

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

APPLICATION OF MEWBOURNE OIL
COMPANY FOR COMPULSORY POOLING,
ETC., EDDY COUNTY, NEW MEXICO.

Case No. 23693

NOTICE OF FILING ADDITIONAL EXHIBITS

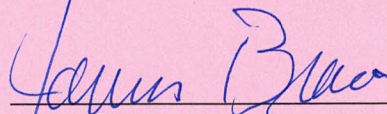
Mewbourne Oil Company submits for filing the following:

Replacement Exhibit 4, the statement of certified notice, which includes all green card information received to date..

Exhibit 5, the certified notice spreadsheet.

Exhibit 6, the affidavit of publication.

Respectfully submitted,



James Bruce
Post Office Box 1056
Santa Fe, New Mexico 87504
(505) 982-2043
jamesbruc@aol.com

Attorney for Mewbourne Oil Company

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

APPLICATION OF MEWBOURNE OIL COMPANY
FOR COMPULSORY POOLING, EDDY COUNTY,
NEW MEXICO.

Case No. 23693

SELF-AFFIRMED STATEMENT OF NOTICE

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

James Bruce deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Mewbourne Oil Company.
3. Mewbourne Oil Company has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners, at their last known addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachments A and B.
5. Applicant has complied with the notice provisions of Division Rules.

I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 5 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

Date: 8/1/23

James Bruce
James Bruce

Replacement
EXHIBIT 4

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

July 13, 2023

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:


Enclosed are copies of an application for compulsory pooling and a non-standard spacing and proration unit, filed by Mewbourne Oil Company with the Oil Conservation Division (Case No. 23693), seeking to pool the Bone Spring formation underlying a horizontal spacing unit comprised of Lots 1-4 and the S/2N/2 (the N/2) of Section 2 and Lots 1-4 and the S/2N/2 (the N/2) of Section 1, Township 18 South, Range 32 East, N.M.P.M., Lea County, New Mexico. Applicant proposes to drill the following wells to a depth sufficient to test the Bone Spring formation: (a) the Night Watch 2/1 B2DA Fed. Com. Well No. 1H, with a first take point in Lot 4 of Section 2 and a last take point in Lot 1 of Section 1; and (b) the Night Watch 2/1 B2EH Fed. Com. Well No. 1H, a horizontal well with a first take point in the SW/4NW/4 of Section 2 and a last take point in the SE/4NE/4 of Section 1.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, August 3, 2023. During the current circumstances, state buildings are closed to the public and the hearing will be conducted remotely. To view the hearing docket and to determine how to participate in an electronic hearing, go to <https://www.emnrd.nm.gov/ocd/hearing-info/>, or contact Marlene Salvidrez at Marlene.Salvidrez@emnrd.nm.gov. You are not required to attend this hearing, but as an owner of an interest who may be affected by the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date. A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than five business days before the hearing date. This statement may be filed online with the Division at ocd.hearings@emnrd.nm.gov, and should include: The name of the party and his or her attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate time the party will need to present his or her case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

ATTACHMENT

A

Very truly yours,


James Bruce

Attorney for Mewbourne Oil Company

BEXP II Alpha, LLC
5914 West Courtyard Drive, STE 340
Austin, TX 78730
Attn: Anthony Cross

BEXP II Omega, LLC
5914 West Courtyard Drive, STE 340
Austin, TX 78730
Attn: Anthony Cross

Cross Timbers Energy, LLC
400 West 7th Street
Fort Worth, TX 76102
Attn: Caylee Hicks

Devon Energy Production Company LP
333 W. Sheridan Ave.
Oklahoma City, Oklahoma 73102
Attn: Permian Land Manager

James L. Harden III
13521 W Wesley Ave
Lakewood, CO 80228-4744

SWAWBW, LLC
812 Foster Hill
Nashville, TN 37215
Attn: Permian Land Manager

HORSESHOE OPERATING, INC.
110 W. Louisiana Ave.
Midland, TX 79701
Attn: Erin Slape

EXHIBIT

A

O.H.B. INC
P.O. Box 1432
San Angelo, TX 76902-1432
Attn: Permian Land Manager

Jack Huff Energy Ltd.
P.O. Box 50190
Midland, TX 79710
Attn: Permian Land Manager

MRC Delaware Resources, LLC
One Lincoln Centre
5400 LBJ Freeway, STE 1500
Dallas, TX 75240
Attn: Nick Weeks

Lewis Burleson Properties, LP
P.O. Box 2479
Midland, TX 79702
Attn: Permian Land Manager

Yates Energy Corporation
P.O. Box 2323
Roswell, NM 88202
Attn: Permian Land Manager

Yates-US Inc.
P.O. Box 2323
Roswell, NM 88202
Attn: Permian Land Manager

Burleson Petroleum, Inc.
P.O. Box 2479
Midland, TX 79702
Attn: Permian Land Manager

Chel-Trand Holdings, LLC
110 W. Louisiana Ave., STE 200
Midland, TX 79701-3414
Attn: Permian Land Manager

Rhodes Interests, Ltd.
110 W. Louisiana Ave., STE 200
Midland, TX 79701-3414
Attn: Permian Land Manager

Carolyn L. Shogrin, individually and Personal Representative of the Estate of Frank L.
Shogrin, deceased
4614 590th Rd
Hay Springs, NE 69347

KMK Energy, LLC
4506 N. Walbaum Road
Geary, OK 73040
Attn: Permian Land Manager

MEC Development, Ltd.
P.O. Box 4000
The Woodlands, TX 77380-4000
Attn: Permian Land Manager

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:

BEXP II Omega, LLC
5914 West Courtyard Drive, STE 340
Austin, TX 78730
Attn: Anthony Cross



9590 9402 7635 2122 6589 82

2. Article # 7022 1670 0002 1182 5356

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

Domestic Return Receipt

M NW

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *GA* Agent Addressee
- B. Received by (Printed Name) *Glora Acosta* C. Date of Delivery *7-20-23*
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

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

Delivery

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

BEXP II Omega, LLC
5914 West Courtyard Drive, STE 340
Austin, TX 78730
Attn: Anthony Cross

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

PS Form 3806, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

2022 1670 0002 1182 5346

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

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

Postage \$

Total Postage and Fees \$

Postmark Here

BEXP II Omega, LLC
5914 West Courtyard Drive, STE 340
Austin, TX 78730
Attn: Anthony Cross

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

PS Form 3806, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *GA* Agent Addressee
- B. Received by (Printed Name) *Glora Acosta* C. Date of Delivery *7-20-23*
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

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

Restricted Delivery

Domestic Return Receipt

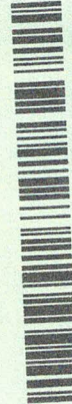
M NW

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:

BEXP II Alpha, LLC
5914 West Courtyard Drive, STE 340
Austin, TX 78730
Attn: Anthony Cross



9590 9402 7635 2122 6589 75

2. Article # 7022 1670 0002 1182 5349

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

2022 1670 0002 1182 5346

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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 Devon Energy Production Company LP
333 W. Sheridan Ave.
Oklahoma City, Oklahoma 73102
Attn: Permian Land Manager

Street and Apt. No., or P.O. Box No. _____
City, State, ZIP+4® _____

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

7022 1670 0002 1187 8659

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

■ Complete items 1, 2, and 3.
■ Print your name and address on the reverse so that we can return the card to you.
■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cross Timbers Energy, LLC
400 West 7th Street
Fort Worth, TX 76102
Attn: Caylee Hicks

3. Service Type

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Certified Mail®
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

2. Article Addressed to: 7022 1670 0002 1187 8659 (over \$500)

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

7022 1670 0002 1187 8659

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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 Cross Timbers Energy, LLC
400 West 7th Street
Fort Worth, TX 76102
Attn: Caylee Hicks

Street and Apt. No., or P.O. Box No. _____
City, State, ZIP+4® _____

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Candis Clifton Agent

Addressee

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

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

3. Service Type

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Certified Mail®
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

1. Article Addressed to: 7022 1670 0002 1187 8659 (over \$500)

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

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

■ Complete items 1, 2, and 3.
■ Print your name and address on the reverse so that we can return the card to you.
■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Devon Energy Production Company
333 W. Sheridan Ave.
Oklahoma City, Oklahoma 73102
Attn: Permian Land Manager

3. Service Type

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Certified Mail®
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

2. Article Addressed to: 7022 1670 0002 1187 8659 (over \$500)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature _____ Agent

Addressee

B. Received by (Printed Name) _____ C. Date of Delivery 20

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

3. Service Type

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Certified Mail®
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

2. Article Addressed to: 7022 1670 0002 1187 8659 (over \$500)

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

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Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To SWABW, LLC
812 Foster Hill
Nashville, TN 37215
Attn: Permian Land Manager

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

City, State, ZIP+4® _____

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

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Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To SWABW, LLC
812 Foster Hill
Nashville, TN 37215
Attn: Permian Land Manager

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

City, State, ZIP+4® _____

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

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

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

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

1. Article Addressed to:

A. Signature James L. Harden III Agent Addressee

B. Received by (Printed Name) JAMES L HARDEN III C. Date of Delivery 7/20/23

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

3. Service Type

Priority Mail Express®

Registered Mail™

Adult Signature Restricted Delivery

Certified Mail®

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery

2. Article Number 7022 1670 0002 1187 8635

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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 James L. Harden III
13521 W Wesley Ave
Lakewood, CO 80228-4744

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

City, State, ZIP+4® _____

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

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

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

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

1. Article Addressed to:

A. Signature James L. Harden III Agent Addressee

B. Received by (Printed Name) JAMES L HARDEN III C. Date of Delivery 7/24/23

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

3. Service Type

Priority Mail Express®

Registered Mail™

Adult Signature Restricted Delivery

Certified Mail®

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery

2. Article Number 7022 1670 0002 1187 8628

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

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OFFICIAL USE

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

Total Postage and Fee \$
 Sent To Jack Huff Energy Ltd.
 P.O. Box 50190
 Midland, TX 79710
 Attn: Permian Land Manager
 Street and Apt. No., or
 City, State, ZIP+4®

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

8698 2897 2000 0297 2202

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:

O.H.B. INC
 P.O. Box 1432
 San Angelo, TX 76902-1432
 Attn: Permian Land Manager

2. Article 7022 1670 0002 1187 8604
 Insured Mail Restricted Delivery (over \$500)

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

A. Signature Agent
 Addressee
 B. Received by (Printed Name) Sender: J. Huff
 C. Date of Delivery 7/23
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

Domestic Return Receipt

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

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OFFICIAL USE

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

Total Postage and Fee \$
 Sent To O.H.B. INC
 P.O. Box 1432
 San Angelo, TX 76902-1432
 Attn: Permian Land Manager
 Street and Apt. No., or
 City, State, ZIP+4®

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

8698 2897 2000 0297 2202

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:

Jack Huff Energy Ltd.
 P.O. Box 50190
 Midland, TX 79710
 Attn: Permian Land Manager

2. Article 7022 1670 0002 1187 8598
 Insured Mail Restricted Delivery (over \$500)

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

A. Signature Agent
 Addressee
 B. Received by (Printed Name) J. Huff
 C. Date of Delivery 7/23
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

COMPLETE THIS SECTION ON DELIVERY

Domestic Return Receipt

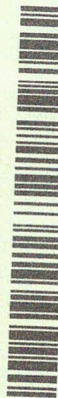
PS Form 3811, July 2020 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

MRC Delaware Resources, LLC
 One Lincoln Centre
 5400 LBJ Freeway, STE 1500
 Dallas, TX 75240
 Attn: Nick Weeks



9590 9402 7635 2122 6590 64

2. Article No. 7022 1670 0002 1187 8581

Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

M NW

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name) JUL 2 2023 C. Date of Delivery
- D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

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

4258 2877 2000 0297 2202

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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 Lewis Burleson Properties, LP
 P.O. Box 2479
 Midland, TX 79702
 Attn: Permian Land Manager

Street and Apt. No., or PO

City, State, ZIP+4®

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

See Reverse for Instructions

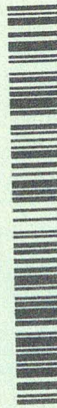
Postmark Here

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Lewis Burleson Properties, LP
 P.O. Box 2479
 Midland, TX 79702
 Attn: Permian Land Manager



9590 9402 7635 2122 6590 71

2. Article No. 7022 1670 0002 1187 8574

Restricted Delivery (over \$500)

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

Domestic Return Receipt

M NW

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name) JAN 2 2023 C. Date of Delivery
- D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

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

1285 2877 2000 0297 2202

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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 \$

Postmark Here

Postage

Total Postage and Fees

MRC Delaware Resources, LLC
 One Lincoln Centre
 5400 LBJ Freeway, STE 1500
 Dallas, TX 75240
 Attn: Nick Weeks

Sent To

Street and Apt. No., or PO Box

City, State, ZIP+4®

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

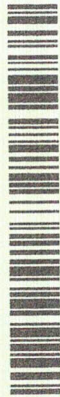
See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

Article Addressed to:

Yates Energy Corporation
 P.O. Box 2323
 Roswell, NM 88202
 Attn: Permian Land Manager



9590 9402 7635 2122 6590 88

2. Article Addressed to: 7022 1670 0002 1187

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Certified Mail Restricted Delivery with Return Receipt

3. Service Type
 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™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Postmark Here

Total Postage and Fees

Sent To
 Yates Energy Corporation
 P.O. Box 2323
 Roswell, NM 88202
 Attn: Permian Land Manager

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

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
 Agent
 Addressee
- B. Received by (Printed Name)
 Kate Ediger
- C. Date of Delivery
 7/20/23
- D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

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

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Certified Mail Restricted Delivery with Return Receipt

3. Service Type
 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

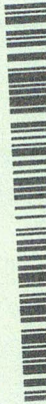
Domestic Return Receipt

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:

Yates-US Inc.
 P.O. Box 2323
 Roswell, NM 88202
 Attn: Permian Land Manager



9590 9402 7635 2122 6590 95

2. Article Addressed to: 7022 1670 0002 1187

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Certified Mail Restricted Delivery with Return Receipt

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

OFFICIAL USE

Certified Mail Fee

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Postmark Here

Total Postage and Fees

Sent To
 Yates-US Inc.
 P.O. Box 2323
 Roswell, NM 88202
 Attn: Permian Land Manager

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

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
 Agent
 Addressee
- B. Received by (Printed Name)
 Kate Ediger
- C. Date of Delivery
 7/20/23
- 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
 Certified Mail Restricted Delivery with Return Receipt

3. Service Type
 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

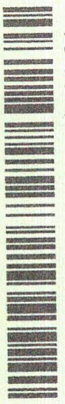
Domestic Return Receipt

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:

Burleson Petroleum, Inc.
 P.O. Box 2479
 Midland, TX 79702
 Attn: Permian Land Manager



9590 9402 7635 2122 6591 01

2. Article Number (Transfer from service label)

7022 1670 0002 1187 8543

PS Form 3811, July 2020 PSN 7530-02-000-9065

Domestic Return Receipt

M NW

restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name) Tammy Sullivan 7-26-23 C. Date of Delivery
- D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

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

(over 500)

restricted Delivery

Domestic Return Receipt

2159 8 1287 2000 0297 2202

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 Here

Total Postage and Fees

Sent To Carolyn L. Shogrin, individually and Personal Representative

Shogrin, deceased

4614 590th Rd

Hay Springs, NE 69347

Street and Apt. No.

City, State, ZIP+4®

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

See Reverse for Instructions

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

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

OFFICIAL USE

Certified Mail Fee \$

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

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

Postage Here

Total Postage and Fees

Sent To Burleson Petroleum, Inc.

P.O. Box 2479

Midland, TX 79702

Attn: Permian Land Manager

Street and Apt. No.

City, State, ZIP+4®

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

See Reverse for Instructions

7022 1670 0002 1187 8543

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:

Carolyn L. Shogrin, individually and Personal Representative

Shogrin, deceased

4614 590th Rd

Hay Springs, NE 69347



9590 9402 7635 2122 6579 54

2. Article Number (Transfer from service label)

7022 1670 0002 1187 8512

PS Form 3811, July 2020 PSN 7530-02-000-9065

Domestic Return Receipt

M NW

restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- Carolyn L. Shogrin B. Received by (Printed Name) C. Date of Delivery
- Shogrin, deceased
- 4614 590th Rd
- Hay Springs, NE 69347
- D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

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

(over \$500)

restricted Delivery

Domestic Return Receipt

S0900.187

US POSTAGE
FIRST CLASS
062S1329232
87501
000137538



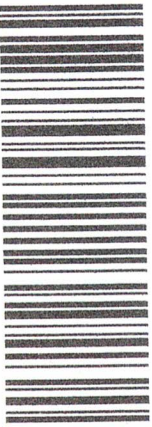
Schweppes

CFA

HORSESHOE OPERATING, INC.
110 W. Louisiana Ave.
Midland, TX 79701
Attn: Erin Slape

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

CERTIFIED MAIL®



7022 1670 0002 1187 8611

6 9 5 0 4 2 5 0 5 6

James Bruce
PO Box 1056
Santa Fe, NM 87504-1056

U.S. Postal Service™
CERTIFIED MAIL® 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 Apt. No., or

City, State, ZIP+4®

HORSESHOE OPERATING, INC.
110 W. Louisiana Ave.
Midland, TX 79701
Attn: Erin Slape

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

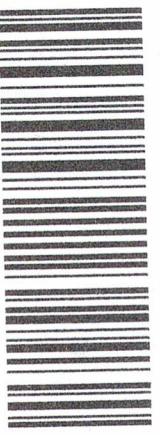
See Reverse for Instructions

7022 1670 0290 2202



Chel-Trand Holdings, LLC
 110 W. Louisiana Ave., STE 200
 Midland, TX 79701-3414
 Attn: Permian Land Manager

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



7022 1670 0002 1187 8536

CM



U.S. Postal Service™
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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	\$	

Postmark
Here

Sent To	Chel-Trand Holdings, LLC
Street and Apt. No., or	110 W. Louisiana Ave., STE 200
City, State, ZIP+4®	Midland, TX 79701-3414
	Attn: Permian Land Manager

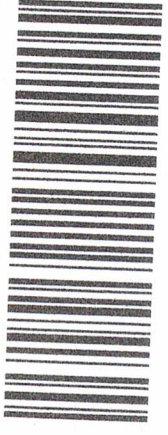
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

James Bruce
 PO Box 1056
 Santa Fe, NM 87504-1056



Rhodes Interests, Ltd.
 110 W. Louisiana Ave., STE 200
 Midland, TX 79701-3414
 Attn: Permian Land Manager

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



7022 1670 0002 1187 8529

James Bruce
 PO Box 1056
 Santa Fe, NM 87504-1056

U74D
 8797013414

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)		
<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		Rhodes Interests, Ltd. 110 W. Louisiana Ave., STE 200 Midland, TX 79701-3414
Street and Apt. No., or PO#		Attn: Permian Land Manager
City, State, ZIP+4®		

Postmark Here

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

62529 2878 0002 1187 8529

JS

James Bruce
PO Box 1056
Santa Fe, NM 87504-1056

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



7022 1670 0002 1187 8499



MEC Development, Ltd.
P.O. Box 4000
The Woodlands, TX 77380-4000
Attn: Permian Land Manager

8/10/23

87504>1056
UTF B

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 MEC Development, Ltd.
P.O. Box 4000
The Woodlands, TX 77380-4000

Street and Apt. No., or Attn: Permian Land Manager

City, State, ZIP+4®

Postmark Here

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

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

ATTACHMENT

B

July 13, 2023

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

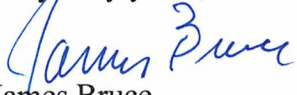
To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed are copies of an application for compulsory pooling and a non-standard spacing and proration unit, filed by Mewbourne Oil Company with the Oil Conservation Division (Case No. 23693), seeking to pool the Bone Spring formation underlying a horizontal spacing unit comprised of Lots 1-4 and the S/2N/2 (the N/2) of Section 2 and Lots 1-4 and the S/2N/2 (the N/2) of Section 1, Township 18 South, Range 32 East, N.M.P.M., Lea County, New Mexico. Applicant proposes to drill the following wells to a depth sufficient to test the Bone Spring formation: (a) the Night Watch 2/1 B2DA Fed. Com. Well No. 1H, with a first take point in Lot 4 of Section 2 and a last take point in Lot 1 of Section 1; and (b) the Night Watch 2/1 B2EH Fed. Com. Well No. 1H, a horizontal well with a first take point in the SW/4NW/4 of Section 2 and a last take point in the SE/4NE/4 of Section 1. YOU ARE BEING NOTIFIED ONLY AS TO THE NON-STANDARD UNIT PORTION OF THE APPLICATION.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, August 3, 2023. During the current circumstances, state buildings are closed to the public and the hearing will be conducted remotely. To view the hearing docket and to determine how to participate in an electronic hearing, go to <https://www.emnrd.nm.gov/ocd/hearing-info/>, or contact Marlene Salvidrez at Marlene.Salvidrez@emnrd.nm.gov. You are not required to attend this hearing, but as an owner of an interest who may be affected by the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date. A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than five business days before the hearing date. This statement may be filed online with the Division at ocd.hearings@emnrd.nm.gov, and should include: The name of the party and his or her attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate time the party will need to present his or her case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,

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

James Bruce

Attorney for Mewbourne Oil Company

**List of Affected Entities for Night Watch 2/1 NSP
covering the N2 of Section 2 and the N2 of Sec. 1, Lea County, NM:**

1. Bureau of Land Management
New Mexico State Office
301 Dinosaur Trail
Santa Fe, New Mexico 87508
2. New Mexico State Land Office
310 Old Santa Fe Trail
P.O. Box 1148
Santa Fe, NM 87501-1148
3. Timothy 6, LLC
P.O. Box 30598
Edmond, OK 73003
4. Anderson Oil, Ltd.
5005 Woodway, STE 300
Houston, TX 77056
5. BEXP II Alpha, LLC
5914 West Courtyard Drive, STE 340
Austin, TX 78730
6. BEXP II Omega, LLC
5914 West Courtyard Drive, STE 340
Austin, TX 78730
7. Burlison Petroleum, Inc.
P.O. Box 2479
Midland, TX 79702
8. Carolyn L. Shogrin, individually and as
Personal Representative of the Estate of
Frank L. Shogrin, deceased
4614 590th Rd.
Hay Springs, NE 69347
9. Chel-Trand Holdings, LLC
110 W. Louisiana Ave., STE 200
Midland, TX 79701-3414
10. Cross Timbers Energy, LLC
400 West 7th Street
Fort Worth, TX 76102
11. Devon Energy Production Company LP
333 W. Sheridan Ave.
Oklahoma City, Oklahoma 73102

12. HORSESHOE OPERATING, INC.
110 W. Louisiana Ave.
Midland, TX 79701
13. Jack Huff Energy Ltd.
P.O. Box 50190
Midland, TX 79710
14. Jalapeno Corporation
P.O. Box 1608
Albuquerque, NM 87103
15. James L. Harden III
13521 W Wesley Ave
Lakewood, CO 80228-4744
16. Kellie Halabrin
56 Sabinas Ridge Road
Boerne, TX 78006
17. KMK Energy, LLC
4506 N. Walbaum Road
Geary, OK 73040
18. Kris H. Youell
56 Sabinas Ridge Road
Boerne, TX 78006
19. Lewis Burleson Properties, LP
P.O. Box 2479
Midland, TX 79702
20. Lonsdale Resources, LLC
2626 Cole Avenue, STE 300
Dallas, TX 75204
21. Maduro Oil & Gas, LLC
3102 Maple Ave.
Dallas, TX 75201
22. MRC DELAWARE RESOURCES LLC
One Lincoln Centre
5400 LBJ Freeway, SUITE 1500
Dallas, TX 75240
23. Nadel and Gussman Capitan, LLC
15 East Fifth Street, STE 3200
Tulsa, Oklahoma 74103
24. OXY USA Inc.
5 Greenway Plaza, STE 110
Houston, TX 77046

25. Rhodes Interests Ltd.
110 W. Louisiana Ave., STE 200
Midland, TX 79701
26. O.H.B. INC
P.O. Box 1432
San Angelo, TX 76902-1432
27. Roger B. Hardee
2914 Bur Oak Ct.
Richmond, TX 77469
28. Roy G. Barton Sr. & Opal Barton
Revocable Trust dated 2/28/1982
1919 N. Turner St.
Hobbs, NM 88240
29. Sharbro Energy, LLC
P.O. Box 840
Artesia, NM 88211
30. Shogoil & Gas Co., LLC
4614 590th Rd.
Hay Springs, NE 69347
31. SWAWBW, LLC
812 Foster Hill
Nashville, TN 37215
32. Veer Capital Partners LLC
7670 Woodway Dr. STE 357
Houston, TX 77063
33. W.T. WYNN
1603 W. Dengar
Midland, TX 79705
34. Word B. Wilson Investments LLC
P.O. Box 51790
Midland, TX 79710
35. Yates Energy Corporation
400 N. Pennsylvania Ave.
Roswell, NM 88201
36. Yates-US Inc.
P.O. Box 2323
Roswell, New Mexico 88202-2323

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

O.H.B. INC
P.O. Box 1432
San Angelo, TX 76902-1432

7022 1670 0002 1183 4792

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) Sandra J Foster C. Date of Delivery 7-25

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

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

Postmark Here

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

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

OFFICIAL USE

Certified Mail Fee \$

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

Postage \$

Total Postage and Fees \$

Sent To O.H.B. INC
P.O. Box 1432
San Angelo, TX 76902-1432

City, State, ZIP+4®

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

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 SWABW, LLC
812 Foster Hill
Nashville, TN 37215

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:

SWABW, LLC
812 Foster Hill
Nashville, TN 37215

9590 9402 7635 2122 6579 92

7022 1670 0002 1183 4846

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) ASAP C. Date of Delivery 7/24/23

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

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

Postmark Here

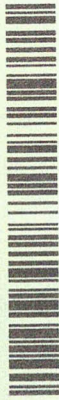
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Yates-US Inc.
 P.O. Box 2323
 Roswell, New Mexico 88202-2323



9590 9402 7635 2122 6832 81

2. Article 7022 1670 0002 1182 5363

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

Domestic Return Receipt

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Handwritten Signature]* Agent Addressee
- B. Received by (Printed Name) *[Handwritten Name]* Date of Delivery
- C. Yes No
- D. Is delivery address different from item 1? Yes No



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

See Reverse for Instructions

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fee \$ _____

Sent To Yates Energy Corporation

400 N. Pennsylvania Ave.

Roswell, NM 88201

City, State, ZIP+4® _____

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

7022 1670 0002 1182 5370

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 Yates-US Inc.

P.O. Box 2323

Street and Apt. No., Roswell, New Mexico 88202-2323

City, State, ZIP+4® _____

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

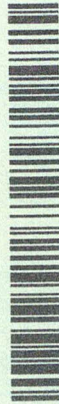
7022 1670 0002 1182 5363

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:

Yates Energy Corporation
 400 N. Pennsylvania Ave.
 Roswell, NM 88201



9590 9402 7635 2122 6832 81

2. Article 7022 1670 0002 1182 5370

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Handwritten Signature]* Agent Addressee
- B. Received by (Printed Name) *[Handwritten Name]* Date of Delivery
- C. Yes No
- D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

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

7022 1670 0002 1182 5370

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Word B. Wilson Investments LLC
P.O. Box 51790
Midland, TX 79710

9590 9402 7635 2122 6832 74

2. Arti 7022 1670 0002 1182 5387 (over \$500) Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Chloe Pichosta

B. Received by (Printed Name) C. Date of Delivery
Chloe Pichosta 7/24/23

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

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Restricted Delivery

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Postage \$ _____

Postmark Here _____

Total Postage and Fee \$ _____

Timothy 6, LLC
P.O. Box 30598
Edmond, OK 73003

Sent To _____
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

4245 2877 2000 0297 2202

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Postage \$ _____

Postmark Here _____

Total Postage and Fees \$ _____

Word B. Wilson Investments LLC
P.O. Box 51790
Midland, TX 79710

Sent To _____
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

4245 2877 2000 0297 2202

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:

Timothy 6, LLC
P.O. Box 30598
Edmond, OK 73003

9590 9402 7635 2122 8863 47

2. Arti 7022 1670 0002 1182 5424 (over \$500) Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Tim Dabbs

B. Received by (Printed Name) C. Date of Delivery
Tim Dabbs 7/24/23

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

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Restricted Delivery

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Postage \$ _____

Postmark Here _____

Total Postage and Fee \$ _____

Timothy 6, LLC
P.O. Box 30598
Edmond, OK 73003

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

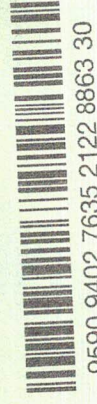
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Anderson Oil, Ltd.
5005 Woodway, STE 300
Houston, TX 77056



2. Article Number **7022 1670 0002 1182 5431**
 Insured Mail Restricted Delivery (over \$500) **NW**

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X Mary E Wilt** Agent Addresssee
 B. Received by (Printed Name) **7-21-23** C. Date of Delivery

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

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

5445 2817 2000 0297 1670 2202

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 F
 Sent To **BEXP II Alpha, LLC**
5914 West Courtyard Drive, STE 340
Austin, TX 78730
 Street and Apt. No., or P.O. Box No.
 City, State, ZIP+4®

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

5445 2817 2000 0297 1670 2202

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 F
 Sent To **Anderson Oil, Ltd.**
5005 Woodway, STE 300
Houston, TX 77056
 Street and Apt. No., or P.O. Box No.
 City, State, ZIP+4®

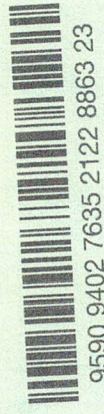
PS Form 3800, April 2015 PSN 7530-02-000-8047 See Reverse for Instructions

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:

BEXP II Alpha, LLC
5914 West Courtyard Drive, STE 340
Austin, TX 78730



2. Ar **7022 1670 0002 1182 5448** (over 5000) **NW USPS**

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X [Signature]** Agent Addresssee
 B. Received by (Printed Name) **Gloria Acosta** C. Date of Delivery **7-21-23**
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

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

tricted Delivery

COMPLETE THIS SECTION ON DELIVERY

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To **Burleson Petroleum, Inc.**
P.O. Box 2479
Midland, TX 79702

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

City, State, ZIP+4® _____

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

2445 2217 2000 0272 2202

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

■ Complete items 1, 2, and 3.
■ Print your name and address on the reverse so that we can return the card to you.
■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BEXP II Omega, LLC
5914 West Courtyard Drive, STE 340
Austin, TX 78730

9590 9402 7635 2122 8863 16

2. A 7022 1670 0002 1182 5455 (over \$500)

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) *Gloria Aosta* C. Date of Delivery *7-21-23*

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

3. Service Type

Priority Mail Express®

Registered Mail™

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To **BEXP II Omega, LLC**
5914 West Courtyard Drive, STE 340
Austin, TX 78730

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

City, State, ZIP+4® _____

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

5555 2217 2000 0272 2202

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Burleson Petroleum, Inc.
P.O. Box 2479
Midland, TX 79702

9590 9402 7635 2122 8863 09

2. Article Addressed to:

7022 1670 0002 1182 5462 (over \$500)

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) *[Signature]* C. Date of Delivery *7-25-23*

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

3. Service Type

Priority Mail Express®

Registered Mail™

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Postmark Here _____

Total Postage and Fees \$ _____

Sent To _____

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

2000 0297 2202

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:

Carolyn L. Shogrin, individually and as Personal Representative of the Estate of Frank L. Shogrin, deceased
4614 590th Rd.
Hay Springs, NE 69347

2. Article # 7022 1670 0002 1182 5417

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Carolyn L. Shogrin*

B. Received by (Printed Name) *Carolyn L. Shogrin*

C. Date of Delivery _____

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

3. Service Type

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Certified Mail®

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery

Domestic Return Receipt *NW USP*

2000 0297 2202

**Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Postmark Here _____

Total Postage and Fees \$ _____

Sent To _____

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:

New Mexico State Land Office
310 Old Santa Fe Trail
P.O. Box 1148
Santa Fe, NM 87501-1148

2. Article # 7022 1670 0002 1182 5417

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]*

B. Received by (Printed Name) _____

C. Date of Delivery _____

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

3. Service Type

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Certified Mail®

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery

Domestic Return Receipt *NW USP*

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

James L. Harden III
13521 W Wesley Ave
Lakewood, CO 80228-4744

Street and Apt. No., #

City, State, ZIP+4®

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

Postmark
Here

2455 2827 2000 0297 2202

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name) Regina Dura 7-20-23 C. Date of Delivery
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

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

Insured Mail Restricted Delivery (over \$500) 1182 5400

2. Article Addressed to: 7022 1670 0002 1182 5400

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

Domestic Return Receipt

- 1. Article Addressed to:
 - Complete items 1, 2, and 3.
 - Print your name and address on the reverse so that we can return the card to you.
 - Attach this card to the back of the mailpiece, or on the front if space permits.

Bureau of Land Management
New Mexico State Office
301 Dinosaur Trail
Santa Fe, New Mexico 87508



9590 9402 7635 2122 8863 61

Postmark
Here

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

Bureau of Land Management
New Mexico State Office
301 Dinosaur Trail
Santa Fe, New Mexico 87508

Street and Apt. No., or PO

City, State, ZIP+4®

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

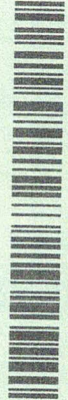
0405 2827 2000 0297 2202

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:

James L. Harden III
13521 W Wesley Ave
Lakewood, CO 80228-4744



9590 9402 7635 2122 8862 24

2. Article Addressed to: 7022 1670 0002 1182 5400

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name) James L. Harden III C. Date of Delivery 7/21/23
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

- 3. Service Type
 - Priority Mail Express®
 - Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Signature Confirmation™
 - Restricted Delivery
- Restricted Delivery
- Signature Confirmation™
- Restricted Delivery
- Signature Confirmation™
- Restricted Delivery

Insured Mail Restricted Delivery (over \$500) 1182 5400

Domestic Return Receipt

NW WSP

**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. _____

City, State, ZIP+4® _____

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

7022 1670 0002 1182 5561

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:

KMK Energy, LLC
4506 N. Walbaum Road
Geary, OK 73040

2. Article 7022 1670 0002 1182 5561 (over \$500) _____

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

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

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

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Apt. No., _____

City, State, ZIP+4® _____

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

7022 1670 0002 1182 5561

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

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

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

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

2. Article 7022 1670 0002 1182 5530 (over \$500) _____

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

JUL 21 2023
POST OFFICE
STATION

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

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 Here \$

Total Postage and Fees \$

Sent To Devon Energy Production Company LP
 333 W. Sheridan Ave.
 Street and Apt. No. Oklahoma City, Oklahoma 73102
 City, State, ZIP+4®

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

6055 2877 2000 0297 2202

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

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

Insured Mail Restricted Delivery (over \$500)

Jack Huff Energy Ltd.
 P.O. Box 50190
 Midland, TX 79710

9590 9402 7635 2122 8862 48

2. Article 7022 1670 0002 1182 5523

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

NW WSP Domestic Return Receipt

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

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 Here \$

Total Postage and Fees \$

Sent To Jack Huff Energy Ltd.
 P.O. Box 50190
 Street and Apt. No. Midland, TX 79710
 City, State, ZIP+4®

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

6255 2877 2000 0297 2202

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:
 Devon Energy Production Company LP
 333 W. Sheridan Ave.
 Oklahoma City, Oklahoma 73102

2. Article 7022 1670 0002 1182 5509 (over \$500)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

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

Insured Mail Restricted Delivery (over \$500)

NW WSP Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To Nadel and Gussman Capitan, LLC
15 East Fifth Street, STE 3200
Tulsa, Oklahoma 74103

City, State, ZIP+4® _____

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

7924 4761 2000 0297 2202

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

■ Complete items 1, 2, and 3.

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

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

Cross Timbers Energy, LLC
400 West 7th Street
Fort Worth, TX 76102

7022 1670 0002 1182 5493 (over \$500)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Candice Clark Agent Addressee

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

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

3. Service Type

Priority Mail Express®

Adult Signature

Registered Mail™

Registered Mail Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery

Restricted Delivery

Domestic Return Receipt NW NRP

**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 Nadel and Gussman Capitan, LLC
15 East Fifth Street, STE 3200
Tulsa, Oklahoma 74103

City, State, ZIP+4® _____

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

6645 2877 2000 0297 2202

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

■ Complete items 1, 2, and 3.

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

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

Nadel and Gussman Capitan, LLC
15 East Fifth Street, STE 3200
Tulsa, Oklahoma 74103

7022 1670 0002 1183 4761 (over \$500)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature J. Jervis Agent Addressee

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

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

3. Service Type

Priority Mail Express®

Adult Signature

Registered Mail™

Registered Mail Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery

Restricted Delivery

Domestic Return Receipt NW NRP

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:

OXY USA Inc.
 5 Greenway Plaza, STE 110
 Houston, TX 77046

9590 9402 7635 2122 8861 32

2. Article Number: 7022 1670 0002 1183 4778

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail Restricted Delivery (over \$500)

4. Delivery Options
 Priority Mail Express®
 Registered Mail™
 Adult Signature Restricted Delivery
 Certified Mail®
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

5. Agent/Address/Date
 Agent
 Addressee
 C. Date of Delivery: 7/21/23

6. Delivery Confirmation
 D. Is delivery address different from item 1? Yes No

7. Postmark Here

8. Domestic Return Receipt

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

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

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

OFFICIAL USE

Certified Mail Fee \$

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

Postmark Here

Total Postage \$

Sent To \$

MRC DELAWARE RESOURCES LLC
 One Lincoln Centre
 5400 LBJ Freeway, SUITE 1500
 Dallas, TX 75240

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

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

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

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

OFFICIAL USE

Certified Mail Fee \$

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

Postmark Here

Total Postage and Fees \$

Sent To \$

OXY USA Inc.
 5 Greenway Plaza, STE 110
 Houston, TX 77046

Street and Apt. 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:

MRC DELAWARE RESOURCES LLC
 One Lincoln Centre
 5400 LBJ Freeway, SUITE 1500
 Dallas, TX 75240

9590 9402 7635 2122 8861 56

2. Article Number: 7022 1670 0002 1182 5615

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Insured Mail Restricted Delivery (over \$500)

4. Delivery Options
 Priority Mail Express®
 Registered Mail™
 Adult Signature Restricted Delivery
 Certified Mail®
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

5. Agent/Address/Date
 Agent
 Addressee
 C. Date of Delivery: JUL 21 2023

6. Delivery Confirmation
 D. Is delivery address different from item 1? Yes No

7. Postmark Here

8. Domestic Return Receipt

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

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

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

OFFICIAL USE

Certified Mail Fee

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

Postmark
Here

Total Postage and Fee \$
Lonsdale Resources, LLC
2626 Cole Avenue, STE 300
Dallas, TX 75204

Sent To

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

2655 2817 2000 0297 2202
1670 0002 1182 5592

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

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

Article Addressed to: NW NSP

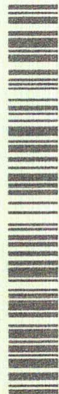
Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Maduro Oil & Gas, LLC
3102 Maple Ave.
Dallas, TX 75201



9590 9402 7635 2122 8861 63

2. Article 7022 1670 0002 1182 5608

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

NW NSP

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

OFFICIAL USE

Certified Mail Fee

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

Postmark
Here

Total Postage and Fees

Maduro Oil & Gas, LLC
3102 Maple Ave.
Dallas, TX 75201

Sent To

Street and Apt. No., or

City, State, ZIP+4®

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

See Reverse for Instructions

8095 2817 2000 0297 2202
1670 0002 1182 5592

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:

Lonsdale Resources, LLC
2626 Cole Avenue, STE 300
Dallas, TX 75204



9590 9402 7635 2122 8861 70

2. Article Number 7022 1670 0002 1182 5592

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

NW NSP

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

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

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage \$ _____

Roy G. Barton Sr. & Opal Barton
Revocable Trust dated 2/28/1982
1919 N. Turner St.
Hobbs, NM 88240

Street and Apt. No., P.O. No., or Rural Route No. _____

City, State, ZIP+4® _____

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

Postmark Here _____

2022 1670 0002 1182 5585

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:

Lewis Burleson Properties, LP
P.O. Box 2479
Midland, TX 79702

9590 9402 7635 2122 8861 87

7022 1670 0002 1182 5585 (over 5000)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

Received by (Printed Name) C. Date of Delivery 7-25-23

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

3. Service Type

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Certified Mail®

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Restricted Delivery

Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Lewis Burleson Properties, LP
P.O. Box 2479
Midland, TX 79702

Street and Apt. No., P.O. No., or Rural Route No. _____

City, State, ZIP+4® _____

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

Postmark Here _____

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Roy G. Barton Sr. & Opal Barton
Revocable Trust dated 2/28/1982
1919 N. Turner St.
Hobbs, NM 88240

9590 9402 7635 2122 6580 29

7022 1670 0002 1183 4815

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

Received by (Printed Name) C. Date of Delivery 7-21-23

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

3. Service Type

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Certified Mail®

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Restricted Delivery

Domestic Return Receipt

2022 1670 0002 1182 5585

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:
 Veer Capital Partners LLC
 7670 Woodway Dr. STE 357
 Houston, TX 77063

2. Article Number (Transfer from mailpiece)
 7022 1670 0002 1183 4853 (over \$500)

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

Priority Mail Express®
 Registered Mail™
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Signature Confirmation Restricted Delivery

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

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

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OFFICIAL USE

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

Postmark Here

Sent To Veer Capital Partners LLC
 7670 Woodway Dr. STE 357
 Houston, TX 77063

Street and Apt. 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:
 Shogoiil & Gas Co., LLC
 4614 590th Rd.
 Hay Springs, NE 69347

2. Article Number (Transfer from mailpiece)
 7022 1670 0002 1183 4853

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

Priority Mail Express®
 Registered Mail™
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Signature Confirmation Restricted Delivery

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

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

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

OFFICIAL USE

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

Postmark Here

Sent To Shogoiil & Gas Co., LLC
 4614 590th Rd.
 Hay Springs, NE 69347

Street and Apt. No., or
 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:
 Sharbro Energy, LLC
 P.O. Box 840
 Artesia, NM 88211

2. Article 7022 1670 0002 1183 4822 (over \$500)
 NW USA Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

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 Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery

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

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

OFFICIAL USE

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

Postmark Here

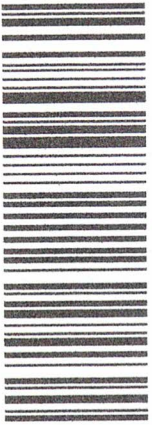
Sent To Sharbro Energy, LLC
 P.O. Box 840
 Street and Apt. N Artesia, NM 88211
 City, State, ZIP+4®

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

2224 6877 2000 0297 2202

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

CERTIFIED MAIL®



7022 1670 0002 1182 5486

James Bruce
PO Box 1056
Santa Fe, NM 87504-1056

OK

Stamps
\$90900.168

US POSTAGE
FIRST-CLASS
06251329292
87501
000137966



Chel-Trand Holdings, LLC
110 W. Louisiana Ave., STE 200
Midland, TX 79701-3414

EWP

6950123414
7970133414 0015



U.S. Postal Service™
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Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To Chel-Trand Holdings, LLC
110 W. Louisiana Ave., STE 200
Midland, TX 79701-3414

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

City, State, ZIP+4® _____

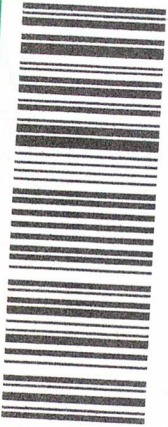
Postmark Here

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

9845 2877 2000 0297 2202

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

CERTIFIED MAIL



7022 1670 0002 1182 5516

James Bruce
PO Box 1056
Santa Fe, NM 87504-1056

B



HORSESHOE OPERATING, INC
110 W. Louisiana Ave.
Midland, TX 79701

Handwritten initials

6WP
7970133414 0015



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

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

OFFICIAL USE

Certified Mail Fee

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

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

Postage

Postmark
Here

Total Postage and Fee

HORSESHOE OPERATING, INC.
110 W. Louisiana Ave.
Midland, TX 79701

Sent To

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

City, State, ZIP+4®

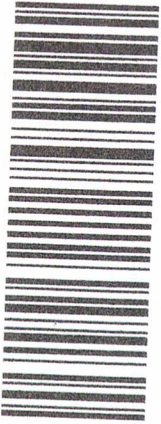
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7022 1670 0002 1182 5516



James Bruce
PO Box 1056
Santa Fe, NM 87504-1056

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



7022 1670 0002 1183 4785

OK

EWD
89504>1618
7970183414 0015



Rhodes Interests Ltd.
110 W. Louisiana Ave., STE 200
Midland, TX 79701

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

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

OFFICIAL USE

Certified Mail Fee		
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/>	Return Receipt (hardcopy)	\$
<input type="checkbox"/>	Return Receipt (electronic)	\$
<input type="checkbox"/>	Certified Mail Restricted Delivery	\$
<input type="checkbox"/>	Adult Signature Required	\$
<input type="checkbox"/>	Adult Signature Restricted Delivery	\$
Postage		\$
Total Postage and Fees		\$
Sent To		Rhodes Interests Ltd. 110 W. Louisiana Ave., STE 200 Midland, TX 79701
Street and Apt. No., or PO Box No.		
City, State, Zip+4®		
Postmark Here		

7022 1670 0002 1183 4785

7022 1670 0002 1183 4808

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 **Roger B. Hardee**
2914 Bur Oak Ct.
Richmond, TX 77469

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

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

7022 1670 0002 1182 5554

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 **Kellie Halabrin**
56 Sabinas Ridge Road
Boerne, TX 78006

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

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

7022 1670 0002 1182 5394

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 **W.T. WYNN**
1603 W. Dengar
Midland, TX 79705

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

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

7022 1670 0002 1182 5578

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 **Kris H. Youell**
56 Sabinas Ridge Road
Boerne, TX 78006

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

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

CASE NO. 23693

STATUS OF CERTIFIED NOTICE

<u>INTEREST OWNER</u>	<u>MAILING DATE</u>	<u>RECEIPT DATE</u>	<u>CARD RETURNED</u>
<u>COMPULSORY POOLING</u>			
BEXP II Alpha, LLC	7/13/23	7/20/23	Yes
BEXP II Omega, LLC	7/13/23	7/20/23	Yes
Cross Timbers Energy, LLC	7/13/23	Unknown	Yes
Devon Energy Production Company L.P.	7/13/23	7/20/23	Yes
James L. Harden III	7/13/23	7/20/23	Yes
SWAWBW, LLC	7/13/23	7/24/23	Yes
Horseshoe Operating, Inc.	7/13/23	Undelivered	No
O.H.B. Inc.	7/13/23	7/25/23	Yes
Jack Huff Energy Ltd.	7/13/23	7/21/23	Yes
MRC Delaware Resources, LLC	7/13/23	7/21/23	Yes
Lewis Burlison Properties, LP	7/13/23	7/26/23	Yes
Yates Energy Corporation	7/13/23	7/20/23	Yes
Yates-US Inc.	7/13/23	7/20/23	Yes
Burlison Petroleum, Inc.	7/13/23	7/26/23	Yes
Chel-Trand Holdings, LLC	7/13/23	Undelivered	No
Rhodes Interests Ltd.	7/13/23	Undelivered	No

EXHIBIT

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Carolyn L. Shogrin, Individually and as Personal Representative of the Estate of Frank L. Shogrin	7/13/23	Unknown	Yes
KMK Energy, LLC	7/13/23	Undelivered	No
MEC Development, Ltd.	7/13/23	Undelivered	No
<u>NON-STANDARD UNIT</u>			
Bureau of Land Management	7/13/23	7/20/23	Yes
New Mexico State Land Office	7/13/23	Unknown	Yes
Timothy 6, LLC	7/13/23	7/21/23	Yes
Anderson Oil, Ltd.	7/13/23	7/21/23	Yes
BEXP II Alpha, LLC	7/13/23	7/21/23	Yes
BEXP II Omega, LLC	7/13/23	7/21/23	Yes
Burleson Petroleum, Inc.	7/13/23	7/25/23	Yes
Carolyn L. Shogrin, individually and as Personal Representative of the Estate of Frank L. Shogrin	7/13/23	Unknown	Yes
Chel-Trand Holdings, LLC	7/13/23	Undelivered	No
Cross Timbers Energy, LLC	7/13/23	Unknown	Yes
Devon Energy Production Company L.P.	7/13/23	7/23/23	Yes
Horseshoe Operating, Inc.	7/13/23	Undelivered	No
Jack Huff Energy Ltd.	7/13/23	Unknown	Yes
Jalapeno Corporation	7/13/23	7/21/23	Yes
James L. Harden III	7/13/23	7/21/23	Yes

Kellie Halabrin	7/13/23	Not returned	No
KMK Energy, LLC	7/13/23	Unknown	Yes
Kris H. Youell	7/13/23	Not returned	No
Lewis Burluson Properties, LP	7/13/23	7/23/23	Yes
Lonsdale Resources, LLC	7/13/23	Unknown	Yes
Maduro Oil & Gas, LLC	7/13/23	7/21/23	Yes
MRC Delaware Resources, LLC,	7/13/23	7/21/23	Yes
Nadel and Gussman Capitan, LLC	7/13/23	Unknown	Yes
OXY USA Inc.	7/13/23	7/22/23	Yes
Rhodes Interests Ltd.	7/13/23	Undelivered	No
O.H.B. Inc.	7/13/23	7/25/23	Yes
Roger B. Hardee	7/13/23	Not returned	No
Roy G. Barton Sr. & Opal Barton Revocable Trust dated 2/28/1982	7/13/23	7/21/23	Yes
Sharbro Energy, LLC	7/13/23	Unknown	Yes
Shogoil & Gas Co., LLC	7/13/23	Unknown	Yes
SWAWBW, LLC	7/13/23	7/24/23	Yes
Veer Capital Partners LLC	7/13/23	7/24/23	Yes
W.T. Wynn	7/13/23	Not returned	No
Word B. Wilson Investments LLC	7/13/23	7/24/23	Yes
Yates Energy Corporation	7/13/23	7/28/23	Yes

Yates-US Inc.

7/13/23

Unknown

Yes

Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA


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

Beginning with the issue dated
July 26, 2023
and ending with the issue dated
July 26, 2023.



Publisher

Sworn and subscribed to before me this
26th day of July 2023.



Business Manager

My commission expires

January 29, 2027
STATE OF NEW MEXICO
NOTARY PUBLIC
GUSSIE RUTH BLACK
COMMISSION # 1087526
COMMISSION EXPIRES 01/29/2027

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

LEGAL NOTICE
July 26, 2023

NOTICE

To: (a) BEXP II Alpha, LLC, BEXP II Omega, LLC, Cross Timbers Energy, LLC, Devon Energy Production Company L.P., James L. Harden III, SWAWBW, LLC, Horseshoe Operating, Inc., O.H.B. Inc., Jack Huff Energy Ltd., MRC Delaware Resources LLC, Lewis Burleson Properties, LP, Yates Energy Corporation, and Yates-US Inc., Burleson Petroleum, Inc., Chel-Trand Holdings, LLC, Rhodes Interests Ltd., Carolyn L. Shogrin, individually and as Personal Representative of the Estate of Frank L. Shogrin, KMK Energy, LLC, and MEC Development, Ltd. (as to the non-standard unit portion of the application), and (b) Bureau of Land Management, New Mexico State Land Office, Timothy 6, LLC, Anderson Oil, Ltd., BEXP II Alpha, LLC, BEXP II Omega, LLC, Burleson Petroleum, Inc., Carolyn L. Shogrin, individually and as Personal Representative of the Estate of Frank L. Shogrin, Chel-Trand Holdings, LLC, Cross Timbers Energy, LLC, Devon Energy Production Company L.P., Horseshoe Operating, Inc., Jack Huff Energy Ltd., Jalapeno Corporation, James L. Harden III, Kellie Halabrin, KMK Energy, LLC, Kris H. Youell, Lewis Burleson Properties, LP, Lonsdale Resources, LLC, Maduro Oil & Gas, LLC, MRC Delaware Resources LLC, Nadel and Gussman Capitan, LLC, OXY USA Inc., Rhodes Interests Ltd., O.H.B. Inc., Roger B. Hardee, Roy G. Barton Sr. & Opal Barton Revocable Trust dated 2/28/1982, Sharbro Energy, LLC, Shogoiil & Gas Co., LLC, SWAWBW, LLC, Veer Capital Partners LLC, W.T. Wynn, Word B. Wilson Investments LLC, Yates Energy Corporation, and Yates-US Inc. (as to the non-standard unit portion of the application), or your heirs, devisees, successors, or assigns: Mewbourne Oil Company has filed an application with the New Mexico Oil Conservation Division (Case No. 23693) seeking an order pooling all uncommitted mineral interest owners in the Bone Spring formation, and approval of a non-standard spacing and proration unit (in the Young; Bone Spring, North Pool), underlying horizontal spacing unit comprised of Lots 1-4 and the S/2N/2 (the N/2) of Section 2 and Lots 1-4 and the S/2N/2 (the N/2) of Section 1, Township 18 South, Range 32 East, N.M.P.M., Lea County, New Mexico. Applicant proposes to drill the following wells to a depth sufficient to test the Bone Spring formation: (a) the Night Watch 2/1 B2DA Fed. Com. Well No. 1H, with a first take point in Lot 4 of Section 2 and a last take point in Lot 1 of Section 1; and (b) the Night Watch 2/1 B2EH Fed. Com. Well No. 1H, a horizontal well with a first take point in the SW/4NW/4 of Section 2 and a last take point in the SE/4NE/4 of Section 1. Also to be considered will be the cost of drilling, completing, testing, and equipping the wells and the allocation of the cost thereof, as well as actual operating costs and charges for supervision, designation of applicant as operator of the wells, and a 200% charge for the risk involved in drilling, completing, testing, and equipping the wells.

This matter is scheduled for hearing on August 3, 2023 at 8:15 a.m. During the current circumstances, state buildings are closed to the public and the hearing will be conducted remotely. To view the hearing docket and to determine how to participate in an electronic hearing, go to <https://www.emnrd.nm.gov/ocd/hearing-info/>, or contact Marlene Salvidrez at Marlene.Salvidrez@emnrd.nm.gov. You are not required to attend this hearing, but as an owner of an interest who may be affected by the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date. A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than five business days before the hearing date. This statement may be filed online with the Division at ocd.hearings@emnrd.nm.gov, and should include: The name of the party and his or her attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate time the party will need to present his or her case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the attorney for applicant, James Bruce, P.O. Box 1056, Santa Fe, New Mexico 87504, jamesbruc@aol.com. The units are located approximately 5-1/2 miles south-southeast of Maljamar, New Mexico.

#00281009

EXHIBIT 6

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