FAMILY TRUST fbo DAVID C. BLEVINS, IV C/O BANK OF AMERICA	P.O. Box 80308 Dallas, TX 75252	Yes	
JESSIE BLEVINS CRUMP FAMILY TRUST fbo SUE BLEVINS C/O BANK OF AMERICA	P.O. Box 80308 Dallas, TX 75252	Yes	
JONES LOUIS BLEVINS FAMILY TRUST C/O BANK OF AMERICA	P.O. Box 80308 Dallas, TX 75253	Yes	
KIMBERLEY SUE FURLONG 2001 TRUST C/O BANK OF AMERICA	P.O. Box 80308 Dallas, TX 75254	Yes	
RICHARD B. LYNN 2001 TRUST C/O BANK OF AMERICA	P.O. Box 80308 Dallas, TX 75255	Yes	
RICHARD B. LYNN 2009 TRUST C/O BANK OF AMERICA	P.O. Box 80308 Dallas, TX 75256	Yes	
SANDRA MCFADDEN FURLONG 2001 TRUST C/O BANK OF AMERICA	P.O. Box 80308 Dallas, TX 75257	Yes	
WILLIAM M. LYNN 2001 TRUST C/O BANK OF AMERICA	P.O. Box 80308 Dallas, TX 75258	Yes	
WILLIAM M. LYNN 2009 TRUST C/O BANK OF AMERICA	P.O. Box 80308 Dallas, TX 75259	Yes	
BARRETT, PEGGY c/o BANK OF AMERICA, TRUSTEE	P.O. Box 80308 Dallas, TX 75259	Yes	
BRAILLE INSTITUTE OF AMERICA, INC. C/O BANK OF AMERICA	P.O. Box 80308 Dallas, TX 75259	Yes	
Estate of CLARKE, LOIS	Unknown - Brokers attempting track down of heirship	Unlocatable	
CULBERTSON MANAGEMENT TRUST, by SHIRLEY C. WALLACE, Trustee	PO BOX 2918 MIDLAND, TX 79702	Yes	
DESERT RAINBOW, LLC	PO BOX 1837 ROSWELL, NM 88202	Yes	
Estate of HOLBROOK, GLADYS	Unknown - Brokers attempting track down of heirship	Unlocatable	
MARSHALL & WINSTON, INC.	6 DESTA DR STE 3100 MIDLAND, TX 79705	Yes	

SABINE ROYALTY TRUST, by SIMMONS BANK	PO BOX 962020 FORT WORTH, TX 76162-2020	Yes	
SELMA E. ANDREWS PERPETUAL CHARITABLE TRUST c/o BANK OF AMERICA, Trustee	P.O. Box 80308 Dallas, TX 75259	Yes	
STANLEY, E.R.	Unknown - Brokers attempting track down of heirship	Unlocatable	
Estate of WALKER, R.O.	Unknown - Brokers attempting track down of heirship	Unlocatable	
Estate of WALLACE, D.M.	Unknown - Brokers attempting track down of heirship	Unlocatable	
WHEAT COMPANY TRUST, Gilbert C. Wheat Jr., Susan W. Cony and Margery W. Hyuck	1425 W Pioneer Dr., Suite 146 Irving, TX 75061	Yes	
ESTATE OF BOYLE, R.E., Patricia Boyle Young	P.O. Box 1037 Okmulgee, OK 74447	Yes	
NOGAL RANCH, LTD.	4519 Santa Rosa Dr. Midland, TX 79707	Yes	
Lazy J Bar Cane LLC	P.O. Box 3660 Roswell, NM 88202	Yes	Not Pooling
KMF Land LLC	1144 15th Street, Suite 2650 Denver, CO 80202	Yes	
Apollo Permian LLC	P.O. Box 14779 Oklahoma City, OK 73113	Yes	Not Pooling



April 12, 2022

Via Certified Mail

Pooling Exhibit
XXXXXX
XXXXXX

RE: Robin Federal Com – Well Proposals
Section 17: All, Section 20: E/2, NW/4, N/2SW/4, T20S-R34E, All Target Zones
Lea County, New Mexico

To Whom It May Concern:

Colgate Operating, LLC, as operator for Colgate Production, LLC (“Colgate”), hereby proposes the drilling and completion of the following twenty-four (24) wells, the Robin Federal Com wells from two well pads at the following approximate locations within Township 20 South, Range 34 East:

**Please note all locations provided below are standard units no closer than 330’ to any section or quarter-quarter line. Plats available upon request.*

- 1. Robin Federal Com 111H – West Pad**
 SHL: 1,680’ FSL & 1,255’ FWL of Section 20 (or at a legal location within Unit L)
 BHL: 10’ FNL & 330’ FWL of Section 17
 FTP: 1,420’ FSL & 330’ FWL of Section 20
 LTP: 100’ FNL & 330’ FWL of Section 17
 TVD: Approximately 9,571’
 TMD: Approximately 18,982’
 Proration Unit: W2W2 of Sections 17 & W2NW, NWSW of Section 20, T20S-R34E
 Targeted Interval: 1st Bone Spring
 Total Cost: See attached AFE
- 2. Robin Federal Com 112H – West Pad**
 SHL: 1,680’ FSL & 1,375’ FWL of Section 20 (or at a legal location within Unit K)
 BHL: 10’ FNL & 1,650’ FWL of Section 17
 FTP: 1,420’ FSL & 1,650’ FWL of Section 20
 LTP: 100’ FNL & 1,650’ FWL of Section 17
 TVD: Approximately 9,571’
 TMD: Approximately 18,982’
 Proration Unit: E2W2 of Sections 17 & E2NW, NESW of Section 20, T20S-R34E
 Targeted Interval: 1st Bone Spring
 Total Cost: See attached AFE

300 N. Marienfeld St., Suite 1000, Midland, Texas 79701
P: (432) 695-4222 | F: (432) 695-4063
www.ColgateEnergy.com

Colgate Operating, LLC
Case No. 22864
Exhibit A-4

Robin Federal Com Well Proposal

- 3. Robin Federal Com 113H – East Pad**
SHL: 330' FSL & 1,385' FEL of Section 20 (or at a legal location within Unit O)
BHL: 10' FNL & 2,310' FEL of Section 17
FTP: 100' FSL & 2,310' FEL of Section 20
LTP: 100' FNL & 2,310' FEL of Section 17
TVD: Approximately 9,613'
TMD: Approximately 19,898'
Proration Unit: W2E2 of Sections 17 & 20, T20S-R34E
Targeted Interval: 1st Bone Spring
Total Cost: See attached AFE
- 4. Robin Federal Com 114H – East Pad**
SHL: 330' FSL & 1,265' FEL of Section 20 (or at a legal location within Unit P)
BHL: 10' FNL & 330' FEL of Section 17
FTP: 100' FSL & 330' FEL of Section 20
LTP: 100' FNL & 330' FEL of Section 17
TVD: Approximately 9,613'
TMD: Approximately 19,898'
Proration Unit: E2E2 of Sections 17 & 20, T20S-R34E
Targeted Interval: 1st Bone Spring
Total Cost: See attached AFE
- 5. Robin Federal Com 121H – West Pad**
SHL: 1,680' FSL & 1,285' FWL of Section 20 (or at a legal location within Unit L)
BHL: 10' FNL & 330' FWL of Section 17
FTP: 1,420' FSL & 330' FWL of Section 20
LTP: 100' FNL & 330' FWL of Section 17
TVD: Approximately 10,530'
TMD: Approximately 19,927'
Proration Unit: W2W2 of Sections 17 & W2NW, NWSW of Section 20, T20S-R34E
Targeted Interval: 2nd Bone Spring
Total Cost: See attached AFE
- 6. Robin Federal Com 122H – West Pad**
SHL: 1,680' FSL & 1,315' FWL of Section 20 (or at a legal location within Unit L)
BHL: 10' FNL & 990' FWL of Section 17
FTP: 1,420' FSL & 990' FWL of Section 20
LTP: 100' FNL & 990' FWL of Section 17
TVD: Approximately 10,150'
TMD: Approximately 19,547'
Proration Unit: W2W2 of Sections 17 & W2NW, NWSW of Section 20, T20S-R34E
Targeted Interval: 2nd Bone Spring
Total Cost: See attached AFE

Continued next page.

Robin Federal Com Well Proposal

- 7. Robin Federal Com 123H – West Pad**
SHL: 1,680' FSL & 1,345' FWL of Section 20 (or at a legal location within Unit K)
BHL: 10' FNL & 1,650' FWL of Section 17
FTP: 1,420' FSL & 1,650' FWL of Section 20
LTP: 100' FNL & 1,650' FWL of Section 17
TVD: Approximately 10,530'
TMD: Approximately 19,927'
Proration Unit: E2W2 of Sections 17 & E2NW, NESW of Section 20, T20S-R34E
Targeted Interval: 2nd Bone Spring
Total Cost: See attached AFE
- 8. Robin Federal Com 124H – West Pad**
SHL: 1,680' FSL & 1,405' FWL of Section 20 (or at a legal location within Unit K)
BHL: 10' FNL & 2,310' FWL of Section 17
FTP: 1,420' FSL & 2,310' FWL of Section 20
LTP: 100' FNL & 2,310' FWL of Section 17
TVD: Approximately 10,150'
TMD: Approximately 19,547'
Proration Unit: E2W2 of Sections 17 & E2NW, NESW of Section 20, T20S-R34E
Targeted Interval: 2nd Bone Spring
Total Cost: See attached AFE
- 9. Robin Federal Com 125H – East Pad**
SHL: 330' FSL & 1,355' FEL of Section 20 (or at a legal location within Unit O)
BHL: 10' FNL & 2,310' FEL of Section 17
FTP: 100' FSL & 2,310' FEL of Section 20
LTP: 100' FNL & 2,310' FEL of Section 17
TVD: Approximately 10,530'
TMD: Approximately 21,027'
Proration Unit: W2E2 of Sections 17 & 20, T20S-R34E
Targeted Interval: 2nd Bone Spring
Total Cost: See attached AFE
- 10. Robin Federal Com 126H – East Pad**
SHL: 330' FSL & 1,325' FEL of Section 20 (or at a legal location within Unit O)
BHL: 10' FNL & 1,650' FEL of Section 17
FTP: 100' FSL & 1,650' FEL of Section 20
LTP: 100' FNL & 1,650' FEL of Section 17
TVD: Approximately 10,173'
TMD: Approximately 20,458'
Proration Unit: W2E2 of Sections 17 & 20, T20S-R34E
Targeted Interval: 2nd Bone Spring
Total Cost: See attached AFE

Continued next page.

Robin Federal Com Well Proposal

11. Robin Federal Com 127H – East Pad

SHL: 330' FSL & 1,295' FEL of Section 20 (or at a legal location within Unit P)
BHL: 10' FNL & 660' FEL of Section 17
FTP: 100' FSL & 660' FEL of Section 20
LTP: 100' FNL & 660' FEL of Section 17
TVD: Approximately 10,530'
TMD: Approximately 21,027'
Proration Unit: E2E2 of Sections 17 & 20, T20S-R34E
Targeted Interval: 2nd Bone Spring
Total Cost: See attached AFE

12. Robin Federal Com 128H – East Pad

SHL: 330' FSL & 1,235' FEL of Section 20 (or at a legal location within Unit P)
BHL: 10' FNL & 330' FEL of Section 17
FTP: 100' FSL & 330' FEL of Section 20
LTP: 100' FNL & 330' FEL of Section 17
TVD: Approximately 10,173'
TMD: Approximately 20,458'
Proration Unit: E2E2 of Sections 17 & 20, T20S-R34E
Targeted Interval: 2nd Bone Spring
Total Cost: See attached AFE

13. Robin Federal Com 171H – West Pad

SHL: 1,480' FSL & 1,255' FWL of Section 20 (or at a legal location within Unit L)
BHL: 10' FNL & 990' FWL of Section 17
FTP: 1,420' FSL & 990' FWL of Section 20
LTP: 100' FNL & 990' FWL of Section 17
TVD: Approximately 10,800'
TMD: Approximately 20,197'
Proration Unit: W2W2 of Sections 17 & W2NW, NWSW of Section 20, T20S-R34E
Targeted Interval: Harkey Formation
Total Cost: See attached AFE

14. Robin Federal Com 172H – West Pad

SHL: 1,480' FSL & 1,405' FWL of Section 20 (or at a legal location within Unit K)
BHL: 10' FNL & 2,310' FWL of Section 17
FTP: 1,420' FSL & 2,310' FWL of Section 20
LTP: 100' FNL & 2,310' FWL of Section 17
TVD: Approximately 10,800'
TMD: Approximately 20,197'
Proration Unit: E2W2 of Sections 17 & E2NW, NESW of Section 20, T20S-R34E
Targeted Interval: Harkey Formation
Total Cost: See attached AFE

Continued next page.

Robin Federal Com Well Proposal

15. Robin Federal Com 173H – East Pad

SHL: 10' FSL & 1,385' FEL of Section 20 (or at a legal location within Unit O)
BHL: 10' FNL & 1,650' FEL of Section 17
FTP: 100' FSL & 1,650' FEL of Section 20
LTP: 100' FNL & 1,650' FEL of Section 17
TVD: Approximately 10,800'
TMD: Approximately 21,297'
Proration Unit: W2E2 of Sections 17 & 20, T20S-R34E
Targeted Interval: Harkey Formation
Total Cost: See attached AFE

16. Robin Federal Com 174H – East Pad

SHL: 10' FSL & 1,235' FEL of Section 20 (or at a legal location within Unit P)
BHL: 10' FNL & 330' FEL of Section 17
FTP: 100' FSL & 330' FEL of Section 20
LTP: 100' FNL & 330' FEL of Section 17
TVD: Approximately 10,800'
TMD: Approximately 21,297'
Proration Unit: E2E2 of Sections 17 & 20, T20S-R34E
Targeted Interval: Harkey Formation
Total Cost: See attached AFE

17. Robin Federal Com 131H – West Pad

SHL: 1,480' FSL & 1,285' FWL of Section 20 (or at a legal location within Unit L)
BHL: 10' FNL & 330' FWL of Section 17
FTP: 1,420' FSL & 330' FWL of Section 20
LTP: 100' FNL & 330' FWL of Section 17
TVD: Approximately 11,060'
TMD: Approximately 20,457'
Proration Unit: W2W2 of Sections 17 & W2NW, NWSW of Section 20, T20S-R34E
Targeted Interval: 3rd Bone Spring
Total Cost: See attached AFE

18. Robin Federal Com 132H – West Pad

SHL: 1,480' FSL & 1,345' FWL of Section 20 (or at a legal location within Unit K)
BHL: 10' FNL & 1,650' FWL of Section 17
FTP: 1,420' FSL & 1,650' FWL of Section 20
LTP: 100' FNL & 1,650' FWL of Section 17
TVD: Approximately 11,060'
TMD: Approximately 20,457'
Proration Unit: E2W2 of Sections 17 & E2NW, NESW of Section 20, T20S-R34E
Targeted Interval: 3rd Bone Spring
Total Cost: See attached AFE

Continued next page.

Robin Federal Com Well Proposal

19. Robin Federal Com 133H – East Pad

SHL: 10' FSL & 1,355' FEL of Section 20 (or at a legal location within Unit O)
BHL: 10' FNL & 2,310' FEL of Section 17
FTP: 100' FSL & 2,310' FEL of Section 20
LTP: 100' FNL & 2,310' FEL of Section 17
TVD: Approximately 11,060'
TMD: Approximately 21,557'
Proration Unit: W2E2 of Sections 17 & 20, T20S-R34E
Targeted Interval: 3rd Bone Spring
Total Cost: See attached AFE

20. Robin Federal Com 134H – East Pad

SHL: 10' FSL & 1,295' FEL of Section 20 (or at a legal location within Unit O)
BHL: 10' FNL & 990' FEL of Section 17
FTP: 100' FSL & 990' FEL of Section 20
LTP: 100' FNL & 990' FEL of Section 17
TVD: Approximately 11,060'
TMD: Approximately 21,557'
Proration Unit: E2E2 of Sections 17 & 20, T20S-R34E
Targeted Interval: 3rd Bone Spring
Total Cost: See attached AFE

21. Robin Federal Com 201H – West Pad

SHL: 1,480' FSL & 1,315' FWL of Section 20 (or at a legal location within Unit L)
BHL: 10' FNL & 990' FWL of Section 17
FTP: 1,420' FSL & 990' FWL of Section 20
LTP: 100' FNL & 990' FWL of Section 17
TVD: Approximately 11,170'
TMD: Approximately 20,567'
Proration Unit: W2W2 of Sections 17 & W2NW, NWSW of Section 20, T20S-R34E
Targeted Interval: Wolfcamp XY
Total Cost: See attached AFE

22. Robin Federal Com 202H – West Pad

SHL: 1,480' FSL & 1,375' FWL of Section 20 (or at a legal location within Unit K)
BHL: 10' FNL & 2,310' FWL of Section 17
FTP: 1,420' FSL & 2,310' FWL of Section 20
LTP: 100' FNL & 2,310' FWL of Section 17
TVD: Approximately 11,170'
TMD: Approximately 20,567'
Proration Unit: E2W2 of Sections 17 & E2NW, NESW of Section 20, T20S-R34E
Targeted Interval: Wolfcamp XY
Total Cost: See attached AFE

Continued next page.

Robin Federal Com Well Proposal

23. Robin Federal Com 203H – East Pad

SHL: 10' FSL & 1,325' FEL of Section 20 (or at a legal location within Unit O)

BHL: 10' FNL & 1,650' FEL of Section 17

FTP: 100' FSL & 1,650' FEL of Section 20

LTP: 100' FNL & 1,650' FEL of Section 17

TVD: Approximately 11,163'

TMD: Approximately 21,448'

Proration Unit: W2E2 of Sections 17 & 20, T20S-R34E

Targeted Interval: Wolfcamp XY

Total Cost: See attached AFE

24. Robin Federal Com 204H – East Pad

SHL: 10' FSL & 1,265' FEL of Section 20 (or at a legal location within Unit P)

BHL: 10' FNL & 330' FEL of Section 17

FTP: 100' FSL & 330' FEL of Section 20

LTP: 100' FNL & 330' FEL of Section 17

TVD: Approximately 11,163'

TMD: Approximately 21,448'

Proration Unit: E2E2 of Sections 17 & 20, T20S-R34E

Targeted Interval: Wolfcamp XY

Total Cost: See attached AFE

The locations, TVDs, and targets are approximate and subject to change dependent on surface or subsurface issues encountered. These locations do fall within an approved potash drill island, so any surface changes remain subject to BLM approval. Colgate is proposing to drill these wells under the modified terms of the 1989 AAPL Operating Agreement and a form of said Operating Agreement is enclosed. The Operating Agreement has the following general provisions:

- 100%/300%/300% non-consent provisions
- \$8,000/\$800 drilling and producing rates
- Colgate Operating, LLC named as Operator

Please indicate your election to participate in the drilling and completion of the proposed wells in the space provided below. Please sign and return one copy of this letter, a signed copy of the proposed AFE, and your geologic well requirements.

In the interest of time, should we not reach an agreement within thirty (30) days of the date of your receipt of this letter, Colgate will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well. If you do not wish to participate, Colgate would be interested in acquiring your interest in the subject lands which is subject to further mutually agreeable negotiation.

Continued next page.

Robin Federal Com Well Proposal

Thank you for your time and consideration, if you have any questions at all, please don't hesitate to contact me at 432.400.1037 or by email at tmacha@colgateenergy.com.

Respectfully,



Travis Macha
Senior Landman

Enclosures

Elections on page to follow.

Robin Federal Com Well Proposal

Robin Federal Com Elections:

<i>Well Elections: (Please indicate your responses in the spaces below)</i>		
Well(s)	Elect to Participate	Elect to <u>NOT</u> Participate
Robin Federal Com 111H		
Robin Federal Com 112H		
Robin Federal Com 113H		
Robin Federal Com 114H		
Robin Federal Com 121H		
Robin Federal Com 122H		
Robin Federal Com 123H		
Robin Federal Com 124H		
Robin Federal Com 125H		
Robin Federal Com 126H		
Robin Federal Com 127H		
Robin Federal Com 128H		
Robin Federal Com 171H		
Robin Federal Com 172H		
Robin Federal Com 173H		
Robin Federal Com 174H		
Robin Federal Com 131H		
Robin Federal Com 132H		
Robin Federal Com 133H		
Robin Federal Com 134H		
Robin Federal Com 201H		
Robin Federal Com 202H		
Robin Federal Com 203H		
Robin Federal Com 204H		

Company Name (If Applicable):

By: _____

Printed Name: _____

Date: _____

Robin Federal Com Well Proposal

Participate / Rejection Declaration

Please return this page to Colgate by the date specified in the letter, signed indicating your election to either participate in or reject this insurance program. If you reject the insurance coverage arranged by Colgate, then, to the extent that Colgate has an obligation to secure any such insurance on your behalf under any applicable agreements or otherwise, Colgate will be relieved of such obligation, and Colgate will assume that you maintain appropriate levels of insurance and will provide a current Certificate of Insurance upon request. If you fail to make an election within 30 days from receipt of this notice, you will be deemed a participant in the program as detailed on the attached and billed for your percentage participation as such.

- I hereby elect to participate in the insurance coverage arranged by Colgate Operating, LLC, and understand that I will be charged for such participation.
- I hereby elect to reject the insurance coverage arranged by Colgate Operating, LLC.

Agreed this _____ day of _____, 2022 by:

Company Name (If Applicable):

By: _____

Printed Name: _____

Date: _____

Colgate Energy

300 N. Marienfeld St., Ste. 1000 Midland, TX 79701
 Phone (432) 695-4222 • Fax (432) 695-4063

ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

DATE:	4/11/2022	AFE NO.:	0
WELL NAME:	Robin Federal Com 201H	FIELD:	WC-025 G-08 S203435D; WOLF CAMP
LOCATION:	Section 20, T20S-R34E	MD/TVD:	20567' MD / 11170' TVD
COUNTY/STATE:	Lea County, New Mexico	LATERAL LENGTH:	9,070
Colgate WI:		DRILLING DAYS:	25.6
GEOLOGIC TARGET:	WCXY	COMPLETION DAYS:	17.4
REMARKS:	Drill a horizontal WCXY well and complete with 44 stages. AFE includes drilling, completions, flowback and Initial AL install cost		

INTANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
1 Land / Legal / Regulatory	\$ 42,500	\$ -	\$ -	\$ 42,500
2 Location, Surveys & Damages	209,191	13,000	10,000	232,191
4 Freight / Transportation	34,270	31,500	-	65,770
5 Rental - Surface Equipment	112,280	149,550	13,700	275,530
6 Rental - Downhole Equipment	150,338	43,032	-	193,370
7 Rental - Living Quarters	41,208	38,200	-	79,408
10 Directional Drilling, Surveys	367,705	-	-	367,705
11 Drilling	679,448	-	-	679,448
12 Drill Bits	72,080	-	-	72,080
13 Fuel & Power	176,729	469,082	-	645,810
14 Cementing & Float Equip	175,060	-	-	175,060
15 Completion Unit, Swab, CTU	-	-	26,000	26,000
16 Perforating, Wireline, Slickline	-	253,925	9,000	262,925
17 High Pressure Pump Truck	-	43,250	-	43,250
18 Completion Unit, Swab, CTU	-	105,400	-	105,400
20 Mud Circulation System	93,310	-	-	93,310
21 Mud Logging	18,055	-	-	18,055
22 Logging / Formation Evaluation	8,092	6,000	-	14,092
23 Mud & Chemicals	310,693	345,799	-	656,492
24 Water	31,270	469,112	-	500,382
25 Stimulation	-	588,935	-	588,935
26 Stimulation Flowback & Disp	-	87,000	-	87,000
28 Mud / Wastewater Disposal	138,945	43,000	-	181,945
30 Rig Supervision / Engineering	113,756	91,500	9,800	215,056
32 Drlg & Completion Overhead	9,750	-	-	9,750
35 Labor	110,346	47,500	20,000	177,846
54 Proppant	-	883,661	-	883,661
95 Insurance	10,901	-	-	10,901
97 Contingency	-	17,668	8,850	26,518
99 Plugging & Abandonment	-	-	-	-
TOTAL INTANGIBLES >	2,905,924	3,727,114	97,350	6,730,388

TANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
60 Surface Casing	\$ 87,952	\$ -	\$ -	\$ 87,952
61 Intermediate Casing	247,724	-	-	247,724
62 Drilling Liner	-	-	-	-
63 Production Casing	510,702	-	-	510,702
64 Production Liner	-	-	-	-
65 Tubing	-	-	55,000	55,000
66 Wellhead	46,640	-	59,100	105,740
67 Packers, Liner Hangers	10,600	-	4,500	15,100
68 Tanks	-	-	-	-
69 Production Vessels	-	-	-	-
70 Flow Lines	-	-	-	-
71 Rod string	-	-	-	-
72 Artificial Lift Equipment	-	-	88,000	88,000
73 Compressor	-	-	-	-
74 Installation Costs	-	-	-	-
75 Surface Pumps	-	-	5,000	5,000
76 Downhole Pumps	-	-	-	-
77 Measurement & Meter Installation	-	-	7,500	7,500
78 Gas Conditioning / Dehydration	-	-	-	-
79 Interconnecting Facility Piping	-	-	-	-
80 Gathering / Bulk Lines	-	-	-	-
81 Valves, Dumps, Controllers	-	-	-	-
82 Tank / Facility Containment	-	-	-	-
83 Flare Stack	-	-	-	-
84 Electrical / Grounding	-	-	90,900	90,900
85 Communications / SCADA	-	-	-	-
86 Instrumentation / Safety	-	-	-	-
TOTAL TANGIBLES >	903,618	0	310,000	1,213,618
TOTAL COSTS >	3,809,542	3,727,114	407,350	7,944,006

PREPARED BY Colgate Energy:

Drilling Engineer:	SS/RM/PS
Completions Engineer:	BA/ML
Production Engineer:	Levi Harris

Colgate Energy APPROVAL:

Co-CEO	_____	Co-CEO	_____	VP - Operations	_____
	WH		JW		CRM
VP - Land & Legal	_____	VP - Geosciences	_____		
	BG		SO		

NON OPERATING PARTNER APPROVAL:

Company Name:	_____	Working Interest (%):	_____	Tax ID:	_____
Signed by:	_____	Date:	_____		
Title:	_____	Approval:	<input type="checkbox"/> Yes <input type="checkbox"/> No (mark one)		

The costs on this AFE are estimates only and may not be construed as ceilings on any specific item or the total cost of the project. Tubing installation approved under the AFE may be delayed up to a year after the well has been completed. In executing this AFE, the Participant agrees to pay its proportionate share of actual costs incurred, including, legal, curative, regulatory, brokerage and well costs under the terms of the applicable joint operating agreement, regulatory order or other agreement covering this well. Participants shall be covered by and billed proportionately for Operator's well control and general liability insurance unless participant provides Operator a certificate evidencing its own insurance in an amount acceptable to the Operator by the date of spud.



Batman – Chronology of Communication/Events

Note: Due to long communication timeline and process with potash development, this communication timeline includes events prior to initial well proposals. Please see April 12, 2022 forward for proposal.

December 22, 2021 - February 15, 2022 - Colgate purchases and closes on one working interest owner (Davis Land & Minerals) in Sections 17 and 20. (Most interest owners contacted in this time frame in attempt to purchase interest)

December 22, 2021 – Colgate notifies BLM it is set to close acquisition of Oxy acreage within Sections 17 & 20 with the intent of immediately filing for a Potash Development Area. Discussions of proper notification, drill island on siting, etc. were had at this time as well.

January 12, 2022 – Drilling and Division Order Title Opinion Ordered

January 18, 2022 – Robin Surface Pads/SHLs Staked

January 18, 2022 – Contacted Intrepid giving them a heads up and detailed plan of development for Robin as this DOES lie in Potash and Intrepid had the right to protest. (This is prior to sending official Development Area Notices).

January 19, 2022 – Colgate employees (Travis Macha, Landman & Patrick Godwin, VP of Land) fly to Houston from Midland with initial trade proposal to Marathon in attempt to obtain Marathon in interest in Robin.

January 21, 2022 – Colgate closes acquisition of Oxy interest in Sections 17 and 20.

January 22, 2022 – Further correspondence with Marathon on potential trade. (Additional correspondence on 1/24/22, 1/26/22, 1/27/22, 2/2/22, 2/9/22, 2/10/22, 2/14/22)

January 24, 2022 – Colgate provides JC Data (mailing service) with Development Area Notifications for mailing to all affected owners (Surface owners, Working Interest Owners, Grazing Lease Owners, Record Title Owners) within Sections 17 and 20 as well as the offset notification area as required by the BLM detailing Batman plan of development.

January 24, 2022 – Conversation with Larry Nermyer – He is in retirement home, currently unable to mail but likely will not participate

January 25, 2022 – Further correspondence with Intrepid

February 1, 2022 – BLM on site and surface clearance. (Cleared drill island and tank battery location as well as road/flowline paths)

February 3, 2022 – JC Data mails all Colgate Robin Development Area Notifications to all affected interest owners.

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www.ColgateEnergy.com

Colgate Operating, LLC
Case No. 22864
Exhibit A-5



February 10, 2022 – Colgate in person meeting in Houston with Intrepid VP, Travis McBain obtaining final so-ahead sign off from Intrepid on Robin Development Area (notification of no-contest)

February 10, 2022 – Colgate dinner with Marathon, lightly discussing Robin potential deal

February 14, 2022 – Colgate updated trade proposal sent to Marathon. Addition correspondence on 2/22/22, 3/11/22, 3/16/22, 3/21/22, 3/24/22, 3/27/22, 3/28/22, 4/14/22, 5/5/22 – further detailed below

February 14, 2022 – Colgate update to the BLM on discussions with owners within Robin DA. Additional correspondence with BLM on 2/28/22, 3/14/22

March 11, 2022 – Cash offer to Marathon on interest in Robin as trade discussions had not been progressing.

March 21, 2022 – Menu of trade offers sent to Marathon

March 27, 2022 – New trade offer sent to Marathon. Did not go anywhere

March 30, 2022 – BLM notifies Colgate of Robin Approved Development Area

April 12, 2022 – Colgate proposes all 24 Robin wells (proposal included the JOA form)

April 11, 2022 – Colgate communication with Merlyn Westbrook (beneficiary of the Estate of Ronnie Westbrook) explaining development and process. Westbrook needs to file probate in State of New Mexico. Further correspondence on 4/19/22 and 5/24/22

April 14, 2022 – Correspondence with Tierra Media Resources, LP on their interest in Robin

April 14, 2022 – Correspondence with Pogo Resources on their interest in Robin

April 18, 2022 – Correspondence with Southwest Royalties on their interest in Robin

April 19, 2022 – Correspondence with Grey Wolf on their interest in Robin

April 28, 2022 – Correspondence with Southwest Royalties on Robin Development

May 5, 2022 – Clarification from Marathon sent to Colgate on their intent to work a trade in Robin

May 6, 2022 – Further correspondence with Pogo Resources on their interest in Robin

May 9, 2022 – Further correspondence with Tierra Media on the process of Robin proposals

May 9, 2022 – Signatures received from Grey Wolf. More signatures received 5/16/22.

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- May 13, 2022 – Further correspondence with Tierra media on their interest in Robin
- May 20, 2022 – Correspondence with Penroc on their Communitization Agreement signatures
- May 24, 2022 – Further correspondence with Marathon on potential trade
- May 26, 2022 – Further correspondence with Marathon on potential trade
- June 7, 2022 – Mailed all Overriding Royalty Interest Owners ratifications of the Robin units/communitization agreements
- June 14, 2022 – Correspondence with Collins & Jones relating to their interest in Robin (ORRI)
- June 16, 2022 – Further correspondence with Marathon on development plan
- June 20, 2022 – Correspondence with Marathon after receiving full DDOTO back – Marathons previously believed NRI was much lower, burdened by a 1966 NPORI – trade discussions halted
- June 20, 2022 – Correspondence with Grey Wolf noticing them of their abnormally low NRI due to the same reason above (burdened by 1966 NPORI)
- June 21 & June 22, 2022 – Two letters drafted by Doyle Hartman unto Colgate indicating their belief of owning a Working interest
- June 22 & June 23, 2022 – Notice in response to Doyle Hartman of 2005 assignment from Doyle Hartman unto 3rd party showing Mr. Hartman’s interest is strictly limited to record title

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

**APPLICATION OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NO. 22864

**SELF-AFFIRMED STATEMENT
OF JOHN M. ANTHONY**

1. I am a geologist at Colgate Operating, LLC (“Colgate”) and am over 18 years of age. I have personal knowledge of the matters addressed herein and am competent to provide this Self-Affirmed Statement. I have previously testified before the New Mexico Oil Conservation Division (“Division”), and my credentials as an expert in petroleum geology matters were accepted and made a matter of record.

2. I am familiar with the geological matters that pertain to the above-referenced case.

3. **Exhibit B-1** is a regional locator map that identifies the Robin project area, in proximity to the Capitan Reef within the Delaware Basin, for the Wolfcamp horizontal spacing units that are the subject of these applications.

4. **Exhibit B-2** is a cross section location map for the proposed horizontal spacing unit (“Unit”) within the Wolfcamp formation. The approximate wellbore path for the proposed Robin Fed Com 201H well (“Well”) is represented by dashed lines. Existing producing wells in the targeted interval are represented by solid lines. This map identifies the cross-section running from A-A’ with the cross-section well names and a black line in proximity to the proposed wells.

5. **Exhibit B-3** is a Wolfcamp Structure map on the base of the Wolfcamp formation in TVD subsea with a contour interval of 50 ft. The map identifies the approximate wellbore path for the Robin Fed Com 201H proposed Well with a purple dashed line. It also identifies the location

of the cross-section running from A-A' in proximity to the proposed well. The data points are indicated by red triangles. The map demonstrates the formation is gently dipping to the south in this area. I do not observe any faulting, pinch-outs, or geologic impediments to developing the targeted intervals with horizontal wells.

6. **Exhibit B-4** identifies three wells penetrating the targeted interval I used to construct a structural cross-section from A to A'. I used these well logs because they penetrate the targeted interval, are of good quality, and are representative of the geology in the area. It contains gamma ray, resistivity, and porosity logs. The structural cross section from north to south shows the regional dip to the south for the Wolfcamp Well. The target zone for the proposed Well is the Wolfcamp formation, which is consistent across the units. The approximate well-path for the proposed well is indicated by dashed lines to be drilled from north to south across the units.

7. **Exhibit B-5** is a stratigraphic cross-section from A to A' using the representative wells identified on Exhibit B-5. The cross section is oriented from north to south and is hung on the top of the Wolfcamp formation. The proposed landing zone for the Well is labeled on the exhibit. The approximate well-path for the proposed well is indicated by dashed lines to be drilled from north to south across the units. This cross-section demonstrates the target interval is continuous across the Unit.

8. **Exhibit B-6** is a gun barrel diagram that shows the Robin Fed Com 201H well in the Wolfcamp formation.

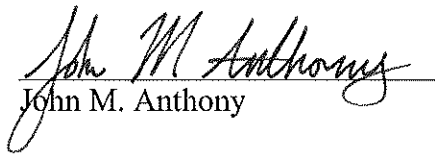
9. In my opinion, a standup orientation for the Well is appropriate to properly develop the subject acreage because of consistent rock properties throughout the Unit and is the preferred fracture orientation in this portion of the trend.

10. Based on my geologic study of the area, the targeted interval underlying the Unit is suitable for development by horizontal wells and the tracts comprising the Unit will contribute more or less equally to the production of the Well.

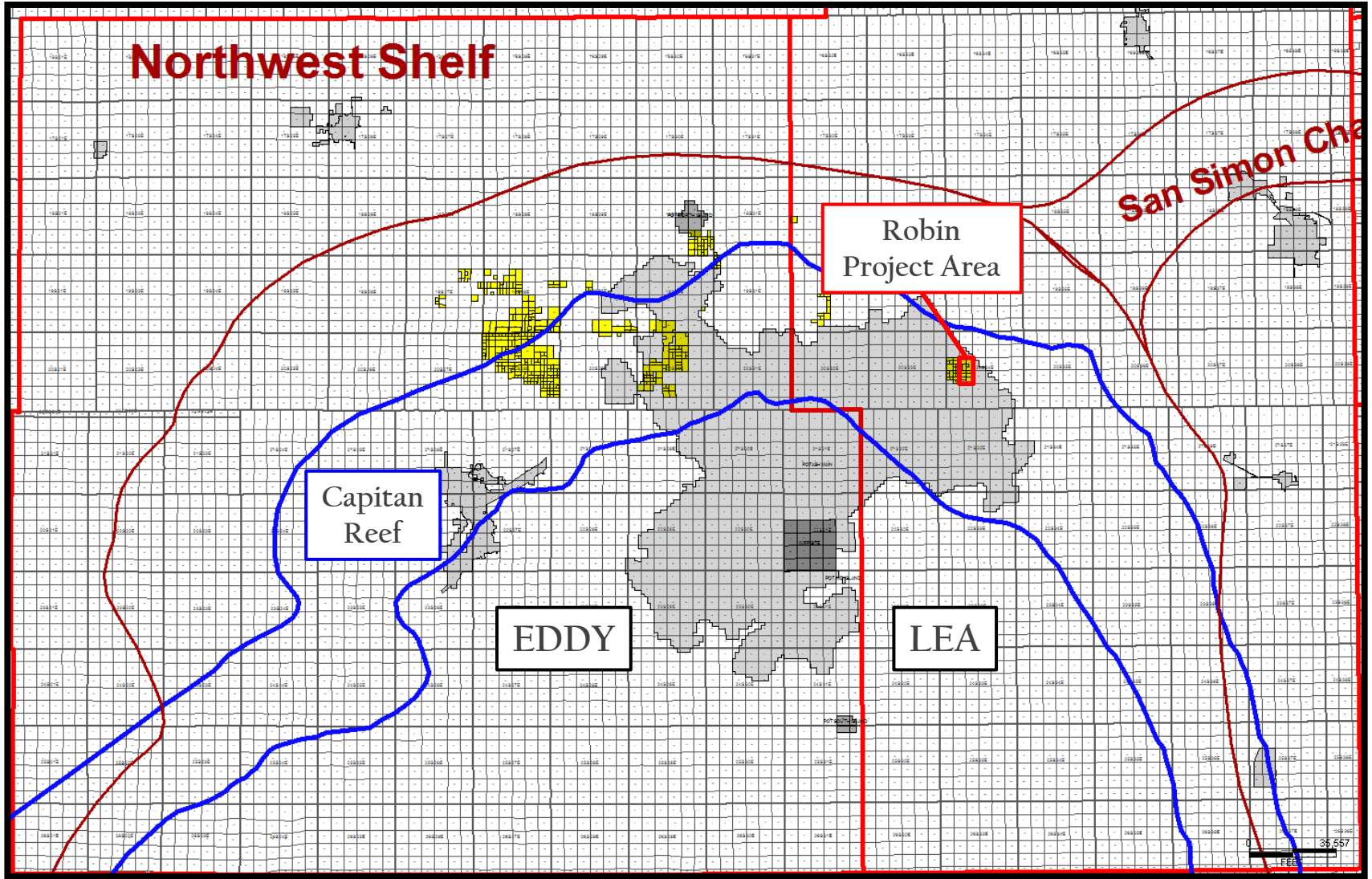
11. In my opinion, the granting of Colgate's application will serve the interests of conservation, the protection of correlative rights, and the prevention of waste.

12. The exhibits attached hereto were either prepared by me or under my supervision or were compiled from company business records.

13. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm my testimony 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 identified next to my signature below.


John M. Anthony

6/23/2022
Date



 Colgate Energy

Cross Section Locator Map

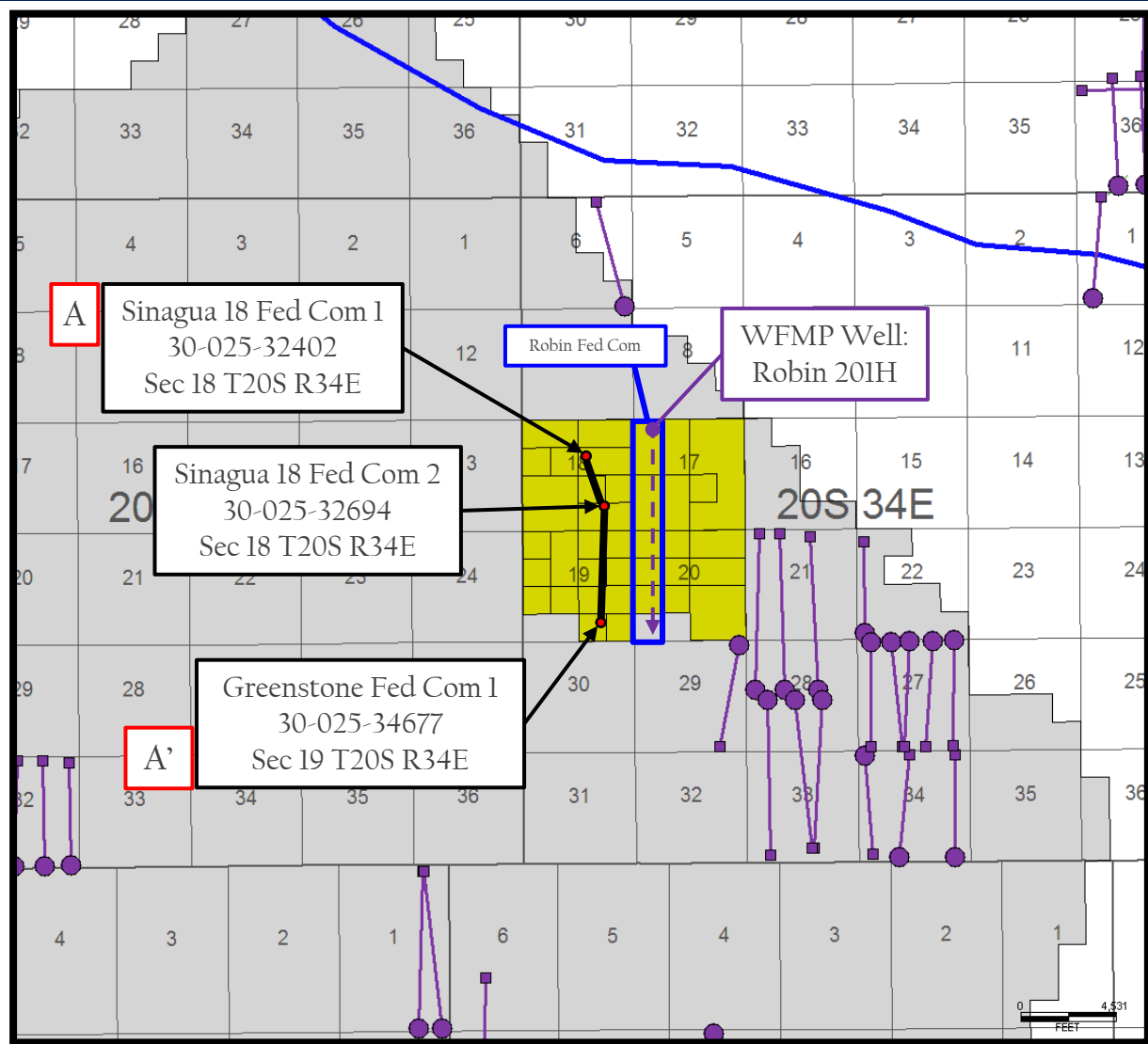
Robin Fed Com - 201H

Colgate Operating, LLC

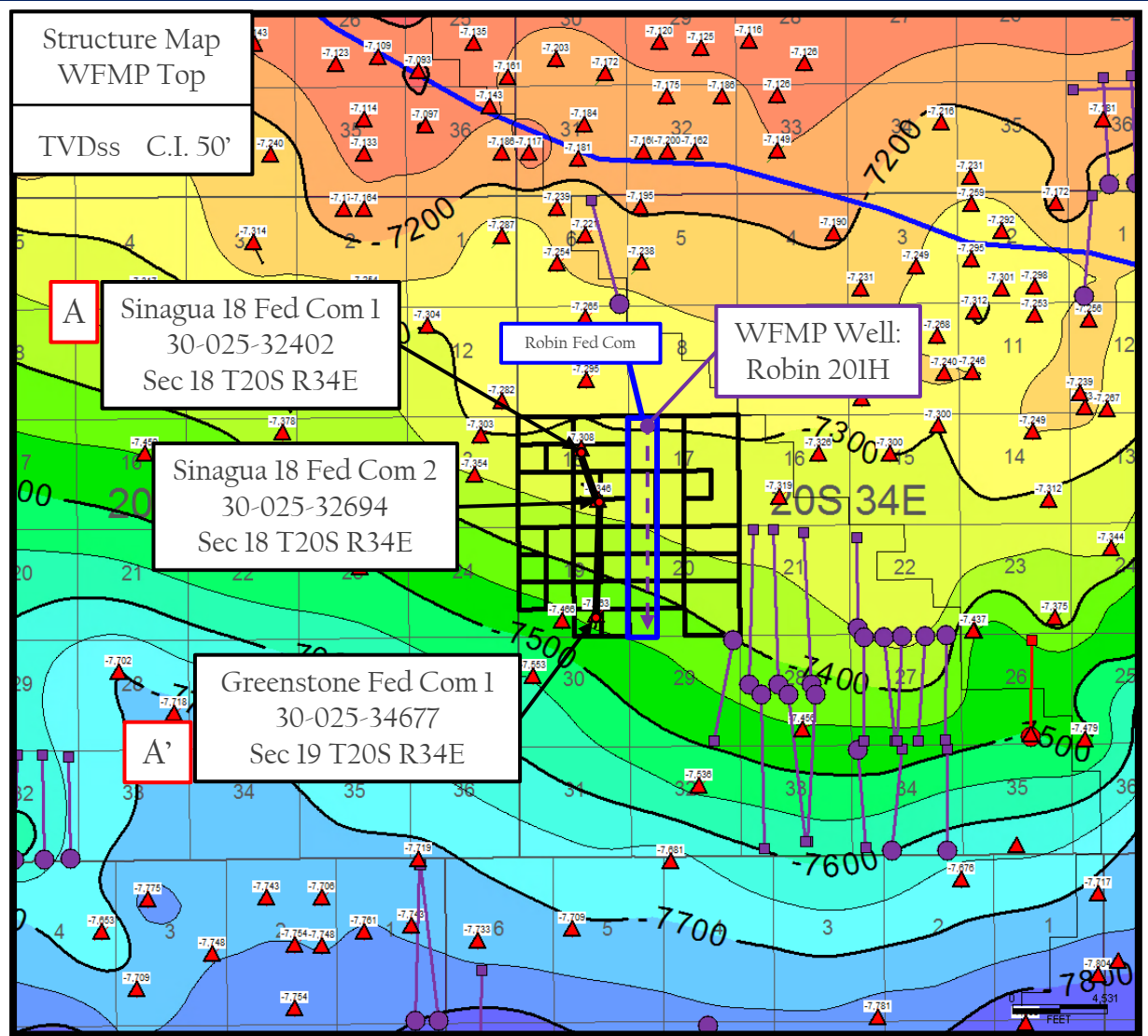
Case No. 22864

Exhibit B-2

Exhibit B-2



 Colgate Energy



Structure Map
 WFMP Top
 TVDss C.I. 50'

A Sinagua 18 Fed Com 1
 30-025-32402
 Sec 18 T20S R34E

Sinagua 18 Fed Com 2
 30-025-32694
 Sec 18 T20S R34E

A' Greenstone Fed Com 1
 30-025-34677
 Sec 19 T20S R34E

Robin Fed Com

WFMP Well:
 Robin 201H

Control Point

TVDss



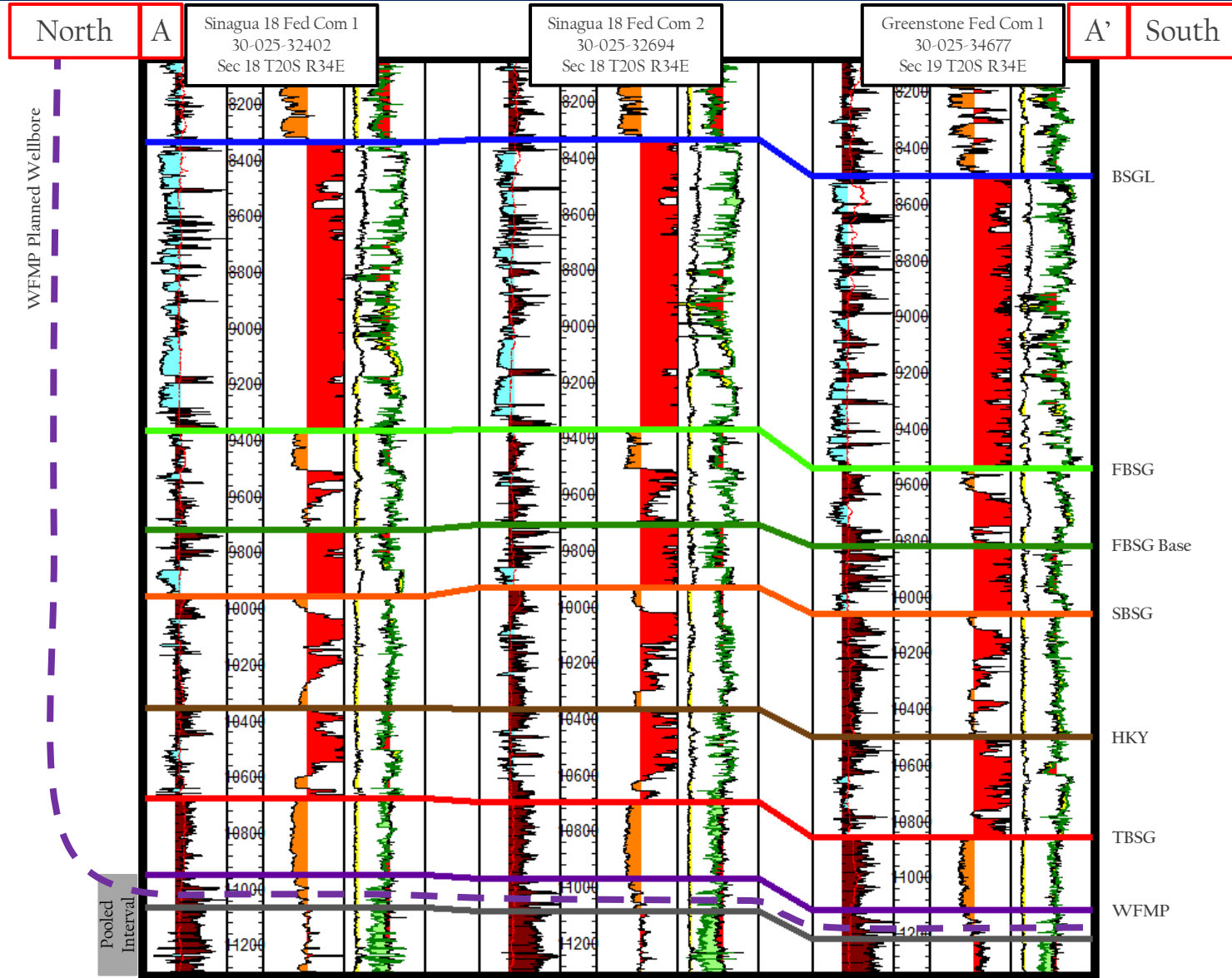
Proposed Wells



Producing Wells



Colgate Energy

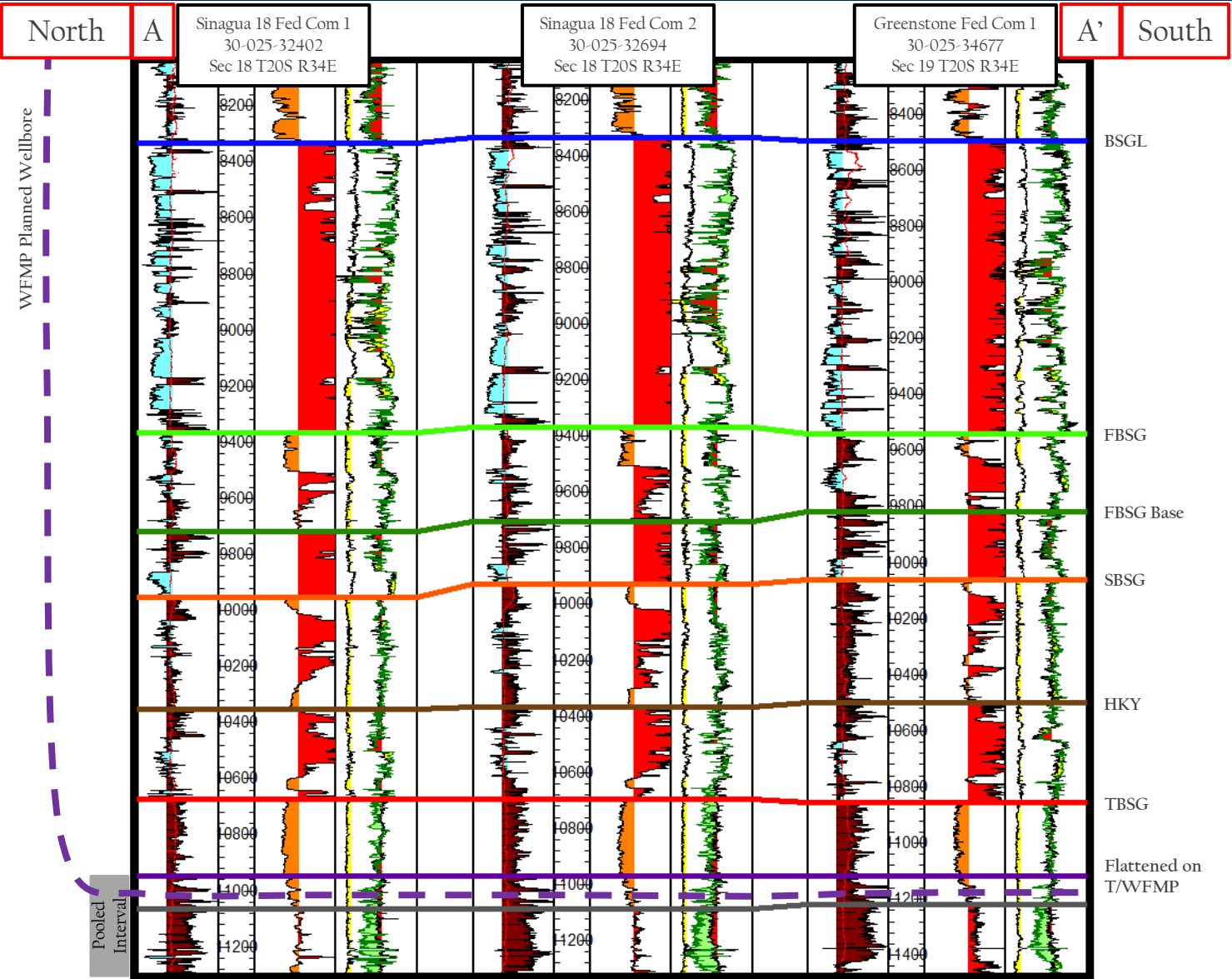


Stratigraphic Cross Section A-A'

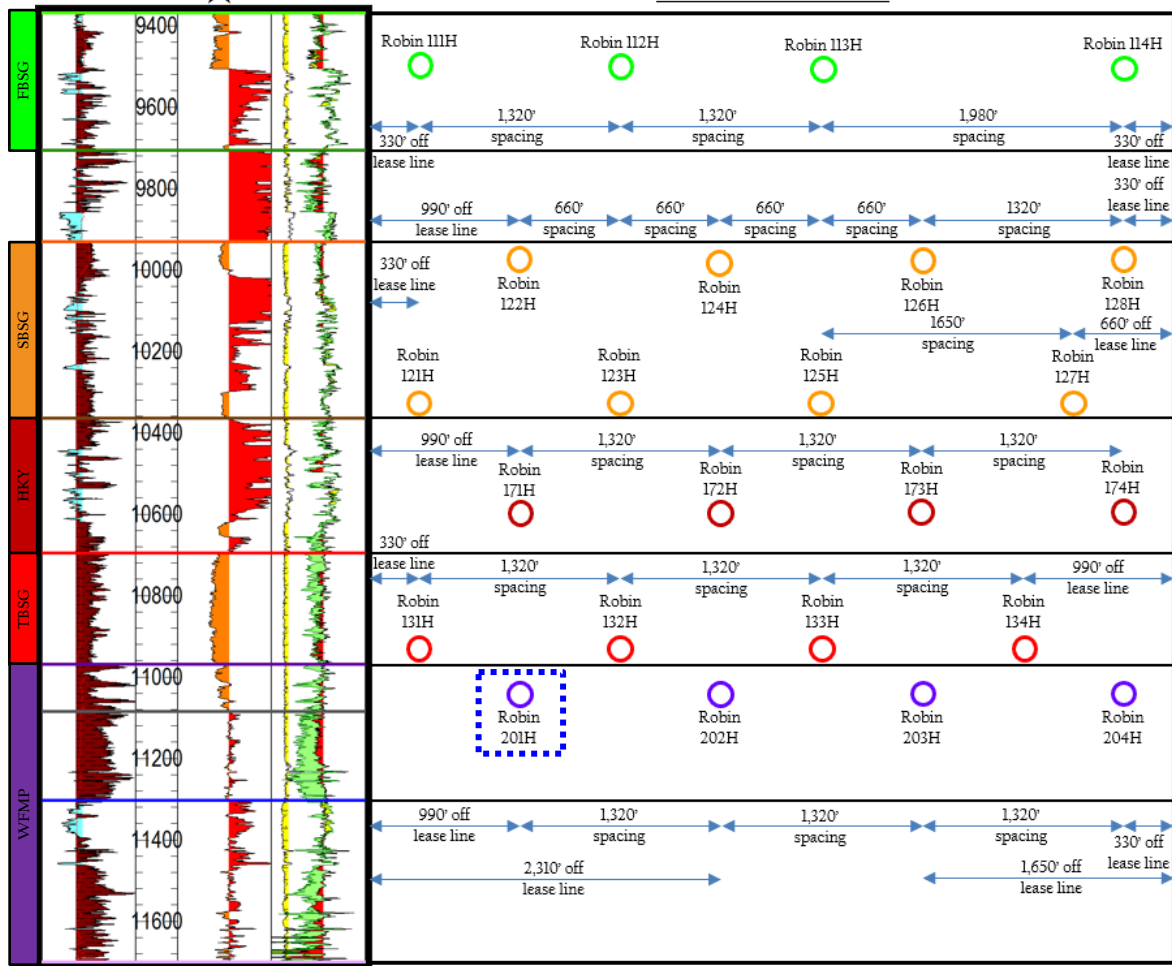
Robin Fed Com 201H

Colgate Operating, LLC
Case No. 22864
Exhibit B-5

Exhibit B-5



Robin: Sections 20-17

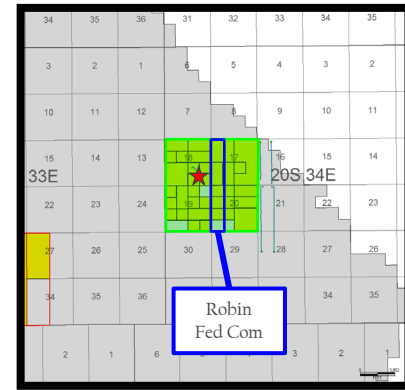


Gunbarrel Legend

- FBSG Proposed (Green circle)
- FBSG Producing (Green circle)
- SBSG Proposed (Orange circle)
- SBSG Producing (Orange circle)
- HKY Proposed (Red circle)
- HKY Producing (Red circle)
- TBSG Proposed (Red circle)
- TBSG Producing (Red circle)
- WFMP Proposed (Purple circle)
- WFMP Producing (Purple circle)

30-025-32694

Proposed Well



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

**APPLICATIONS OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NO. 22864

**SELF-AFFIRMED STATEMENT OF
DANA S. HARDY**

1. I am attorney in fact and authorized representative of Colgate Operating LLC, the Applicant herein.

2. I am familiar with the Notice Letters attached as **Exhibit C-1** and caused the Notice Letter to be sent to the parties set out in the charts attached as **Exhibit C-2**.

3. The above-referenced Application was provided, along with the Notice Letters, to the recipients listed in Exhibit C-2.

4. Exhibit C-2 also provides the date each Notice Letter was sent and the date each return was received.

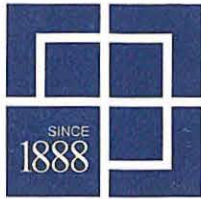
5. Copies of the certified mail green cards and white slips are attached as **Exhibit C-3** as supporting documentation for proof of mailing and the information provided on Exhibit C-2.

6. On June 16, 2022, I caused a notice to be published to all interested parties in the Hobbs News Sun. An Affidavit of Publication from the Legal Clerk of the Hobbs News Sun, along with a copy of the notice publication, is attached as **Exhibit C-4**.

/s/ Dana S. Hardy
Dana S. Hardy

July 5, 2022
Date

Colgate Operating, LLC
Case No. 22864
Exhibit C



hinklelawfirm.com

HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE, NEW MEXICO 87504

505-982-4554 (FAX) 505-982-8623

WRITER:

Dana S. Hardy, Partner
dhardy@hinklelawfirm.com

June 6, 2022

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO ALL PARTIES ENTITLED TO NOTICE

Re: Case Nos. 22861, 22862, 22863, 22864, 22865, 22866, 22867, 22868 - Applications of Colgate Operating, LLC for Compulsory Pooling, Lea County, New Mexico.

To whom it may concern:

This letter is to advise you that the enclosed applications were filed with the New Mexico Oil Conservation Division. The hearing will be conducted on **July 7, 2022** beginning at 8:15 a.m.

Hearings are currently conducted remotely. To participate in the electronic hearing, see the instructions posted on the OCD Hearings website: <https://www.emnrd.nm.gov/ocd/hearing-info/>. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Pursuant to Division Rule 19.15.4.13.B, a party who intends to present evidence at the hearing shall file a pre-hearing statement and serve copies on other parties, or the attorneys of parties who are represented by counsel, at least four business days in advance of a scheduled hearing, but in no event later than 5:00 p.m. mountain time, on the Thursday preceding the scheduled hearing date. The statement must be submitted through the OCD E-Permitting system (<https://wwwapps.emnrd.state.nm.us/ocd/ocdpermitting/>) or via e-mail to ocd.hearings@state.nm.us and should include: the names of the parties and their attorneys, a concise statement of the case, the names of all 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 are to be resolved prior to the hearing.

Please do not hesitate to contact Travis Macha at (432) 400-1037 if you have questions about this matter.

Sincerely,

/s/ Dana S. Hardy

Dana S. Hardy

Colgate Operating, LLC
Case No. 22864
Exhibit C-1

Enclosure

PO BOX 10
ROSWELL, NEW MEXICO 88202
575-622-6510
(FAX) 575-623-9332

PO BOX 2068
SANTA FE, NEW MEXICO 87504
505-982-4554
(FAX) 505-982-8623

7601 JEFFERSON ST NE • SUITE 180
ALBUQUERQUE, NEW MEXICO 87109
505-858-8320
(FAX) 505-858-8321



hinklelawfirm.com

HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE, NEW MEXICO 87504

505-982-4554 (FAX) 505-982-8623

WRITER:

Dana S. Hardy, Partner
dhardy@hinklelawfirm.com

June 6, 2022

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO OVERRIDING ROYALTY INTEREST OWNERS SUBJECT TO NOTICE

Re: Case Nos. 22861, 22862, 22863, 22864, 22865, 22866, 22867, 22868 - Applications of Colgate Operating, LLC for Compulsory Pooling, Lea County, New Mexico.

To whom it may concern:

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Please do not hesitate to contact Travis Macha at (432) 400-1037 if you have questions about this matter.

Sincerely,

/s/ Dana S. Hardy

Dana S. Hardy

Enclosure

PO BOX 10
ROSWELL, NEW MEXICO 88202
575-622-6510
(FAX) 575-622-8333

PO BOX 2068
SANTA FE, NEW MEXICO 87504
505-982-4554
(FAX) 505-982-8623

7601 JEFFERSON ST NE • SUITE 180
ALBUQUERQUE, NEW MEXICO 87109
505-858-8320
(FAX) 505-858-8321

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

**APPLICATION OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NOs 22861-22868

WORKING INTERESTS

PARTY	NOTICE LETTER SENT	RETURN RECEIVED
Estate of James Davidson 515 Tradewinds Blvd. Midland, TX 79706	06/06/22	6/14/22
Grey Wolf Land Services 236 Argyle Ave. San Antonio, TX 78209	06/06/22	6/14/22
Doyle Hartman 500 North Main Street, #2 Midland, TX 79701	06/06/22	6/17/22
Marathon Oil Permian, LLC 990 Town and Country Boulevard Houston, TX 77024	06/06/22	6/14/22
Larry Nermyr 900 33 Avenue SW, Apartment 15 Minot, ND 58701	06/06/22	Per USPS Tracking: 06/29/22 Unclaimed/Being Returned to Sender
Pogo Resources, LLC 4809 Cole Ave. Suite 108 Dallas, TX 75205	06/06/22	Per USPS Tracking: 06/13/22 In transit to next facility.
Southwest Royalties, Inc. P.O. Box 53570 Midland, TX 79710	06/06/22	6/14/22
Ruth Sutton 305 E. Avenue, Apt. B Copperas Cove, TX 76522	06/06/22	6/20/22 Return to sender. Insufficient address.
Tierra Media Resources P.O. Box 9758 Midland, TX 79708	06/06/22	6/14/22

Colgate Operating, LLC
Case No. 22864
Exhibit C-2

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

**APPLICATION OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NOs 22861-22868

RECORD TITLE OWNERS

PARTY	NOTICE LETTER SENT	RETURN RECEIVED
Doyle Hartman 500 North Main Street, #2 Midland, TX 79701	06/06/22	6/17/22
Oxy USA WTP LP* (Transfer in BLM process) 5 Greenway Plaza Houston, TX 77046	06/06/22	6/14/22
Penroc Oil Corp 1515 W Calle Sur St. Hobbs, NM 88240	06/06/22	6/14/22
Pogo Resources, LLC (Title Issue, proposed to as well) 4809 Cole Ave., Suite 106 Dallas, TX 75205	06/06/22	Per USPS Tracking: 06/13/22 In transit to next facility
WPX Permian LLC 333 W Sheridan Ave. Oklahoma City, OK 73102	06/06/22	6/14/22

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

**APPLICATION OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NOs 22861-22868

OVER RIDING ROYALTY INTERESTS

PARTY	NOTICE LETTER SENT	RETURN RECEIVED
Apollo Permian LLC P.O. Box 14779 Oklahoma City, OK 73113	06/06/22	6/16/22
Peggy Barrett c/o Bank of America, Trustee P.O. Box 80308 Dallas, TX 75259	06/06/22	06/28/22 Return to Sender Insufficient Address
Estate of Boyle, R.E., Patricia Boyle Young P.O. Box 1037 Okmulgee, OK 74447	06/06/22	6/16/22
Braille Institute of America, Inc. C/O Bank of America P.O. Box 80308 Dallas, TX 75259	06/06/22	Per USPS Tracking: 06/23/22 In transit to next facility.
Estate of Lois Clarke Unknown - Brokers attempting track down of heirship		
Collins & Jones Investments, LLC 508 W Wall Street, Suite 1200 Midland, TX 79701	06/06/22	6/14/22
David W. Cromwell P.O. Box 50820 Midland, TX 79710	06/06/22	6/15/22
Crown Oil Partners, LP P.O. Box 50820 Midland, TX 79710	06/06/22	6/15/22
Crown Oil Partners IV Management, LP P.O. Box 50820 Midland, TX 79710	06/06/22	6/15/22
Crown Ventures III, LLC P.O. Box 50820 Midland, TX 79710	06/06/22	06/15/22

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

**APPLICATION OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NOs 22861-22868

OVER RIDING ROYALTY INTERESTS

Crump Family Trust C/O Bank of America P.O. Box 80308 Dallas, TX 75252	06/06/22	Per USPS Tracking: 06/30/22 In transit to next facility.
Culbertson Management Trust, by Shirley C. Wallace, Trustee PO Box 2918 Midland, TX 79702	06/06/22	07/01/22 Return to Sender. Unclaimed.
Dakota Resources, Inc. 4519 Santa Rosa Dr. Midland, TX 79707	06/06/22	6/14/22
Davis Land & Minerals, Inc. P.O. Box 79188 Houston, TX 77279	06/06/22	6/15/22
Desert Rainbow, LLC PO Box 1837 Roswell, NM 88202	06/06/22	6/14/22
Jesse A. Faight, Jr. P.O. Box 52603 Midland, TX 79710	06/06/22	6/15/22
Fedro & Associates P.O. Box 10872 Midland, TX 79702	06/06/22	6/15/22
Frances George, Anna Lesniak 2001 Trust C/O Bank of America P.O. Box 80308 Dallas, TX 75252	06/06/22	6/28/22 Return to Sender.
Estate of Gladys Holbrook Unknown - Brokers attempting track down of heirship		
Good News Minerals, Inc. P.O. Box 50820 Midland, TX 79710	06/06/22	6/15/22

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

**APPLICATION OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NOs 22861-22868

OVER RIDING ROYALTY INTERESTS

J.L. Crump Testamentary Trust, by Jessie Blevins Crump, et al, Trustees P.O. Box 80308 Dallas, TX 75252	06/06/22	Per USPS Tracking: 06/30/22 In transit to next facility.
Jessica Ann Furlong 2001 Trust C/O Bank of America P.O. Box 80308 Dallas, TX 75252	06/06/22	6/28/22 Return to Sender.
Jessie Blevins Crump Family Trust fbo David C. Blevins, IV C/O Bank of America P.O. Box 80308 Dallas, TX 75252	06/06/22	6/28/22 Return to Sender.
Jessie Blevins Crump Family Trust fbo Sue Blevins C/O of Bank America P.O. Box 80308 Dallas, TX 75252	06/06/22	Per USPS Tracking: 06/30/22 Out for delivery in Dallas, TX; expected by 9:00 p.m.
Joe and Jessie Crump Memorial Fund P.O. Box 80308 Dallas, TX 75252	06/06/22	6/28/22 Return to Sender.
Jones Louis Blevins Family Trust C/O Bank of America P.O. Box 80308 Dallas, TX 75253	06/06/22	6/28/22 Return to Sender.
Kimberley Sue Furlong 2001 Trust C/O Bank of America P.O. Box 80308 Dallas, TX 75254	06/06/22	6/28/22 Return to Sender.
KMF Land LLC 1144 15th Street, Suite 2650 Denver, CO 80202	06/06/22	6/21/22 Return to sender. Not deliverable as addressed.

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

**APPLICATION OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NOs 22861-22868

OVER RIDING ROYALTY INTERESTS

Lazy J Bar Cane LLC P.O. Box 3660 Roswell, NM 88202	06/06/22	6/14/22
MCT Energy, Ltd. 550 West Texas, Suite 945 Midland, TX 79701	06/06/22	6/21/22 Updated address on return card: "262 Carroll St. STE. 100 Fort Worth, TX 76107"
Marshall & Winston, INC. 6 Desta DR, STE 3100 Midland, TX 79705	06/06/22	6/14/22
Nogal Ranch, LTD. 4519 Santa Rosa Dr. Midland, TX 79707	06/06/22	6/14/22
PD III Exploration, Ltd. P.O. Box 871 Midland, TX 79702	06/06/22	Per USPS Tracking: 06/13/22 In transit to next facility.
PEC Minerals, LP 16400 Dallas Parkway, Suite 400 Dallas, TX 75248	06/06/22	Per USPS Tracking: 06/09/22 Delivered to address in Dallas, TX.
Post Oak Crown IV, LLC 5200 San Felipe Houston, TX 77056	06/06/22	06/27/22
Richard B. Lynn 2001 Trust C/O Bank of America P.O. Box 80308 Dallas, Tx 75255	06/06/22	Per USPS Tracking: 06/29/22 In transit to next facility.
Richard B. Lynn 2009 Trust C/O Bank of America P.O. Box 80308 Dallas, Tx 75256	06/06/22	Per USPS Tracking: 06/29/22 In transit to next facility.

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

**APPLICATION OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NOs 22861-22868

OVER RIDING ROYALTY INTERESTS

Sabine Royalty Trust, by Simmons Bank PO BOX 962020 Fort Worth, TX 76162-2020	06/06/22	Per USPS Tracking: 06/24/22 In transit to next facility.
Sandra Mcfadden Furlong 2001 Trust C/O Bank of America P.O. Box 80308 Dallas, TX 75257	06/06/22	Per USPS Tracking: 06/23/22 Being returned to sender.
Selma E. Andrews Perpetual Charitable Trust c/o Bank of America, Trustee P.O. Box 80308 Dallas, TX 75259	06/06/22	6/28/22 Return to Sender. Insufficient Address.
E.R. Stanley Unknown - Brokers attempting track down of heirship		
Gerard G. Vaverek P.O. Box 50820 Midland, TX 79710	06/06/22	6/15/22
H. Jason Wacker 5601 Hillcrest Midland, TX 79707	06/06/22	Per USPS Tracking: 06/09/22 Notice left. No authorized recipient available.
Estate of R.O. Walker Unknown - Brokers attempting track down of heirship		
Estate of D.M. Wallace Unknown - Brokers attempting track down of heirship		
Wells Fargo Central Pacific Holdings, Inc. 600 California St., 20th FL San Francisco, CA 94108	06/06/22	6/28/22 Return to Sender. Insufficient Address.

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

**APPLICATION OF COLGATE OPERATING, LLC
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NOs 22861-22868

OVER RIDING ROYALTY INTERESTS

Wheat Company Trust, Gilbert C. Wheat Jr., Susan W. Cony and Margery W. Hyuck 1425 W Pioneer Dr., Suite 146 Irving, TX 75061	06/06/22	6/16/22
William M. Lynn 2001 Trust C/O Bank of America P.O. Box 80308 Dallas, Tx 75258	06/06/22	06/23/22
William M. Lynn 2009 Trust C/O Bank of America P.O. Box 80308 Dallas, Tx 75259	06/06/22	Per USPS Tracking: 06/29/22 In transit to next facility.

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
JUN 06 2022

Doyle Hartman
500 North Main Street, #2
Midland, TX 79701
22861-22868 Colgate Robin - WI & RTO

PS Form 3800, April 2015 PSN 7530-02-000-8047 See Reverse for Instructions

7021 0950 0002 0371 4245

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>D. Hartman</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery COVID-19 - FA 6/15/22</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>1. Article Addressed to:</p> <p style="text-align: center;">Doyle Hartman 500 North Main Street, #2 Midland, TX 79701</p> <p style="text-align: center; font-size: 0.8em;">22861-22868 Colgate Robin - WI & RTO</p> <p style="text-align: center;">9590 9402 6746 1074 4000 98</p>	<p>3. Service Type</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em;">7021 0950 0002 0371 4245</p>																	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt																

Colgate Operating, LLC
Case No. 22864
Exhibit C-3

7021 0950 0002 0371 4191

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

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

OFFICIAL RECEIPT

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 \$ _____

Oxy USA WTP LP
 5 Greenway Plaza
 Houston, TX 77046
 22861-22868 Colgate Robin - RTO

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



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Oxy USA WTP LP 5 Greenway Plaza Houston, TX 77046</p> <p>22861-22868 Colgate Robin - RTO</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>9590 9402 6746 1074 4000 36</p> <p>2 Article Number (Transfer from service label) 7021 0950 0002 0371 4191</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

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

Penroc Oil Corp
1515 W Calle Sur St.
Hobbs, NM 88240

City, State, & ZIP+4®

22861-22868 Colgate Robin - RTO

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

See Reverse for Instructions



7021 0950 0002 0371 4177

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:

Penroc Oil Corp
1515 W Calle Sur St.
Hobbs, NM 88240

22861-22868 Colgate Robin - RTO



9590 9402 6746 1074 4000 12

2. Article Number (Transfer from service label)

7021 0950 0002 0371 4177

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Rosa Jose*

- Agent
- Addressee

B. Received by (Printed Name)

Rosa Jose

C. Date of Delivery

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

1515

3. Service Type

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

Domestic Return Receipt

7021 0950 0002 0371 4184

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

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

OFFICIAL RECEIPT

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: WPX Permian LLC
 Street: 333 W Sheridan Ave.
 City: Oklahoma City, OK 73102
 22861-22868 Colgate Robin - RTO

PS Form 3800, April 2015 PSN 7580-02-000-9047 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:

WPX Permian LLC
 333 W Sheridan Ave.
 Oklahoma City, OK 73102
 22861-22868 Colgate Robin - RTO

2. Article Number (Transfer from service label)
 7021 0950 0002 0371 4184

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 David Carrillo

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

Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Domestic Return Receipt

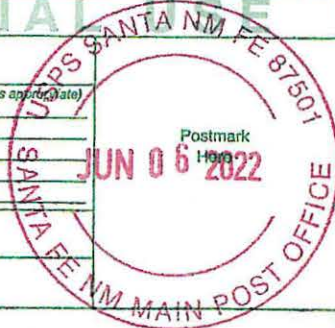
7021 0950 0002 0371 4276

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

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OFFICIAL RECEIPT

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	
Estate of James Davidson 515 Tradewinds Blvd. Midland, TX 79706 22861-22868 Colgate Robin - WI	



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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Elaine Greenhaw</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) ELAINE GREENHAW</p> <p>C. Date of Delivery 6-9-22</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>1. Article Addressed to:</p> <p>Estate of James Davidson 515 Tradewinds Blvd. Midland, TX 79706</p> <p>22861-22868 Colgate Robin - WI</p>																	
<p>9590 9402 6746 1074 4000 81</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
<p>2. Article Number (Transfer from service label)</p> <p>7021 0950 0002 0371 4276</p>																	

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

Domestic Return Receipt

7021 0950 0002 0371 4207

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

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OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Postmark Here
JUN 06 2022

Post Office: SANTA FE NM MAIN POST OFFICE

City: San Antonio, TX 78209
 22861-22868 Colgate Robin - WI

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:

Grey Wolf Land Services
 236 Argyle Ave.
 San Antonio, TX 78209

22861-22868 Colgate Robin - WI

9590 9402 6746 1074 4000 43

2. Article Number (Transfer from service label)
 7021 0950 0002 0371 4207

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) C. Date of Delivery
 [Signature] 6/11/2022

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 Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

U.S. Postal Service™
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Domestic Mail Only

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OFFICIAL USE

Postmark Here
JUN 06 2022

USPS SANTA NM FE 87501
 SANTA NM FE 87501

7021 0950 0002 0371 4245

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 \$ _____

Doyle Hartman
 500 North Main Street, #2
 Midland, TX 79701
 22861-22868 Colgate Robin - WI & RTO

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<ul style="list-style-type: none"> ■ 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. <p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p style="text-align: center;">Doyle Hartman 500 North Main Street, #2 Midland, TX 79701</p> <p style="text-align: center; font-size: 0.8em;">22861-22868 Colgate Robin - WI & RTO</p> </div> <div style="text-align: center; margin: 5px 0;"> <p style="font-size: 1.2em; font-weight: bold;">9590 9402 6746 1074 4000 98</p> </div> <p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">7021 0950 0002 0371 4245</p>	<p>A. Signature</p> <p><i>x D. Hartman</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p><i>COVID-19 - FA</i> <i>6/15/22</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table style="width: 100%; border: none;"> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) </td> <td style="vertical-align: top;"> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery </td> </tr> </table>	<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery		
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt		

7021 0950 0002 0371 4252

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

Marathon Oil Permian, LLC
 990 Town and Country Boulevard
 Houston, TX 77024
 22861-22868 Colgate Robin - WI

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:

Marathon Oil Permian, LLC
 990 Town and Country Boulevard
 Houston, TX 77024

22861-22868 Colgate Robin - WI

9590 9402 6746 1074 4000 67

2. Article Number (Transfer from service label)
 7021 0950 0002 0371 4252

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 [Signature] 6/9/2022

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 Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

7021 0950 0002 0371 4214

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

Southwest Royalties, Inc.
 P.O. Box 53570
 Midland, TX 79710
 22861-22868 Colgate Robin - WI

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:

Southwest Royalties, Inc.
 P.O. Box 53570
 Midland, TX 79710

22861-22868 Colgate Robin - WI

9590 9402 6746 1074 4001 35

2 Article Number (Transfer from service label)
 7021 0950 0002 0371 4214

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 [Signature]

C. Date of Delivery
 6-9-22

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

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery Insured Mail

Insured Mail Restricted Delivery (over \$500)

7021 0950 0002 0371 4238

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 \$ _____

Postmark
 JUN 06 2022

22861-22868 Colgate Robin - WI

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



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 	<p>A. Signature <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Leon Jeffcoat</i> C. Date <i>6/10/22</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>1. Article Addressed to:</p> <p>Tierra Media Resources P.O. Box 9758 Midland, TX 79708</p> <p>22861-22868 Colgate Robin - WI</p> <p> 9590 9402 6746 1074 4001 04</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7021 0950 0002 0371 4238</p>	<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

7021 0950 0002 0371 4221

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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
 Larry Nemyr
 900 33 Avenue SW, Apartment 15
 Minot, ND 58701
 22861-22868 Colgate Robin - WI

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



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OFFICIAL USE

Certified Mail Fee
 \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage
 \$ _____

Total Postage and Fees
 \$ _____

Sent To
 Pogo Resources, LLC
 4809 Cole Ave. Suite 108
 Dallas, TX 75205
 22861-22868 Colgate Robin - WI & RTO

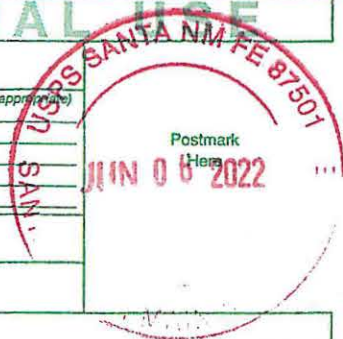
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 0950 0002 0371 4221



7021 0950 0002 0371 4221

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
<i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	\$ _____
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	\$ _____
Total Postage and Fees	\$ _____
Sent To	
Pogo Resources, LLC	
4809 Cole Ave. Suite 108	
Dallas, TX 75205	
22861-22868 Colgate Robin - WI & RTO	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



7020 0640 0000 0304 1326

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 No. Braille Institute of America, Inc.
 C/O Bank of America
 P.O. Box 80308
 Dallas, Tx 75259

City, State, ZIP+4® 22861-22868 Colgate Robin - ORRI

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



7021 0950 0002 0370 8527

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 No. Crump Family Trust C/O Bank of America
 P.O. Box 80308
 Dallas, TX 75252

City, State, ZIP+4® 22861-22868 Colgate Robin - ORRI

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



7021 0950 0002 0370 8565

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 No. J.L. Crump Testamentary Trust, by Jessie
 Blevins Crump, et al, Trustees
 P.O. Box 80308
 Dallas, TX 75252

City, State, ZIP+4® 22861-22868 Colgate Robin - ORRI

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



7021 0950 0002 0370 8602

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 No. Jessie Blevins Crump Family Trust
 Ibo Sue Blevins
 C/O Bank of America
 P.O. Box 80308
 Dallas, TX 75252

City, State, ZIP+4® 22861-22868 Colgate Robin - ORRI

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



7020 0640 0000 0304 0817

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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
 Street a PD III Exploration, Ltd.
 P.O. Box 871
 City, Sta Midland, TX 79702

22861-22868 Colgate Robin - ORRI

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



7020 0640 0000 0304 0800

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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
 Street a PEC Minerals, LP
 16400 Dallas Parkway, Suite 400
 Dallas, TX 75248

City, Sta 22861-22868 Colgate Robin - ORRI

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



7020 0640 0000 0304 1272

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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 \$

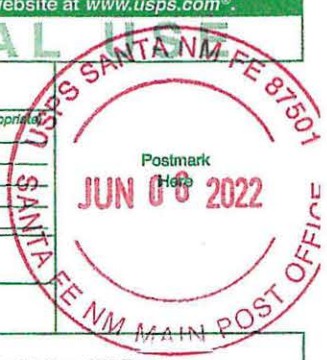
Adult Signature Restricted Delivery \$

Postage
\$

Total Postage and Fees
\$

Sent To
Street and Apt. No., or PO Box No. Richard B. Lynn 2001 Trust
C/O Bank of America
P.O. Box 80308
City, State, ZIP+4® Dallas, TX 75255
22861-22868 Colgate Robin - ORRI

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



7021 0950 0002 0370 8633

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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
Street and A Richard B. Lynn 2009 Trust
C/O Bank of America
P.O. Box 80308
City, State, Z Dallas, Tx 75256
22861-22868 Colgate Robin - ORRI

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



7021 0950 0002 0370 2204

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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
Street and Apt. No., or PO Box No. Sabby Royalty Trust, by Simmons
Bank
PO Box 962020
City, State, ZIP+4® Fort Worth, Tx 76162-2020
22861-22868 Colgate Robin - ORRI

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



7020 0640 0000 0304 1289

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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
Street and Apt. No., or PO Box No. Sandra McFadden Furlong 2001 Trust
C/O Bank of America
P.O. Box 80308
City, State, ZIP+4® Dallas, Tx 75257
22861-22868 Colgate Robin - ORRI

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



7020 0640 0000 0304 1036

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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 \$

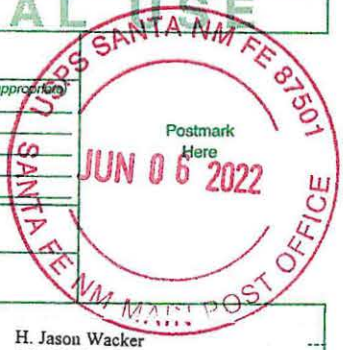
Adult Signature Restricted Delivery \$

Postage
\$

Total Postage and Fees
\$

Sent To
Street and Apt. No., or PO Box No. H. Jason Wacker
5601 Hillcrest
City, State, ZIP+4® Midland, TX 79707
22861-22868 Colgate Robin - ORRI

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



7020 0640 0000 0304 1302

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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 \$

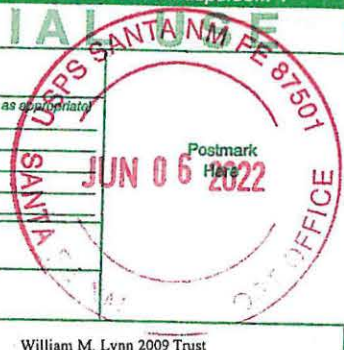
Adult Signature Restricted Delivery \$

Postage
\$

Total Postage and Fees
\$

Sent To
Street and Apt. No., or PO Box No. William M. Lynn 2009 Trust
C/O Bank of America
P.O. Box 80308
City, State, ZIP+4® Dallas, Tx 75259
22861-22868 Colgate Robin - ORRI

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 \$ _____

Sent To

Street and P.O. Box Apollo Permian LLC
 P.O. Box 14779

City, State Oklahoma City, OK 73113
 22861-22868 Colgate Robin - ORRI

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

7020 0640 0000 0304 0794



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> ■ 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. <p>1. Article Addressed to:</p> <p style="text-align: center;">Apollo Permian LLC P.O. Box 14779 Oklahoma City, OK 73113</p> <p style="text-align: center; font-size: 0.8em;">22861-22868 Colgate Robin - ORRI</p> <div style="text-align: center;"> <p>9590 9402 6746 1074 2379 91</p> </div> <p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">7020 0640 0000 0304 0794</p>	<p>A. Signature</p> <p><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p style="font-size: 1.2em;">Shea Houston 6/13/22</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table style="width: 100%; font-size: 0.8em;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt																

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USPS SANTA FE NM FE-87501
JUN 06 2022
SANTA FE NM MAIN POST OFFICE

Postmark Here

7021 0950 0002 0370 2235

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

Street and Apt. No., or PO Box No. Estate of Boyle, R.E., Patricia Boyle Young
P.O. Box 1037

City, State, ZIP+4® Okmulgee, Ok 74447
22861-22868 Colgate Robin - ORRI

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery <i>[Signature]</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>1. Article Addressed to:</p> <p style="text-align: center;">Estate of Boyle, R.E., Patricia Boyle Young P.O. Box 1037 Okmulgee, Ok 74447</p> <p style="text-align: center; font-size: 0.8em;">22861-22868 Colgate Robin - ORRI</p>	<p>3. Service Type</p> <table style="width: 100%; font-size: 0.8em;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; text-align: center;">7021 0950 0002 0370 2235</p>	<p>9590 9402 6746 1074 2169 03</p>																
PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt																	

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OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

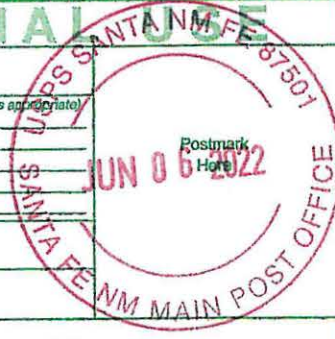
Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and Collins & Jones Investments, LLC
 508 W Wall Street, Suite 1200
 Midland, TX 79701
 City, State 22861-22868 Colgate Robin - ORRI

PS Form 3800, April 2015 PSN 7580-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Carl Lamar</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery <i>6/19/22</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Collins & Jones Investments, LLC 508 W Wall Street, Suite 1200 Midland, TX 79701</p> <p>22861-22868 Colgate Robin - ORRI</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>9590 9402 6746 1074 2168 11</p> <p>2. Article Number (Transfer from service label)</p> <p>7020 0640 0000 0304 0701</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

7020 0640 0000 0304 1043

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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 Fees	\$
Sent To	
David W. Cromwell	
P.O. Box 50820	
Midland, TX 79710	
22861-22868 Colgate Robin - ORRI	
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:

David W. Cromwell
P.O. Box 50820
Midland, TX 79710

22861-22868 Colgate Robin - ORRI



9590 9402 6746 1074 2360 79

2. Article Number (Transfer from service label)

7020 0640 0000 0304 1043

COMPLETE THIS SECTION ON DELIVERY

A. Signature		<input type="checkbox"/> Agent
<input checked="" type="checkbox"/> <i>Lopez</i>		<input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery	
<i>Leticia Lopez</i>	<i>6-10-22</i>	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes		
If YES, enter delivery address below: <input type="checkbox"/> No		

3. Service Type
- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

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

Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and P.O. Box: Crown Oil Partners, LP
 P.O. Box 50820
 Midland, TX 79710

City, State: Midland, TX 79710
 22861-22868 Colgate Robin - ORRI

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



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>L. Lopez</i></p> <p>B. Received by (Printed Name) <i>Leticia Lopez</i></p> <p>C. Date of Delivery <i>6-10-22</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Crown Oil Partners, LP P.O. Box 50820 Midland, TX 79710</p> <p>22861-22868 Colgate Robin - ORRI</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7020 0640 0000 0304 0688</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

7020 0640 0000 0304 0695

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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

Street and Apt. Crown Oil Partners IV Management, LP
 P.O. Box 50820
 City, State, Z Midland, TX 79710
 22861-22868 Colgate Robin - ORRI

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:

Crown Oil Partners IV
 Management, LP
 P.O. Box 50820
 Midland, TX 79710

22861-22868 Colgate Robin - ORRI



9590 9402 6746 1074 2168 28

2. Article Number (Transfer from service label)

7020 0640 0000 0304 0695

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 [Signature] Addressee

B. Received by (Printed Name) *Let Lopez* C. Date of Delivery *6-10-22*

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
- Certified Mail Restricted Delivery Signature Confirmation™
- Collect on Delivery Signature Confirmation Restricted Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p>Crown Ventures III, LLC P.O. Box 50820 Midland, TX 79710</p> </div> <p style="text-align: right; font-size: small;">22861-22868 Colgate Robin - ORRI</p>	<p>B. Received by (Printed Name) C. Date of Delivery</p> <p>Letti Lopez 6-10-22</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p style="text-align: center;">9590 9402 6746 1074 2360 62</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail (Mail Restricted Delivery 500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7020 0640 0000 0304 1050</p>	<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>

7021 0950 0002 0370 8534

U.S. Postal Service™
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 Domestic Mail Only

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OFFICIAL RECEIPT

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 No. Dakota Resources, Inc.
4519 Santa Rosa Dr.

City, State, ZIP+4® Midland, TX 79707
22861-22868 Colgate Robin - ORRI

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:

Dakota Resources, Inc.
4519 Santa Rosa Dr.
Midland, TX 79707

22861-22868 Colgate Robin - ORRI

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Jessica Johnson Agent
 Addressee

B. Received by (Printed Name)
Jessica Johnson

C. Date of Delivery
6-9-22

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



9590 9402 6746 1074 2170 54

2. Article Number (Transfer from service label)
 7021 0950 0002 0370 8534

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

7020 0640 0000 0304 0824

**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

Street and Davis Land & Minerals, Inc.
P.O. Box 79188

City, State Houston, TX 77279
22861-22868 Colgate Robin - ORRI

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



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>Complete items 1, 2, and 3.</p> <p>Print name and address on the reverse and return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Davis Land & Minerals, Inc. P.O. Box 79188 Houston, TX 77279</p> <p>22861-22868 Colgate Robin - ORRI</p> <p>9590 9402 6746 1074 2379 60</p> <p>2. Article Number (Transfer from service label)</p>	<p>A. Signature <i>GR...</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>BRAX DAVIS</i> C. Date of Delivery <i>6-9-22</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>

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OFFICIAL RECEIPT

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 No. Desert Rainbow, LLC
PO Box 1837

City, State, ZIP+4® Roswell, Nm 88202
22861-22868 Colgate Robin - ORRI

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

7020 0640 0000 0304 1340



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:

Desert Rainbow, LLC
PO Box 1837
Roswell, Nm 88202

22861-22868 Colgate Robin - ORRI

9590 9402 6746 1074 2361 23

2. Article Number (Transfer from service label)

7020 0640 0000 0304 1340

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

[Signature]

B. Received by (Printed Name) *[Signature]*

C. Date of Delivery *[Signature]*

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 Signature Confirmation™
- Collect on Delivery Signature Confirmation Restricted Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

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Domestic Mail Only

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OFFICIAL RECEIPT

7020 0640 0000 0304 1029

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
Jesse A. Faight, Jr.
Street and Apt. No., or PO Box No. P.O. Box 52603
Midland, TX 79710
City, State, ZIP+4® 22861-22868 Colgate Robin - ORR1

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:

Jesse A. Faight, Jr.
P.O. Box 52603
Midland, TX 79710

22861-22868 Colgate Robin - ORR1



9590 9402 6746 1074 2360 93

2. Article Number (Transfer from service label)
7020 0640 0000 0304 1029

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Jesse A. Faight, Jr.* Agent Addressee

B. Received by (Printed Name) *Jesse A. Faight, Jr.* C. Date of Delivery *6-10-22*

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 Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

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

7021 0950 0002 0370 8541

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

Street and Apt. No., or PO Box No. Fedro & Associates
 P.O. Box 10872

City, State, ZIP+4® Midland, TX 79702
 22861-22868 Colgate Robin - ORRI

PS Form 3800, April 2015 PSN 7530-02-000-8047 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:

Fedro & Associates
 P.O. Box 10872
 Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

RW Fedro

B. Received by (Printed Name) *RW Fedro*

C. Date of Delivery

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

22861-22868 Colgate Robin - ORRI



9590 9402 6746 1074 2170 47

2. Article Number (Transfer from service label)
 7021 0950 0002 0370 8541

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

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

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



7020 0640 0000 0304 0831

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	
Street and	Good News Minerals, Inc. P.O. Box 50820 Midland, TX 79710
City, State	Midland, TX 79710 22861-22868 Colgate Robin - ORRI

PS Form 3800, April 2015 PSN 7530-02-000-8047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Leti Lopez</u></p> <p>C. Date of Delivery <u>6-10-22</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>																
<p>1. Article Addressed to:</p> <p>Good News Minerals, Inc. P.O. Box 50820 Midland, TX 79710</p> <p>22861-22868 Colgate Robin - ORRI</p>  <p>9590 9402 6746 1074 2168 66</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
<p>2. Article Number (Transfer from service label)</p> <p>7020 0640 0000 0304 0831</p>																	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt																

7021 0950 0002 0370 2259

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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 \$ _____

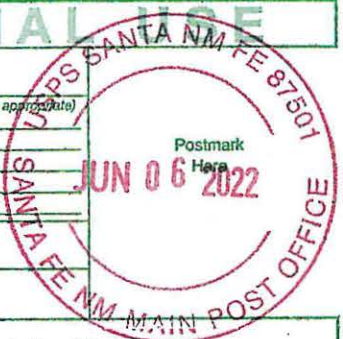
Total Postage and Fees \$ _____

Sent To

Street and Apt. No., or PO Box No. Lazy J Bar Cane LLC
P.O. Box 3660
Roswell, NM 88202

City, State, ZIP+4® 22861-22868 Colgate Robin - ORRI

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:

Lazy J Bar Cane LLC
P.O. Box 3660
Roswell, NM 88202

22861-22868 Colgate Robin - ORRI

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) JACK RICHARDSON

C. Date of Delivery

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



9590 9402 6746 1074 2168 80

2. Article Number (Transfer from service label)
7021 0950 0002 0370 2259

3. Service Type

Priority Mail Express®

Adult Signature Registered Mail™

Adult Signature Restricted Delivery Registered Mail Restricted Delivery

Certified Mail® Signature Confirmation™

Certified Mail Restricted Delivery Signature Confirmation Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

U.S. Postal Service™
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Domestic Mail Only

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OFFICIAL USE

7020 0640 0000 0304 1005

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 No. _____

City, State, ZIP+4® _____

Postmark Here
JUN 06 2022

MCT Energy, Ltd.
550 West Texas, Suite 945
Midland, TX 79701
22861-22868 Colgate Robin - ORRI

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent Kodi Hawkins <input type="checkbox"/> Addressee</p> <p>C. Date of Delivery 6/16/22</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No 262 Carroll St., Ste. 100 Fort Worth, TX 76107</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">MCT Energy, Ltd. 550 West Texas, Suite 945 Midland, TX 79701</p> <p style="text-align: center; font-size: 0.8em;">22861-22868 Colgate Robin - ORRI</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">7020 0640 0000 0304 1005</p>	
<p>9590 9402 6746 1074 2361 16</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee

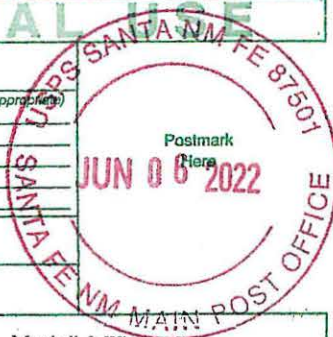
\$

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

JUN 06 2022



Postage

\$

Total Postage and Fees

\$

Sent To

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

Marshall & Winston, Inc.
6 Desta Dr Ste 3100
Midland, Tx 79705

City, State, ZIP+4®

22861-22868 Colgate Robin - ORRI

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

See Reverse for Instructions

7021 0350 0001 3336 1799

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:

Marshall & Winston, Inc.
6 Desta Dr Ste 3100
Midland, Tx 79705

22861-22868 Colgate Robin - ORRI



9590 9402 6746 1074 2169 41

2. Article Number (Transfer from service label)

7021 0350 0001 3336 1799

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

6-9-22

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
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

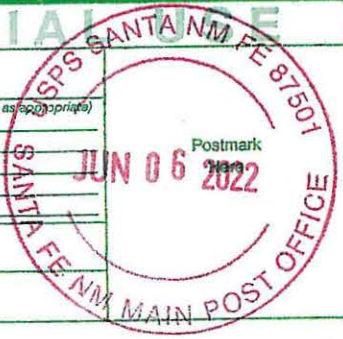
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

7021 0950 0002 0370 2242

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

OFFICIAL RECEIPT

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
 Street and Apt. No., or PO Box No. Nogal Ranch, Ltd.
 4519 Santa Rosa Dr.
 City, State, ZIP+4® Midland, Tx 79707
 22861-22868 Colgate Robin - ORRI

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:

Nogal Ranch, Ltd.
 4519 Santa Rosa Dr.
 Midland, Tx 79707

22861-22868 Colgate Robin - ORRI



9590 9402 6746 1074 2168 97

2. Article Number (Transfer from service label)
 7021 0950 0002 0370 2242

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 * *Jessica Johnson* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
Jessica Johnson *6-9-22*

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> 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 RECEIPT

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. Post Oak Crown IV, LLC
 5200 San Felipe

City, State, Zip Houston, TX 77056
 22861-22868 Colgate Robin - ORRI

PS Form 3800, April 2015 PSN 7530-02-020-9047 See Reverse for Instructions

Postmark Here JUN 06 2022

7020 0640 0000 0304 0848

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>E. Hurston</u></p> <p>C. Date of Delivery <u>6/21/22</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Post Oak Crown IV, LLC 5200 San Felipe Houston, TX 77056</p> <p>22861-22868 Colgate Robin - ORRI</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 0140</p> <p>7020 0640 0000 0304 0848</p>	<p>Domestic Return Receipt</p>
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Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To

Street and Apt. No., or PO Box No. Gerard G. Vaverek
P.O. Box 50820
Midland, TX 79710

City, State, ZIP+4® Midland, TX 79710
22861-22868 Colgate Robin - ORRI

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



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Midland, TX 79710

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 Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
Leti Lopez 6/10/22

D. Is delivery address different from item 1? Yes
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9590 9402 6746 1074 2361 09

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Collect on Delivery Signature Confirmation Restricted Delivery

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<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and Apt. No., or PO Box No. City, State, ZIP+4®	William M. Lynn 2001 Trust C/O Bank of America P.O. Box 80308 Dallas, Tx 75258 22861-22868 Colgate Robin - ORRI

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

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<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> <div style="float: right;"> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee </div>
1. Article Addressed to: <div style="text-align: center;"> William M. Lynn 2001 Trust C/O Bank of America P.O. Box 80308 Dallas, Tx 75258 <small>22861-22868 Colgate Robin - ORRI</small> </div>	B. Received by (Printed Name) C. Date of Delivery <div style="text-align: right; color: red; font-weight: bold;"> JUN 15 2022 </div>
2. Article Number (Transfer from service label) <div style="text-align: center; font-size: 1.2em; font-weight: bold;"> 7020 0640 0000 0304 1296 </div>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
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Copperas Cove, TX 76522
22861-22868 Colgate Robin - WI

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PO BOX 2068 • 218 MONTEZUMA
SANTA FE, NEW MEXICO 87504

TO

Ruth Sutton
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<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
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Barrett, Peggy C/O Bank of America, Trustee P.O. Box 80308 Dallas, Tx 75259 22861-22868 Colga	
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PO BOX 2068 • 218 MONTEZUMA
SANTA FE, NEW MEXICO 87504

TO

Barrett, Peggy
C/O Bank of America, Trustee
P.O. Box 80308
Dallas, Tx 75259

22861-22868 Colgate Robin - ORRI

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BETTER ADDRESS

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Street and Apt. No., or PO Box No. Culbertson Management Trust,
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PO Box 2918
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City, State, ZIP+4®	22861-22868 Colgate Robin - ORRI

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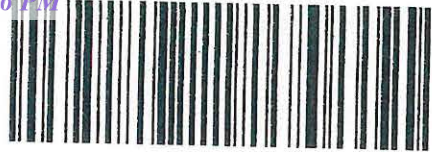


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1144 15th Street, Suite 2650
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Selma E. Andrews Perpetual Charitable Trust
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TO

Selma E. Andrews Perpetual
 Charitable Trust
 C/O Bank of America, Trustee
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Holdings, Inc.
600 California St.,
San Francisco, CA 94108

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Wells Fargo Central Pacific Holdings, Inc.
600 California St., 20th FL
San Francisco, CA 94108
22861-22868 Colgate Robin - ORRI



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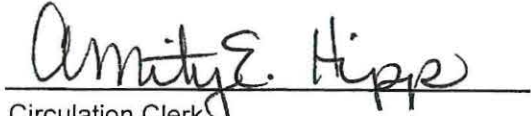
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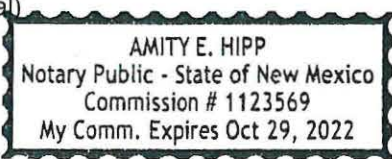
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LEGAL NOTICE
June 16, 2022

This is to notify all interested parties, including Crump Family Trust c/o Bank of America; Dakota Resources, Inc.; Fedro & Associates; Frances George, Anna Lesniak 2001 Trust c/o Bank of America; J.L. Crump Testamentary Trust, by Jessie Blevins Crump, et al, Trustees; Joe and Jessie Crump Memorial Fund; Jessica Ann Furlong 2001 Trust c/o Bank of America; Jessie Blevins Crump Family Trust fbo David C. Blevins, IV c/o Bank of America; Jessie Blevins Crump Family Trust fbo Sue Blevins c/o Bank of America; Jones Louis Blevins Family Trust c/o Bank of America; Kimberly Sue Furlong 2001 Trust c/o Bank of America; Richard B. Lynn 2001 Trust c/o Bank of America; Richard B. Lynn 2009 Trust c/o Bank of America; Sandra McFadden Furlong 2001 Trust c/o Bank of America; William M. Lynn 2001 Trust c/o Bank of America; William M. Lynn 2009 Trust c/o Bank of America; Barrett, Peggy c/o Bank of America, Trustee; Braille Institute of America, Inc. c/o Bank of America; Estate of Clarke, Lois; Culbertson Management Trust, by Shirley C. Wallace, Trustee; Desert Rainbow, LLC; Estate of Holbrook, Gladys; Marshall & Winston, Inc.; Sabine Royalty Trust, by Simmons Bank; Selma E. Andrews Perpetual Charitable Trust c/o Bank of America, Trustee; Stanley, E.R.; Estate of Walker, R.O.; Estate of Wallace, D.M.; Wheat Company Trust, Gilbert C. Wheat Jr., Susan W. Cony and Margery W. Hyuck; Estate of Boyle, R.E., Patricia Boyle Young; Nogal Ranch, LTD; Lazy J Bar Cane LLC; KMF Land LLC; Apollo Permian LLC; PEC Minerals, LP; PD III Exploration, Ltd.; Davis Land & Minerals, Inc.; Good News Minerals, Inc.; Post Oak Crown IV, LLC; Wells Fargo Central Pacific Holdings, Inc.; Crown Oil Partners, LP; Crown Oil Partners IV Management, LP; Collings & Jones Investments, LLC; MCT Energy, Ltd.; Gerard G. Vaverek; Jesse A. Faught, Jr.; H. Jason Wacker; David W. Cromwell; Crown Ventures III, LLC; Estate of James Davidson; Ruth Sutto; Larry Nermyr; Marathon Oil Permian, LLC; Doyle Hartman; Estate of Ronnie H. Westbrook; Tierra Media Resources; Pogo Resources, LLC; Southwest Royalties, Inc.; Grey Wolf Land Services; Oxy USA WPT LP; WPX Permian LLC; Penroc Oil Corp; and their successors and assigns, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Colgate Operating, LLC (Case No. 22864). During the COVID-19 Public Health Emergency, state buildings are closed to the public and hearings will be conducted remotely. The hearing will be conducted on July 7, 2022, beginning at 8:15 a.m. To participate in the electronic hearing, see the instructions posted on the OCD Hearings website for that date: <http://www.emnrd.state.nm.us/OCD/hearings.html>. Applicant applies for an order pooling all uncommitted interests in the Wolfcamp formation underlying a 280-acre, more or less, standard horizontal spacing unit comprised of the W/2 W/2 of Section 17 and the W/2 NW/4 and NW/4 SW/4 of Section 20, Township 20 South, Range 34 East, Lea County, New Mexico ("Unit"). The Unit will be dedicated to the Robin Federal Com 201H well, to be horizontally drilled from a surface hole location in the NW/4 SW/4 (Unit L) of Section 20 to a bottom hole location in the NW/4 NW/4 (Unit D) of Section 17. Also to be considered will be the cost of drilling and completing the Wells and the allocation of the costs, the designation of Applicant as the operator of the Wells, and a 200% charge for the risk involved in drilling and completing the Wells. The Wells are located approximately 27.12 miles southwest of Hobbs, New Mexico. #37756

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Colgate Operating, LLC
Case No. 22864
Exhibit C-4