

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

**APPLICATION OF STEWARD ENERGY II, LLC
FOR COMPULSORY POOLING AND
APPROVAL OF OVERLAPPING SPACING UNIT,
LEA COUNTY, NEW MEXICO**

CASE NO. 24169

EXHIBIT INDEX

Compulsory Pooling Checklist

Exhibit A	Self-Affirmed Statement of Taylor Warren
A-1	Application & Proposed Notice of Hearing
A-2	C-102
A-3	Plat of Tracts and Overlapping Spacing Unit, Tract Ownership, Applicable Lease Numbers, Unit Recapitulation, Pooled Parties
A-4	Sample Well Proposal Letter & AFE
A-5	Chronology of Contact
Exhibit B	Self-Affirmed Statement of Shane Seals
B-1	Location Map, Subsea Structure Map, Gunbarrel Diagram
B-2	Stratigraphic Cross-Section
Exhibit C	Self-Affirmed Statement of Dana S. Hardy
C-1	Notice Letters to All Interested Parties
C-2	Chart of Notice to All Interested Parties
C-3	Copies of Certified Mail Receipts and Returns
C-4	Affidavit of Publication for February 14, 2024

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

Case: 24169	APPLICANT'S RESPONSE
Date	March 7, 2024
Applicant	Steward Energy II, LLC
Designated Operator & OGRID (affiliation if applicable)	OGRID # 371682
Applicant's Counsel:	Hinkle Shanor LLP
Case Title:	Application of Steward Energy II, LLC for Compulsory Pooling and Approval of Overlapping Spacing Unit, Lea County, New Mexico.
Entries of Appearance/Intervenors:	None.
Well Family	Pest Control
Formation/Pool	
Formation Name(s) or Vertical Extent:	San Andres
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	San Andres
Pool Name and Pool Code:	Bronco; San Andres South Pool (Code 7500)
Well Location Setback Rules:	Statewide
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	320-acre
Building Blocks:	quarter-quarter
Orientation:	North/South
Description: TRS/County	W/2 W/2 of Sections 22 and 27, Township 13 South, Range 38 East, Lea County, New Mexico.
Standard Horizontal Well Spacing Unit (Y/N), If No, describe and is approval of non-standard unit requested in this application?	Yes.
Other Situations	
Depth Severance: Y/N. If yes, description	No.
Proximity Tracts: If yes, description	No.
Proximity Defining Well: if yes, description	N/A
Applicant's Ownership in Each Tract	Exhibit A-3
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	Add wells as needed
Well #1	Pest Control Fee 6H (API # pending) SHL: 767' FSL & 383' FWL (Unit M), Section 15, T13S-R38E BHL: 100' FSL & 330' FWL (Unit M), Section 27, T13S-R38E Completion Target: San Andres (Approx. 5,357' TVD)

Horizontal Well First and Last Take Points	Exhibit A-2
Completion Target (Formation, TVD and MD)	Exhibit A-4
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$7,000.00
Production Supervision/Month \$	\$700.00
Justification for Supervision Costs	Exhibit A
Requested Risk Charge	200%
Notice of Hearing	
Proposed Notice of Hearing	Exhibit A-1
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit C-1, Exhibit C-2, Exhibit C-3
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit C-4
Ownership Determination	
Land Ownership Schematic of the Spacing Unit	Exhibit A-3
Tract List (including lease numbers and owners)	Exhibit A-3
If approval of Non-Standard Spacing Unit is requested, Tract List (including lease numbers and owners) of Tracts subject to notice requirements.	N/A
Pooled Parties (including ownership type)	Exhibit A-3
Unlocatable Parties to be Pooled	Exhibit C-2
Ownership Depth Severance (including percentage above & below)	N/A
Joinder	
Sample Copy of Proposal Letter	Exhibit A-4
List of Interest Owners (ie Exhibit A of JOA)	Exhibit A-3
Chronology of Contact with Non-Joined Working Interests	Exhibit A-5
Overhead Rates In Proposal Letter	Exhibit A-4
Cost Estimate to Drill and Complete	Exhibit A-4
Cost Estimate to Equip Well	Exhibit A-4
Cost Estimate for Production Facilities	Exhibit A-4
Geology	
Summary (including special considerations)	Exhibit B
Spacing Unit Schematic	Exhibit B-1
Gunbarrel/Lateral Trajectory Schematic	Exhibit B-1
Well Orientation (with rationale)	Exhibit B
Target Formation	Exhibit B
HSU Cross Section	Exhibit B-1
Depth Severance Discussion	N/A
Forms, Figures and Tables	

C-102	Exhibit A-2
Tracts	Exhibit A-3
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit A-3
General Location Map (including basin)	Exhibit B-1
Well Bore Location Map	Exhibit B-1
Structure Contour Map - Subsea Depth	Exhibit B-1
Cross Section Location Map (including wells)	Exhibit B-1
Cross Section (including Landing Zone)	Exhibit B-2
Additional Information	
Special Provisions/Stipulations	
CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.	
Printed Name (Attorney or Party Representative):	Dana S. Hardy
Signed Name (Attorney or Party Representative):	/s/ Dana S. Hardy
Date:	3/4/2024

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

**APPLICATION OF STEWARD ENERGY II, LLC
FOR COMPULSORY POOLING AND
APPROVAL OF OVERLAPPING SPACING UNIT,
LEA COUNTY, NEW MEXICO**

CASE NO. 24169

**SELF-AFFIRMED STATEMENT
OF TAYLOR WARREN**

1. I am a Vice President of Land, Permian North with Steward Energy II, LLC (“Steward”). I am over the age of 18, have personal knowledge of the matters addressed herein, and am competent to provide this Self-Affirmed Statement, I have previously testified before the New Mexico Oil Conservation Division (“Division”) and my credentials as an expert in petroleum land matters were accepted and made a matter of record.

2. I am familiar with the land matters involved in the above-referenced case. Copies of Steward’s Application and proposed hearing notice are attached as **Exhibit A-1**.

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

4. Steward seeks an order pooling all uncommitted interests in Bronco; San Andres, South Pool (Code 7500) within the San Andres formation underlying a 320-acre, more or less, standard, overlapping horizontal spacing unit comprised of the W/2 W/2 of Sections 22 and 27, Township 13 South, Range 38 East, Lea County, New Mexico (“Unit”).

5. The Unit will be dedicated to the **Pest Control 6H** well (“Well”), which will be drilled from a surface hole location in the SW/4 SW/4 (Unit M) of Section 15 to a bottom hole location in the SW/4 SW/4 (Unit M) of Section 27.

6. The completed interval of the Well will be orthodox.

**Steward Energy II, LLC
Case No. 24169
Exhibit A**

7. The Unit will partially overlap with the spacing unit for the Roof Pizza Fee 5H well (API #30-025-49481), which is located in the W/2 of Section 22, Township 13 South, Range 38 East, Lea County, and produces from the Bronco; San Andres, South Pool (Code 7500).

8. The Unit will also partially overlap with the spacing unit for the Vamonos Fee 4H well (API #30-025-51639) and the Vamonos Fee 4H well (API #30-025-49708), which are located in the W/2 of Section 27, Township 13 South, Range 38 East, Lea County and produce from the Bronco; San Andres, South Pool (Code 7500).

9. **Exhibit A-2** contains the C-102 for the Well.

10. **Exhibit A-3** contains a plat identifying ownership by tract in the Unit. This exhibit also includes any applicable lease numbers, a unit recapitulation, and the interests Steward seeks to pool highlighted in yellow. Exhibit A-3 also identifies the area of the overlapping spacing units.

11. Steward located an address for each party it seeks to pool, but it is unclear whether each address is valid since some of the hearing notice letters were returned as undeliverable. As discussed below, Steward conducted extensive research to locate the parties it seeks to pool.

12. With respect to Steward's efforts to locate parties, Steward conducted a diligent search of all relevant county public records, phone directories and computer databases a landman in the normal course of business would search. Over the course of several years since leasing activity began, the lease broker, Shaw Interests, Inc., and our in-house Landman, Cooper Newlan, each conducted their own diligent searches, and worked in conjunction, to locate unlocatable parties. Each used <https://www.google.com/> to obtain as many details as possible prior to conducting searching on websites that included the following:

<https://accurint.com/> (a Lexis-Nexis paid subscription search service)

<https://www.ancestry.com/>

<https://www.familysearch.org/en/>

<https://www.findagrave.com/>

<https://www.legacy.com/>

<https://www.newspapers.com/>

<https://www.whitepages.com/>

13. Steward has sent correspondence and lease offers to confirmed and prospective addresses. Additionally, telephone calls were made in an attempt to reach the relatives/heirs.

14. **Exhibit A-4** contains a sample well proposal letter and AFE sent to working interest owners for the Well. The estimated costs reflected on the AFE are fair and reasonable and comparable to the cost of other wells of similar depth and length drilled in the subject formation in the area.

15. In my opinion, Steward made a good-faith effort to reach voluntary joinder of uncommitted interests in the Well as indicated by the chronology of contact described in **Exhibit A-5**.

16. Steward requests overhead and administrative rates of \$7,000.00 per month while the Well is being drilled and \$700.00 per month while the Well is producing. These rates are fair and are comparable to the rates charged by Steward and other operators in the vicinity.

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

18. In my opinion, the granting of Steward's application would serve the interests of conservation, the protection of correlative rights, and the prevention of waste.

19. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony above is true and correct and is made under penalty of perjury

under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.



Taylor Warren

02/16/2024

Date

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

**APPLICATION OF STEWARD ENERGY II, LLC
FOR COMPULSORY POOLING AND
APPROVAL OF OVERLAPPING SPACING UNIT,
LEA COUNTY, NEW MEXICO,**

CASE NO. 24169

AMENDED APPLICATION

In accordance with NMSA 1978, § 70-2-17 and NMAC 19.15.16.15(B)(5), Steward Energy II, LLC (“Steward” or “Applicant”), through its undersigned attorneys, files this application with the Oil Conservation Division (“Division”) seeking an order: (1) establishing a 320-acre, more or less, standard, overlapping horizontal spacing unit comprised of the W/2 W/2 of Sections 22 and 27, Township 13 South, Range 38 East, Lea County, New Mexico (“Unit”); and (2) pooling all uncommitted interests in the San Andres formation underlying the Unit. In support of this application, Steward states the following.

1. Applicant (OGRID No. 371682) is a working interest owner in the Unit and has the right to drill thereon.
2. Applicant seeks to dedicate the Unit to the **Pest Control Fee 6H** well (“Well”), which will be drilled from a surface hole location in the SW/4 SW/4 (Unit M) of Section 15 to a bottom hole location in the SW/4 SW/4 (Unit M) of Section 27.
3. The completed interval of the Well will be orthodox.
4. The Unit will partially overlap with the spacing unit for the Roof Pizza Fee 5H well (API #30-025-49481), which is located in the W/2 of Section 22, Township 13 South, Range 38 East, Lea County and produces from the Bronco; San Andres, South Pool (Code 7500).

**Steward Energy II, LLC
Case No. 24169
Exhibit A-1**

5. The Unit will also partially overlap the spacing unit for the Vamonos Fee 4H well (API #30-025-51639) and the Vamonos Fee 5H well (API #30-025-49708), which are located in the W/2 of Section 27, Township 13 South, Range 38 East, Lea County and produce from the Bronco; San Andres, South Pool (Code 7500).

6. Applicant has sought and been unable to obtain voluntary agreement for the development of these lands from all of the interest owners in the Unit.

7. The pooling of interests will avoid the drilling of unnecessary wells, prevent waste, and protect correlative rights.

8. In order to permit Applicant to obtain its just and fair share of the oil and gas underlying the subject lands, all uncommitted interests in the Unit should be pooled and Applicant should be designated the operator of the proposed horizontal well and the Unit.

WHEREFORE, Applicant requests that this application be set for hearing before an Examiner of the Oil Conservation Division on March 7, 2024, and, after notice and hearing as required by law, the Division enter an order:

- A. Approving the proposed overlapping spacing unit;
- B. Pooling all uncommitted interests in the Unit;
- C. Approving the initial well in the Unit;
- D. Designating Applicant as the operator of the Unit and the horizontal well to be drilled thereon;
- E. Authorizing Applicant to recover its costs of drilling, equipping, and completing the well;
- F. Approving the actual operating charges and costs of supervision, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and

G. Imposing a 200% charge for the risk assumed by Applicant in drilling and completing the well against any working interest owner who does not voluntarily participate in the drilling of the well.

Respectfully submitted,

HINKLE SHANOR LLP

/s/ Dana S. Hardy

Dana S. Hardy

Jaclyn M. McLean

P.O. Box 2068

Santa Fe, NM 87504-2068

Phone: (505) 982-4554

Facsimile: (505) 98208623

dhardy@hinklelawfirm.com

jmclean@hinklelawfirm.com

Counsel for Steward Energy II, LLC

Application of Steward Energy II, LLC for Compulsory Pooling and Approval of Overlapping Spacing Unit, Lea County, New Mexico. Steward Energy II, LLC (“Applicant”) seeks an order: (1) establishing a 320-acre, more or less, standard, overlapping horizontal spacing unit comprised of the W/2 W/2 of Sections 22 and 27, Township 13 South, Range 38 East, Lea County, New Mexico (“Unit”); and (2) pooling all uncommitted interests in the San Andres formation underlying the Unit. Applicant seeks to dedicate the Unit to the **Pest Control Fee 6H** well (“Well”), which will be drilled from a surface hole location in the SW/4 SW/4 (Unit M) of Section 15 to a bottom hole location in the SW/4 SW/4 (Unit M) of Section 27. The completed interval of the Well will be orthodox. The Unit will partially overlap with the spacing units for the Roof Pizza Fee 5H well (API #30-025-49481), the Vamonos Fee 4H well (API #30-025-51639), and the Vamonos Fee 5H well (API #30-025-49708). Also to be considered will be the cost of drilling and completing the Well and the allocation of the costs, the designation of Applicant as operator of the Well, and a 200% charge for the risk involved in drilling and completing the Well. The Well is located approximately 13.8 miles southeast of Tatum, New Mexico.

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

State of New Mexico
Energy, Minerals & Natural Resources Department

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

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name
	7500	Bronco; San Andres, South Pool
Property Code	Property Name	Well Number
	PEST CONTROL FEE	#6H
OGRID No.	Operator Name	Elevation
371682	STEWARD ENERGY II, LLC	3810'

Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	15	13 S	38 E		767	SOUTH	383	WEST	LEA

Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	27	13 S	38 E		100	SOUTH	330	WEST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
320.00			

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

APPROXIMATE WELL BORE DISTANCE FROM FTP TO LTP	
SECTION 22	5178.69'
SECTION 27	5177.49'
TOTAL	10356.18'

OPERATOR CERTIFICATION

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

Signature _____ Date _____

Printed Name _____

E-mail Address _____

SURVEYOR CERTIFICATION

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

FEBRUARY 01, 2024

Date of Survey

Signature and Seal of Professional Surveyor:

Job No.: 24-01-3864
MATTHEW B. TOMERLIN, N.M.P.L.S.
Certificate Number 23203

NAD 83 (SHL) 767' FSL & 383' FWL	NAD 83 (FTP) 100' FNL & 330' FWL
LATITUDE = 33.186516° LONGITUDE = -103.092232°	LATITUDE = 33.184132° LONGITUDE = -103.092416°
NAD 27 (SURFACE HOLE LOCATION)	NAD 27 (FTP)
LATITUDE = 33.186408° LONGITUDE = -103.091733°	LATITUDE = 33.184024° LONGITUDE = -103.091917°
STATE PLANE NAD 83 (N.M. EAST)	STATE PLANE NAD 83 (N.M. EAST)
N: 797648.06' E: 921039.47'	N: 796780.04' E: 920993.57'
STATE PLANE NAD 27 (N.M. EAST)	STATE PLANE NAD 27 (N.M. EAST)
N: 797585.10' E: 879863.56'	N: 796717.10' E: 879817.65'

NOTES

- ALL COORDINATES, BEARINGS, AND DISTANCES CONTAINED HEREIN ARE GRID, BASED UPON THE NEW MEXICO STATE PLANE COORDINATES SYSTEM, NORTH AMERICAN DATUM 83, NEW MEXICO EAST (3001), NAVD 88.
- THIS DOCUMENT IS BASED UPON AN ON THE GROUND SURVEY PERFORMED DURING FEBRUARY, 2024. CERTIFICATION OF THIS DOCUMENT IS ONLY TO THE LOCATION OF THIS EASEMENT IN RELATION TO RECORDED MONUMENT OF DEEDS PROVIDED BY THE CLIENT.
- ELEVATIONS MSL, DERIVED FROM G.N.S.S. OBSERVATION AND DERIVED FROM SAID ON-THE-GROUND SURVEY.

NAD 83 (LTP/BHL) 100' FSL & 330' FWL
LATITUDE = 33.155673° LONGITUDE = -103.092398°
NAD 27 (LTP/BHL)
LATITUDE = 33.155565° LONGITUDE = -103.091899°
STATE PLANE NAD 83 (N.M. EAST)
N: 786424.65' E: 921121.78'
STATE PLANE NAD 27 (N.M. EAST)
N: 786361.99' E: 879945.81'

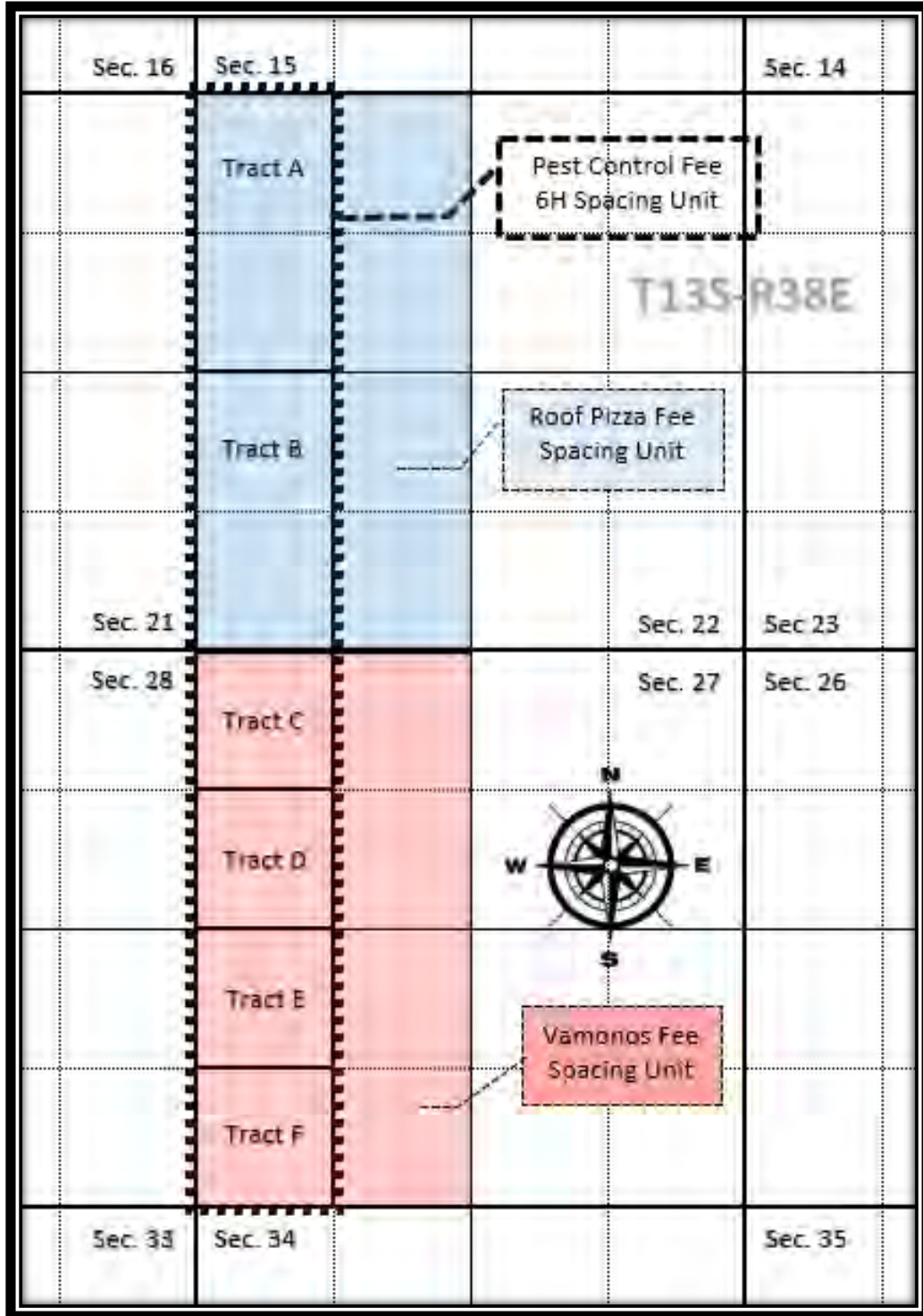
Steward Energy II, LLC
Case No. 24169
Exhibit A-2

Legend:
 FND. U.S.G.L.O. MON. UNLESS OTHERWISE NOTED
 CALC. CORNER
○ SHL/ KOP/ FTP / PPP/ LTP / BHL
 STATE OIL & GAS LEASE
 BLM OIL & GAS LEASE
 HORIZONTAL SPACING UNIT

0' 2500' 5000'

SCALE: 1" = 2500'

Pest Control Fee 6H
W/2W/2 of Sections 22 & 27, T13S-R38E, N.M.P.M
Lea Co., NM



Steward Energy II, LLC
Case No. 24169
Exhibit A-3

Tract A**(W/2NW/4 of Section 22, T13S-R38E, being 80.00 Acres)****Committed**

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Steward Energy II, LLC	WI	93.701380%	Committed - JOA Executed
Totals:		93.701380%	

Uncommitted

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Kennedy Minerals, Ltd.	WI/ORRI	1.794786%	Uncommitted
Terra Nova Energy, LP	WI/ORRI	1.731670%	Uncommitted
McCarthy Oil & Gas, LLC	WI/ORRI	0.384909%	Uncommitted
G&M Oil, LLC	WI/ORRI	0.096205%	Uncommitted
Helton, Janice S.	ULMI	0.173611%	Uncommitted
Humphrey, Trevor Scott	ULMI	0.077161%	Uncommitted
Moore, Joyce E.	ULMI	0.173611%	Uncommitted
Randall, Joan	ULMI	0.173611%	Uncommitted
Whittington, Judith Hunt	ULMI	0.173611%	Uncommitted
Spradlin, Charles Andrew	ULMI	0.825000%	Uncommitted
Estate of Ruth Lucille Terrell Smith	ULMI	0.462963%	Uncommitted
Management Trust f/b/o Megan Elizabeth Humphrey	ULMI	0.077161%	Uncommitted
DeBock, Kortney Williams	ULMI	0.057870%	Uncommitted
Williams, Kay Elkins Bingham	ULMI	0.038581%	Uncommitted
Williams, Kolby	ULMI	0.057870%	Uncommitted
Totals:		6.298620%	
Grand Totals:		100.000000%	

Overriding Royalty Interest Owners

<u>Owner</u>	<u>Type</u>
Eight Energy, Inc.	ORRI
MQH Investments	ORRI
OGTEE Consultants LLC	ORRI
Solis Resources Ltd.	ORRI

Parties to be pooled are highlighted in yellow.

Tract B

(W/2SW/4 of Section 22, T13S-R38E, being 80.00 Acres)

Committed

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Steward Energy II, LLC	WI	95.636239%	Committed - JOA Executed
Totals:		95.636239%	

Uncommitted

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Kennedy Minerals, Ltd.	WI	1.831847%	Uncommitted
Terra Nova Energy, LP	WI	1.767428%	Uncommitted
McCarthy Oil & Gas, LLC	WI	0.392857%	Uncommitted
G&M Oil, LLC	WI	0.098192%	Uncommitted
Moeller, Gregory Aaron	ULMI	0.273437%	Uncommitted
Totals:		4.363761%	
Grand Totals:		100.000000%	

Parties to be pooled are highlighted in yellow.

Tract C

(W/2N/2NW/4 of Section 27, T13S-R38E, being 40.00 Acres)

Committed

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Steward Energy II, LLC	WI	94.631258%	Committed - JOA Executed
Totals:		94.631258%	

Uncommitted

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Kennedy Minerals, Ltd.	WI	1.812598%	Uncommitted
Terra Nova Energy, LP	WI	1.748855%	Uncommitted
McCarthy Oil & Gas, LLC	WI	0.388729%	Uncommitted
G&M Oil, LLC	WI	0.097160%	Uncommitted
Dotson-Ice, Jan C.	ULMI	0.105469%	Uncommitted
Harle, Inc.	ULMI	0.937500%	Uncommitted
Hoshi Kanri LLC	ULMI	0.067494%	Uncommitted
Robert Edward Eckels Jr. LLC	ULMI	0.210938%	Uncommitted
Totals:		5.368743%	
Grand		100.000000%	
Totals:			

Overriding Royalty Interest Owners

<u>Owner</u>	<u>Type</u>
PetroVen Inc.	ORRI
William C. Bahlburg	ORRI

Parties to be pooled are highlighted in yellow.

Tract D**(SW/4NW/4 of Section 27, T13S-R38E, being 40.00 Acres)****Committed**

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Steward Energy II, LLC	WI	89.904807%	Committed - JOA Executed
Totals:		89.904807%	

Uncommitted

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Kennedy Minerals, Ltd.	WI/ORRI	1.722066%	Uncommitted
Terra Nova Energy, LP	WI	1.661507%	Uncommitted
McCarthy Oil & Gas, LLC	WI/ORRI	0.369313%	Uncommitted
G&M Oil, LLC	WI	0.092307%	Uncommitted
McBride Oil and Gas Corporation	ULMI	6.250000%	Uncommitted
Totals:		10.095193%	
Grand Totals:		100.000000%	

Overriding Royalty Interest Owners

<u>Owner</u>	<u>Type</u>
Eight Energy, Inc.	ORRI
MQH Investments	ORRI
OGTEE Consultants LLC	ORRI
PetroVen Inc.	ORRI
Solis Resources Ltd.	ORRI
William C. Bahlburg	ORRI

Parties to be pooled are highlighted in yellow.

Tract E

(W/2N/2SW/4 of Section 27, T13S-R38E, being 40.00 Acres)

Committed

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Steward Energy II, LLC	WI	69.427489%	Committed - JOA Executed
Totals:		69.427489%	

Uncommitted

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Kennedy Minerals, Ltd.	WI	1.329836%	Uncommitted
Terra Nova Energy, LP	WI	1.283071%	Uncommitted
McCarthy Oil & Gas, LLC	WI	0.285196%	Uncommitted
G&M Oil, LLC	WI	0.071283%	Uncommitted
Cone Jr., James Raymond	ULMI	25.000000%	Uncommitted
Howard H. Cone Trust "A", u/w/o Hubert E. Cone	ULMI	2.500000%	Uncommitted
Spradlin, Charles Andrew	ULMI	0.103125%	Uncommitted
Totals:		30.572511%	
Grand Totals:		100.000000%	

Parties to be pooled are highlighted in yellow.

Tract F

(SW/4SW/4 of Section 27, T13S-R38E, being 40.00 Acres)

Committed

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Steward Energy II, LLC	WI	95.898461%	Committed - JOA Executed
Totals:		95.898461%	

Uncommitted

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>	<u>Status</u>
Kennedy Minerals, Ltd.	WI/ORRI	1.836870%	Uncommitted
Terra Nova Energy, LP	WI	1.772274%	Uncommitted
McCarthy Oil & Gas, LLC	WI/ORRI	0.393934%	Uncommitted
G&M Oil, LLC	WI	0.098461%	Uncommitted
Totals:		4.101539%	
Grand		100.000000%	
Totals:			

Overriding Royalty Interest Owners

<u>Owner</u>	<u>Type</u>
Eight Energy, Inc.	ORRI
MQH Investments	ORRI
OGTEE Consultants LLC	ORRI
PetroVen Inc.	ORRI
Solis Resources Ltd.	ORRI
William C. Bahlburg	ORRI

Parties to be pooled are highlighted in yellow.

Recapitulation**Committed**

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>
Steward Energy II, LLC	WI	91.067156%
Totals:		91.067156%

Uncommitted

<u>Owner</u>	<u>Type</u>	<u>WI Ownership</u>
Kennedy Minerals, Ltd.	WI/ORRI	1.744330%
Terra Nova Energy, LP	WI/ORRI	1.682988%
McCarthy Oil & Gas, LLC	WI/ORRI	0.374088%
G&M Oil, LLC	WI/ORRI	0.093501%
Eight Energy, Inc.	ORRI	0.000000%
MQH Investments	ORRI	0.000000%
OGTEE Consultants LLC	ORRI	0.000000%
PetroVen Inc.	ORRI	0.000000%
Solis Resources Ltd.	ORRI	0.000000%
William C. Bahlburg	ORRI	0.000000%
Helton, Janice S.	ULMI	0.043403%
Humphrey, Trevor Scott	ULMI	0.019290%
Moore, Joyce E.	ULMI	0.043403%
Randall, Joan	ULMI	0.043403%
Whittington, Judith Hunt	ULMI	0.043403%
Spradlin, Charles Andrew	ULMI	0.219141%
Estate of Ruth Lucille Terrell Smith	ULMI	0.115741%
Management Trust f/b/o Megan Elizabeth Humphrey	ULMI	0.019290%
DeBock, Kortney Williams	ULMI	0.014468%
Williams, Kay Elkins Bingham	ULMI	0.009645%
Williams, Kolby	ULMI	0.014468%
Moeller, Gregory Aaron	ULMI	0.068359%
Dotson-Ice, Jan C.	ULMI	0.013184%
Harle, Inc.	ULMI	0.117188%
Hoshi Kanri LLC	ULMI	0.008437%
Robert Edward Eckels Jr. LLC	ULMI	0.026367%
McBride Oil and Gas Corporation	ULMI	0.781250%
Cone Jr., James Raymond	ULMI	3.125000%
Howard H. Cone Trust "A", u/w/o Hubert E. Cone	ULMI	0.312500%
Totals:		8.932847%
Grand Totals:		100.000000%

Parties to be pooled are highlighted in yellow.



STEWARD ENERGY

*****VIA CERTIFIED U.S.P.S. MAIL # _____*****

December 13, 2023

Owner Name
Address 1
Address 2
City, State Zip-Code

**Re: Well Proposal
Pest Control Fee 6H
W/2W/2 Sections 22 and 27, T13S-R38E
Lea County, New Mexico**

Dear Owner,

Steward Energy II, LLC (“Steward”) hereby proposes to drill and complete the **Pest Control Fee 6H** as a horizontal well (“Well”), at the following locations, formation, and depth referenced below, which are subject to change based on final determination:

SHL: 755’ FSL & 368’ FWL Sec. 15, T13S-R38E
FTP: 100’ FNL & 365’ FWL Sec. 22, T13S-R38E
BHL: 100’ FSL & 365’ FEL Sec. 27, T13S-R38E
Formation: San Andres
Total Vertical Depth and Measured Depth: ~ 5,357’ / 16,267’

Steward proposes the formation of a Horizontal Spacing Unit (“HSU”), covering the W/2W/2 of Sections 22 and 27, T13S-R38E, Lea County, New Mexico, containing 320 acres, more or less. Portions of these lands may be covered by an existing Joint Operating Agreements (“JOAs”), also covering the San Andres formation, and Steward hereby submits for your consideration, a new Joint Operating Agreement, dated December 1, 2023, being a modified AAPL Form 610 – 1989 Model Form Operating Agreement (“NJOA”), to govern proposals and operations within the HSU. The NJOA shall supersede any existing operations under any JOAs. The NJOA has the following general provisions:

Effective Date: December 1, 2023
Operator: Steward Energy II, LLC
Contract Area: W/2W/2 of Sections 22 and 27, T13S-R38E, Lea County, New Mexico
Non-Consent Penalty: 300%
Overhead Rate: \$7,000/\$700 (drilling / producing monthly)

**Steward Energy II, LLC
Case No. 24169
Exhibit A-4**

Well Proposal
Pest Control Fee #6H
December 13, 2023

Enclosed are documents for your review and execution. Please see detailed Authorization for Expenditure (“AFE”), reflecting estimated costs that will be incurred to drill, complete, and equip the Well associated with this proposal.

If you intend to participate, please execute in the appropriate box on the AFE, and return to the undersigned within 30 days of receipt of this proposal. The AFE represents an estimated cost and is subject to change once the Well is drilled/completed and actual costs are incurred. Parties electing to participate are responsible for their proportionate share of actual costs.

Should you elect to participate in the Well, your execution of the NJOA is required. Please execute in the appropriate line, notarize, and return to the undersigned within 30 days of receipt of this proposal.

Your interest can be found on the AFE and Exhibit A to the proposed NJOA. Please note that this interest is subject to change pending further title verification.

Steward will submit an application for a Compulsory Pooling Order with the New Mexico Oil Conservation Division within 30 days of your receipt of this letter. This will allow Steward to move forward with planning and drilling the Well while allowing time to properly execute a NJOA amongst the parties.

Please note that Steward is open to discuss possible trades, assignments, etc. of your interest in the subject acreage. Should you be interested or have any questions, please feel free to contact me at the information listed below.

Failure to respond within 30 days shall be deemed an election NOT to participate.

Please send your election and all communication to:

Steward Energy II, LLC
Land Department
2600 Dallas Parkway, Suite 400
Frisco, Texas 75034

For questions regarding this well proposal please contact the Land Department via email land@stewardenergy.net or call (214) 297-0500.

Respectfully,

Keri Sweet
Sr. Landman

Attachment



AUTHORIZATION FOR EXPENDITURE

Well Name: Pest Control Fee 6H					
Operator: Steward Energy II, LLC			AFE Number: 2404013DR		
Well Type: Oil (Horizontal)		AFE Type: Development Drlg/Comp		AFE Date: 12/14/2024	
Q/Q-Q-S/T/R: W/2W/2 of Sections 22 and 27 - T13S-R38E		Prop. Depth: 5375.00' TVD, 16225.00' MD		County, State: Lea, NM	
		Field: Bronco; San Andres, South			
Surface	Long: -103.092232	Lat: 33.186516			
Bottom Hole	Long: -103.092355	Lat: 33.155497			
Project Description: Drill & Complete a ~2-mile San Andres Horizontal					

Account #	Cost Breakdown	Drilling	Dry Hole	Completion Cost	Workover	Total
8200.100	Land, Surveying & Legal	\$8,000	\$8,000			\$8,000
8200.101	Abstract, Title & Permit	\$5,000	\$5,000			\$5,000
8200.102	ROW & Surface Damages	\$20,000	\$20,000			\$20,000
8200.103	Road, Pad Location & Pit Building	\$58,500	\$58,500			\$58,500
8200.104	Environ, Reg & Safety	\$2,000	\$2,000			\$2,000
8200.105	Well Insurance	\$4,200	\$4,200			\$4,200
8200.113	Contract Labor	\$8,850	\$8,850			\$8,850
8200.114	Consulting Services & Contract Supervision	\$78,500	\$78,500			\$78,500
8200.120	Vacuum & Pump Truck	\$3,500	\$3,500			\$3,500
8200.122	Material Transportation	\$12,400	\$12,400			\$12,400
8200.126	Fuel	\$73,600	\$73,600			\$73,600
8200.131	Chemical-Downhole Treating	\$3,160	\$3,160			\$3,160
8200.132	Mud & Additives	\$68,000	\$68,000			\$68,000
8200.140	Mob/Demob	\$90,000	\$90,000			\$90,000
8200.141	Mud Disposal/Pit Closure	\$200,000	\$200,000			\$200,000
8200.142	Trailer Rental, Camp & Catering	\$35,700	\$35,700			\$35,700
8200.144	Drilling Rig - Daywork or Footage	\$243,600	\$243,600			\$243,600
8200.149	Bits, Mills & Reamers	\$34,500	\$34,500			\$34,500
8200.151	Directional Services	\$138,600	\$138,600			\$138,600
8200.160	Casing Crews & Services	\$32,700	\$32,700			\$32,700
8200.161	Cementing Services	\$150,000	\$150,000			\$150,000
8200.169	Water Transfer	\$8,500	\$8,500			\$8,500
8200.170	Water Purchase	\$30,000	\$30,000			\$30,000
8200.175	Surface Equipment Rental & Services	\$162,800	\$162,800			\$162,800
8200.193	Downhole Inspection/Testing - Casing, Tubing & Rods	\$26,650	\$26,650			\$26,650
8200.301	Overhead	\$14,000	\$14,000			\$14,000
	IDC Total:	\$1,512,760	\$1,512,760			\$1,512,760
8250.200	Conductor/Drive Pipe	\$20,600	\$20,600			\$20,600
8250.201	Surface Casing	\$68,149	\$68,149			\$68,149
8250.203	Production Casing	\$615,600	\$615,600			\$615,600
8250.205	Wellhead Equipment, Flow Tee & Meter Run	\$20,880	\$20,880			\$20,880
8250.214	Other Downhole Equipment	\$434,854	\$434,854			\$434,854
	TDC Total:	\$1,160,083	\$1,160,083			\$1,160,083
8300.110	Company Labor			\$48,000	\$48,000	\$48,000
8300.114	Consulting Services & Contract Supervision			\$48,000	\$48,000	\$48,000
8300.120	Vacuum & Pump Truck			\$34,000	\$34,000	\$34,000
8300.122	Material Transportation			\$33,000	\$33,000	\$33,000
8300.126	Fuel			\$6,500	\$6,500	\$6,500
8300.131	Chemicals - Downhole Treating			\$4,500	\$4,500	\$4,500
8300.133	Completion Fluid			\$40,000	\$40,000	\$40,000
8300.142	Trailer Rental, Camp & Catering			\$6,500	\$6,500	\$6,500
8300.143	Well Control - BOP, Isolation Assy			\$117,000	\$117,000	\$117,000

8300.146	Completion/Workover Rig		\$98,450	\$98,450	\$98,450
8300.148	Reverse Unit		\$40,000	\$40,000	\$40,000
8300.149	Bits, Mills & Reamers		\$3,500	\$3,500	\$3,500
8300.169	Water Transfer	\$106,000	\$106,000	\$106,000	\$106,000
8300.170	Water Purchase		\$270,250	\$270,250	\$270,250
8300.171	Stimulation - Frac, Acid, Gravel Pack		\$2,592,000	\$2,592,000	\$2,592,000
8300.175	Surface Equipment Rental & Services		\$94,000	\$94,000	\$94,000
8300.176	Downhole Equipment Rental & Services		\$89,000	\$89,000	\$89,000
ICC Total:			\$3,630,700	\$3,630,700	\$3,630,700
8350.205	Wellhead Equipment, Flow Tee & Meter Run	\$20,000	\$20,000	\$20,000	\$20,000
8350.206	Tubing		\$38,000	\$38,000	\$38,000
8350.211	Electric Submersible Pumps		\$305,500	\$305,500	\$305,500
8350.221	Surface VSD, Transformer, POC & Associated Equipment		\$32,000	\$32,000	\$32,000
8350.224	Electrical Installation & Power Generation		\$35,000	\$35,000	\$35,000
8350.234	Surface Pump & LACT's		\$1,500	\$1,500	\$1,500
TCC Total:			\$432,000	\$432,000	\$432,000
8600.100	Land, Surveying, & Legal	\$1,000	\$1,000	\$1,000	\$1,000
8600.102	ROW & Surface Damages	\$16,000	\$16,000	\$16,000	\$16,000
8600.111	Company Supervision	\$4,500	\$4,500	\$4,500	\$4,500
8600.120	Vaccum & Pump Truck	\$7,500	\$7,500	\$7,500	\$7,500
8600.122	Material Transportation	\$1,800	\$1,800	\$1,800	\$1,800
8600.175	Surface Equipment Rental & Services	\$1,500	\$1,500	\$1,500	\$1,500
IFC Total:			\$32,300	\$32,300	\$32,300
8650.222	Instrumentation & Meters	\$11,500	\$11,500	\$11,500	\$11,500
8650.223	SCADA & Communications	\$5,000	\$5,000	\$5,000	\$5,000
8650.224	Electrical Installation & Power Generation	\$15,000	\$15,000	\$15,000	\$15,000
8650.229	Prod & SWD Facility Inst.	\$80,000	\$80,000	\$80,000	\$80,000
8650.231	Separator, Heater Treater, FWKO	\$79,000	\$79,000	\$79,000	\$79,000
8650.233	Flowline & Gathering Lines	\$14,500	\$14,500	\$14,500	\$14,500
8650.235	Miscellaneous Non-Controllable - Pipe, Valves & Fittings	\$60,000	\$60,000	\$60,000	\$60,000
TFC Total:			\$265,000	\$265,000	\$265,000
			Totals:		\$7,032,843

The undersign elects to / not to participate in the Pest Control Fee 6H well with their proportionate working interest.

Owner Name: **Humphrey, Trevor Scott** Working Interest (%): **0.019290%** Amount(\$): **\$1,357**

Approved by: _____

Title: _____

Signature: _____

Date: _____

This AFE is an estimate only and non-operator, by execution of same, commits to pay its proportionate share of actual cost incurred.

Communication Timeline

Chronology of contact with locatable uncommitted interest:

- January 1, 2018 – Steward begins to acquire oil and gas leases from the unleased mineral owners in Tracts A through F. Tract A is composed of sixty-seven (67) mineral owners, Tract B is composed of fifteen (15) mineral owners, Tract C is composed of three (3) mineral owners, Tract D is composed of forty-nine (49) mineral owners, Tract E is composed of fourteen (14) mineral owners, and Tract F is composed of five (5) mineral owners. Up until present, Steward has maintained and extended the acquired leases located in Tracts A through F as necessary.
- May 6, 2019 – Steward acquired title to sixty-two (62) oil and gas leases, from Eight Energy Inc. and G.O. Basic Energy I LLC, effective 5/6/2019, covering Tracts A through F. Up until present, Steward has maintained and extended the acquired leases located in Tracts A through F as necessary.
- October 1, 2021 – Steward sends the Roof Pizza Fee 5H well proposals to the uncommitted owners via certified U.S. Mail.
- November 4, 2021 – Steward sends the Vamonos Fee 5H well proposals to the uncommitted owners via certified U.S. Mail.
- December 7, 2021 – Steward receives Pooling Order #R-21942 (Case No. 22319) for the Roof Pizza Fee 5H.
- December 9, 2021 – Steward sends the 2nd round of Roof Pizza Fee 5H well proposals to the uncommitted owners via certified U.S. Mail.
- December 14, 2021 – Steward spuds the Roof Pizza Fee 5H (API 30-025-49481) and completes said well on 1/12/2022. The Roof Pizza Fee 5H has continually produced since being completed.
- January 26, 2022 – Steward receives Pooling Order #R-21989 (Case No. 22405) for the Vamonos Fee 5H.
- February 16, 2022 – Steward sends the 2nd round of Vamonos Fee 5H well proposals to the uncommitted owners via certified U.S. Mail.
- March 24, 2022 – Steward spuds the Vamonos Fee 5H (API 30-025-49708) and completes said well on 4/12/2022. The Vamonos Fee 5H has continually produced since being completed.
- December 21, 2023 – Steward sends the Pest Control Fee 6H well proposals to the uncommitted owners via certified U.S. Mail and had follow-up communications with them, including, but not limited to, providing division orders.

Steward Energy II, LLC
Case No. 24169
Exhibit A-5

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

**APPLICATION OF STEWARD ENERGY II, LLC
FOR COMPULSORY POOLING AND
APPROVAL OF OVERLAPPING SPACING UNIT,
LEA COUNTY, NEW MEXICO**

CASE NO. 24169

**SELF-AFFIRMED STATEMENT
OF SHANE SEALS**

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

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

3. **Exhibit B-1** is a location map of the proposed horizontal spacing unit (“Unit”) within the San Andres formation. The approximate wellbore path for the proposed **Pest Control Fee 6H** well (“Well”) is represented by a light green dashed line. Existing producing wells in the targeted interval are represented by thin, light blue solid lines.

4. **Exhibit B-1** also contains a subsea structure map for the top of the Pi Marker in the San Andres formation that is representative of the targeted interval within the formation. The data points are indicated by red circles. The approximate wellbore path for the Well is depicted by a light green dashed line. The map demonstrates the formation is relatively flat in this area. I do not observe any faulting, pinch-outs, or geologic impediments to developing the targeted intervals with horizontal wells.

**Steward Energy II, LLC
Case No. 24169
Exhibit B**

5. **Exhibit B-1** identified three wells penetrating the targeted interval I used to construct a stratigraphic cross-section from A to A'. I used these well logs because they penetrate the targeted interval, are of good quality, and are representative of the geology in the area.

6. **Exhibit B-2** is a stratigraphic cross-section using the representative wells identified on **Exhibit B-1**. It contains gamma ray, resistivity, and porosity logs. The proposed landing zone for the Well is labeled on the exhibit. This cross-section demonstrated the target interval is continuous across the Unit.

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

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

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

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

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



Shane Seals

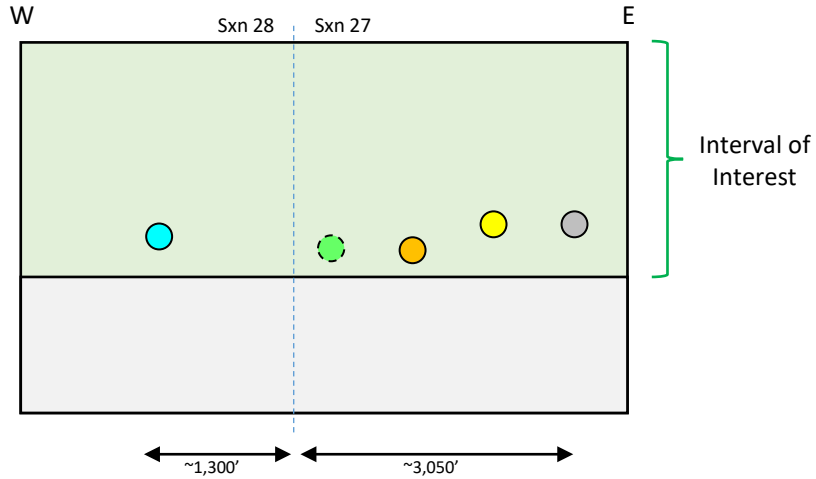
02/13/2024

Date

Steward Energy II, LLC
Case No. 24169
Exhibit B-1

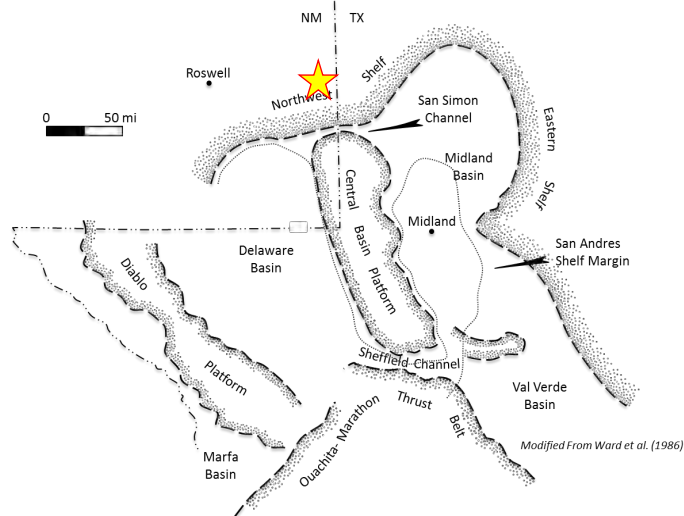
Gun Barrel

(Not to scale - Refer to map for orientation)



- Gray Matter Fee #2H (Steward Energy)
- Proposed Pest Control Fee #6H
- Vamonos Fee #5H (Steward Energy)
- Vamonos Fee #4H (Steward Energy)
- Salamanca State #3H (Steward Energy)

Permian Basin System



Top San Andres Pi Marker Present



Proposed Pest Control Fee #6H (Arrow towards BHL)



Steward Energy (Pest Control) Acreage

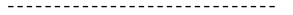


Producing Horizontal San Andres Well (Well Symbol at BHL)

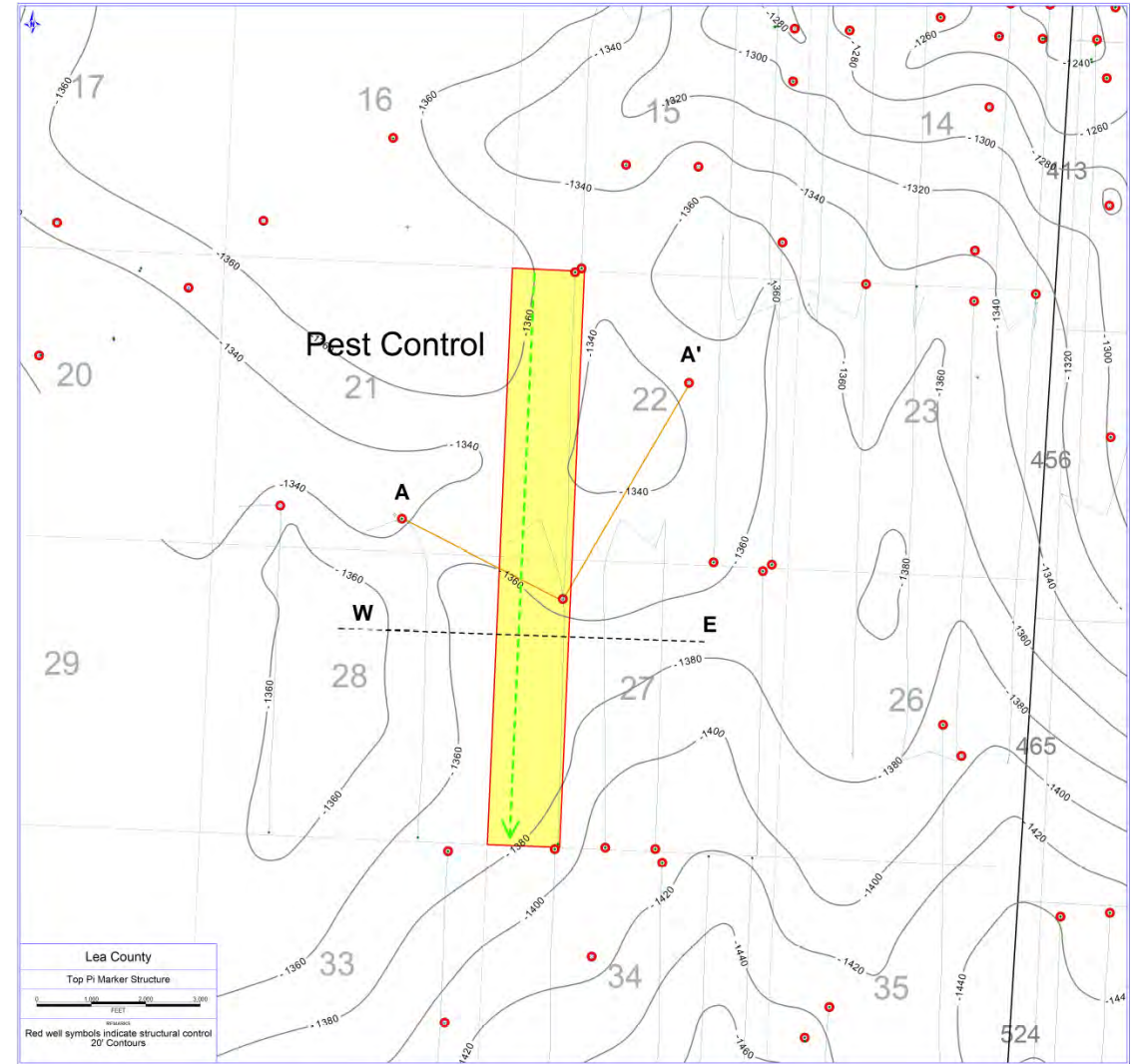
0 ft 2,000 ft



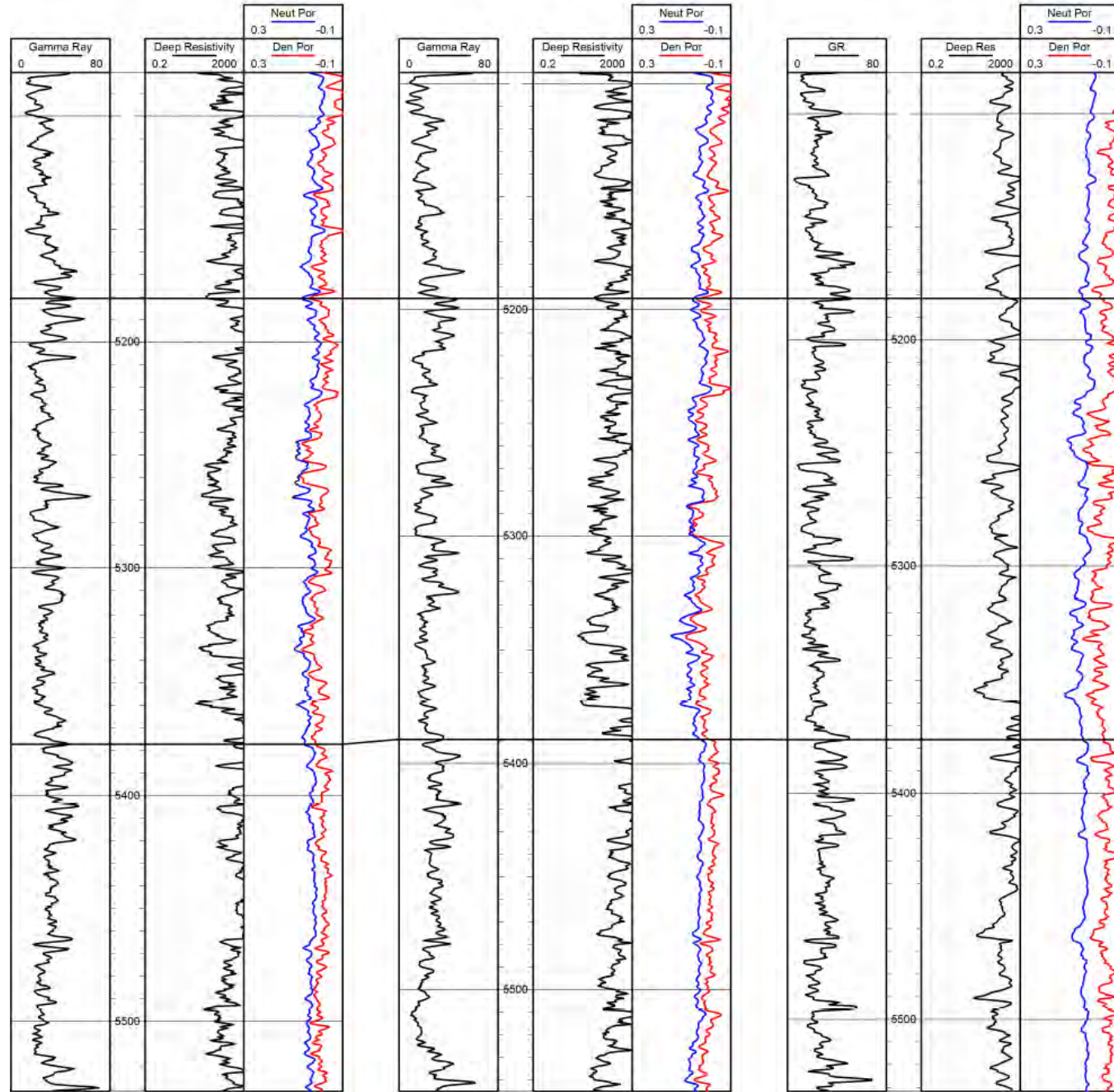
Gun Barrel



Cross Section



Interval
of
Interest



Steward Energy II, LLC
Case No. 24169
Exhibit B-2

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

**APPLICATION OF STEWARD ENERGY II, LLC
FOR COMPULSORY POOLING AND
APPROVAL OF OVERLAPPING SPACING UNIT,
LEA COUNTY, NEW MEXICO,**

CASE NO. 24169

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

1. I am attorney in fact and authorized representative of Steward Energy II, LLC, the Applicant herein.

2. I am familiar with the Notice Letters attached as **Exhibit C-1** and caused the Notice Letters, along with the Application in this case, to be sent to the parties set out in the chart attached as **Exhibit C-2**. This includes the interest owners in the overlapping spacing units.

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

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

5. On February 14, 2024, I caused a notice to be published to all interested parties in the Hobbs News-Sun. An Affidavit of Publication from the Legal Clerk of the Hobbs News-Sun, along with a copy of the notice publication, is attached as **Exhibit C-4**.

6. I understand this Self-Affirmed Statement will be used as written testimony in the subject cases. I affirm that my testimony above is true and correct and it 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.

/s/ Dana S. Hardy
Dana S. Hardy

March 1, 2024
Date

**Steward Energy II, LLC
Case No. 24169
Exhibit C**



hinklelawfirm.com

HINKLE SHANOR LLP

ATTORNEYS AT LAW

P.O. BOX 2068

SANTA FE, NEW MEXICO 87504

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

WRITER:
Dana S. Hardy, Partner
dhardy@hinklelawfirm.com

February 8, 2024

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO ALL PARTIES ENTITLED TO NOTICE

Re: Case No. 24169 – Application of Steward Energy II, LLC for Compulsory Pooling and Approval of Overlapping Spacing Unit, Lea County, New Mexico.

To whom it may concern:

This letter is to advise you that the enclosed application was filed with the New Mexico Oil Conservation Division. The hearing will be conducted on **March 7, 2024**, beginning at 8:15 a.m.

The hearing will be conducted in a hybrid fashion, both in-person at the Energy, Minerals, Natural Resources Department, Wendell Chino Building, Pecos Hall, 1220 South St. Francis Drive, 1st Floor, Santa Fe, NM 87505 and via the WebEx virtual meeting platform. To participate virtually, see the instructions posted on the OCD Hearings website: <https://www.emnrd.nm.gov/ocd/hearing-info/>. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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

Please contact Cooper Newlan, Senior Landman at Steward Energy II, LLC, via email at cooper.newlan@stewardenergy.net if you have questions regarding these matters.

Sincerely,

/s/ Dana S. Hardy

Dana S. Hardy

Steward Energy II, LLC
Case No. 24169
Exhibit C-1

Enclosure

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

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

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

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

**APPLICATION OF STEWARD ENERGY II, LLC
FOR COMPULSORY POOLING AND
APPROVAL OF OVERLAPPING SPACING UNIT,
LEA COUNTY, NEW MEXICO,**

CASE NO. 24169

NOTICE LETTER CHART

PARTY	NOTICE LETTER SENT	RETURN RECEIVED
A&P Family Limited Partnership PO Box 1046 Eunice, NM 88231-1046	02/08/24	02/26/24
Agel, Ronald C. 35 Shore Road West Harwich, MA 02671	02/08/24	02/20/24
Allen, Wanda Merlene 845 CR 211 Rotan, TX 79546	02/08/24	02/15/24
Andrews, Christopher Michael 4402 Humble Avenue Midland, TX 79707	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/27/24 – Delivery attempted.
Andrews, Mark Lane 2000 Doran Road Lima, NY 14485	02/08/24	02/23/24
Andrews, Matt Lynn 110 Tally St Brady, TX 76825	02/08/24	02/15/24
Antweil, Barry 12610 Stillwood Park Court Cypress, TX 77433-1284	02/08/24	02/26/24
Antweil, Mark 4450 Oak Park Lane #101842 Fort Worth, TX 76185	02/08/24	02/16/24
Antweil, Mary Frances 5410 Ledgestone Drive Fort Worth, TX 76132-2345	02/08/24	03/01/24
Apilado Resources, LLC 3839 McKinney Ave Ste 155-257 Dallas, TX 75204	02/08/24	02/15/24
Ashton, Alisa Williams PO Box 463 Andrews, TX 79714	02/08/24	02/23/24

**Steward Energy II, LLC
Case No. 24169
Exhibit C-2**

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

**APPLICATION OF STEWARD ENERGY II, LLC
FOR COMPULSORY POOLING AND
APPROVAL OF OVERLAPPING SPACING UNIT,
LEA COUNTY, NEW MEXICO,**

CASE NO. 24169

NOTICE LETTER CHART

B. Davis Gentry GST Trust c/o Prosperity Bank, Trustee 1401 Avenue Q Lubbock, TX 79401	02/08/24	02/14/24
BMD Exploration, LLC 33 Yale Street Williston Park, NY 11596	02/08/24	02/20/24
William C. Bahlburg PO Box 560430 The Colony, TX 75056-0430	02/08/24	02/15/24
Barrett Oklahoma Interests, Ltd. PO Box 171190 San Antonio, TX 78217	02/08/24	02/23/24
Blackburn, Cynthia H. 23811 Wispy Way Katy, TX 77494	02/08/24	02/21/24
Blasco, LLC 6235 Savannah Way Colorado Springs, CO 80919	02/08/24	02/26/24
Bowerman, Jan Cone 4354 Middleton Road Dallas, TX 75229	02/08/24	02/15/24
Bud & Mary Lou Flocchini Family LP 1330 Capital Boulevard Reno, NV 89502	02/08/24	02/21/24
C & I Powell Revocable Living Trust, dated 6/16/1978 114 Las Brisas Drive Monterey, CA 93940	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/29/24 – Delivery attempted.
C.R. Hutcheson 1967 Trust 901 Tradewinds Blvd., Suite B Midland, TX 79706	02/08/24	02/14/24
Caldwell, Mark M. 3512 A Shell Ave. Midland, TX 79707	02/08/24	02/15/24

**STATE OF NEW MEXICO
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NOTICE LETTER CHART

Chalfant Family Partnership, LP PO Box 3123 Midland, TX 79702	02/08/24	02/20/24
Chase, Leah Beata Olivia 685 Mangrove Trl. Saginaw, TX 76131	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/13/24 – Delivered to individual at the address.
Chatfield Company 325 West 93rd Street #3B New York, NY 10025	02/08/24	02/21/24 No signature.
Citadel Oil & Gas Corporation PO Box 27527 Denver, CO 80227	02/08/24	02/20/24
Cone Jr., James Raymond PO Box 10217 Lubbock, TX 79406	02/08/24	02/14/24
Cone, Kenneth G. PO Box 507 Dripping Springs, TX 78620	02/08/24	02/20/24
Cone, Thomas R. PO Box 400 Southwest City, MO 64863	02/08/24	02/20/24
Copperhead Resources, LLC PO Box 8355 Midland, TX 79708	02/08/24	02/26/24
Craig Jr., Robert Lee 9816 Slide Road, Suite 201 Lubbock, TX 79424	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/12/24 – Delivered to individual at the address.
Danglade/Speight Family Oil and Gas I, LP c/o Sproles Woodard LLP 777 Main Street, Suite 3250 Midland, TX 79710	02/08/24	02/16/24 Return to sender.

**STATE OF NEW MEXICO
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LEA COUNTY, NEW MEXICO,**

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NOTICE LETTER CHART

Daughtrey, Alicia F. Williams 864 Jerry Lane Bedford, TX 76022-7307	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/13/24 – Delivery attempted.
Davidson, Ruthanne 4115 Pinehurst Drive Amarillo, TX 79109	02/08/24	02/15/24
Kortney Williams DeBock 2581 FM 28 Floydada, TX 79235	02/08/24	02/15/24
Dorchester Minerals, L.P. 3838 Oak Lawn Ave., Suite 300 Dallas, TX 75219-4541	02/08/24	02/20/24
Dotson-Ice, Jan C. PO Box 7366 Covington, WA 98042	02/08/24	02/26/24
Downing, William Terrell 2607 Hodges Street Midland, TX 79705	02/08/24	02/15/24
Dreessen, Cecile Marie PO Box 1370 Poulsbo, WA 98370	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/26/24 – Individual picked up at post office.
Edward T. Dreessen, Jr. & Kathleen G. Dreessen Living Trust, dated 6/13/2014 PO Box 1390 Grants Pass, OR 97528	02/08/24	02/20/24
Drew R. Scott Family Minerals, LLC PO Box 9143 Midland, TX 79708	02/08/24	02/26/24
Eckels, Christopher R.F. PO Box 30 Cedaredge, CO 81413	02/08/24	02/15/24

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NOTICE LETTER CHART

Eight Energy, Inc. 3804 Saint Andrews Ct. Midland, TX 79707	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/16/24 – Item in transit to next facility.
Elizabeth Jane Kay Family Trust PO Box 9602 Colorado Springs, CO 80932	02/08/24	02/14/24
Elk Range Royalties, LP 2110 Farrington Street Dallas, TX 75207	02/08/24	02/15/24
Estate of Ruth Lucille Terrell Smith PO Box 14085 South Lake Tahoe, CA 95702	02/08/24	02/27/24 Return to sender.
FFF, Inc. PO Box 20129 Sarasota, FL 34276	02/08/24	02/20/24
Fall River Resources, Inc. PO Box 13456 Denver, CO 80201	02/08/24	02/14/24
Faraway Farms, Ltd. c/o Lindsey Gentry 9304 York Avenue Lubbock, TX 79424	02/08/24	02/27/24 Return to sender.
Ferguson Marital Trust, u/w/o John Dickson Ferguson Jr. PO Box 489 Hamlin, TX 79520	02/08/24	02/15/24
Fleet Dickey Mineral Properties, LLC 5050 North 40th St., Ste. 280 Phoenix, AZ 85018	02/08/24	02/20/24
Fleet Family Mineral Properties, Inc. PO Box 8757 Spring, TX 77387-8757	02/08/24	02/29/24

**STATE OF NEW MEXICO
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NOTICE LETTER CHART

Frannifin Minerals, LLC PO Box 13128 Las Cruces, NM 88013	02/08/24	02/26/24
Fredricka H. Crain Trust c/o Travis Property Management PO Box 56429 Houston, TX 77256-6429	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/16/24 – Item in transit to next facility.
G&M Oil, LLC 5801 Highland Blvd. Midland, TX 79707-5032	02/08/24	02/15/24
GTR Investments, LLC 4536 Mill Run Rd Dallas, TX 75244	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/12/24 – Delivered to individual at the address.
Gallman, Tamara Terrell 6203 Lost Horizon Drive Austin, TX 78759	02/08/24	02/21/24
Gamble, Jolene Terrell 812 West Cochiti Avenue Hobbs, NM 88240-1106	02/08/24	02/15/24
Garnett, John B. 3505 FM 1058 Hereford, TX 79045-7443	02/08/24	02/14/24 No signature.
Guitar, Jane Ellen PO Box 2213 Abilene, TX 79604	02/08/24	02/21/24
Harle, Inc. 29555 NE Wilsonville Road Newberg, OR 97132	02/08/24	02/20/24
Heller, Melynda E. 405 E. 19th St. Monahans, TX 79756	02/08/24	02/15/24

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Helton, Janice S. 6520 Lake Forest Lane Sachse, TX 75048	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/27/24 – Item being returned to sender.
Higgs, David A. 11 Rivermist Lane Savannah, GA 31410-2524	02/08/24	02/16/24 No signature.
Holladay, Ben R. 5445 FM 1179 Bryan, TX 77808-7252	02/08/24	02/16/24
Holladay, Cathy S. 19714 Gable Woods Dr. Tomball, TX 77375	02/08/24	02/20/24
Holladay, Montie W. 18456 Widgeon Trail Drive College Station, TX 77845	02/08/24	02/20/24
Hoshi Kanri LLC Littleton, CO 80160 (address unknown)		
Howard H. Cone Trust "A", u/w/o Hubert E. Cone c/o Howard H. Cone, Trustee 1801 CR 289 Georgetown, TX 78628	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/15/24 – Item in transit to next facility.
Humphrey, Trevor Scott 2300 Lighthouse Drive New Braunfels, TX 78130	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/25/24 – Delivery attempted.
Jesse A. Cone Trust "A", u/w/o Hubert E. Cone c/o Jesse A. Cone, Trustee 5050 Clairemont Mesa Blvd, #4 San Diego, CA 92117-1434	02/08/24	02/20/24

**STATE OF NEW MEXICO
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NOTICE LETTER CHART

John Robert Cone Trust "A", u/w/o Hubert E. Cone 3601 Aransas Street Corpus Christi, TX 78411	02/08/24	03/01/24
Johnston, Mary Carolyn 667 Yosemite Drive Indianapolis, IN 40217	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/12/24 – Delivery attempted.
Jonathan S. Roderick Trust, dated 2/8/2007 PO Box 7961 Boulder, CO 80306	02/08/24	02/26/24
Katy Pipeline & Production Corp. 104 Audubon Lane Lufkin, TX 75904	02/08/24	02/16/24
Kennedy Minerals, Ltd. 223 West Wall Street, Suite 700 Midland, TX 79701-4695	02/08/24	02/16/24
Kettle Investment I LLC PO Box 51138 Midland, TX 79710	02/08/24	02/14/24
Kurt Frederick Oheim Trust Dtd January 1, 2017 6600 Wentworth Drive Amarillo, TX 79109	02/08/24	02/14/24
Lamoreaux, Kelly Renee 5075 East 52nd Street, Apt. B 203 Odessa, TX 79762-5186	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/17/24 – Item in transit to next facility.

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NOTICE LETTER CHART

Christa L. Leavell and husband, Gregory Leavell PO Box 470 Robinson, IL 62454	02/08/24	02/20/24
Leavell, Michelle C. PO Box 470 Robinson, IL 62454	02/08/24	02/20/24
The Long Trusts PO Box 3096 Kilgore, TX 75663	02/08/24	02/16/24
MMS Royalties, LLC PO Box 9622 Midland, TX 79708	02/08/24	02/16/24
MQH Investments 11 Marinor Court Midland, TX 79705	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/16/24 – Item in transit to next facility.
M.W. Oil Investment Company, Inc. PO Box 13128 Las Cruces, NM 88013	02/08/24	02/26/24
Management Trust f/b/o Megan Elizabeth Humphrey c/o John S. Humphrey, Sole Trustee 16 Moss Rock Rd New Braunfels, TX 78130	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/25/24 – Delivery attempted.
Martin, Stacy Lynn Terrell 45594 W. 231st St. S. Depew, OK 74028	02/08/24	02/15/24
Mary Cone Lewis Trust "A", u/w/o Hubert E. Cone c/o Mary Cone Lewis, Trustee 4501 Upland Avenue Lubbock, TX 79407-5107	02/08/24	02/14/24

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NOTICE LETTER CHART

McBride Oil and Gas Corporation PO Box 1515 Roswell, NM 88202-1515	02/08/24	02/14/24
McCarthy Oil & Gas, LLC 25807 Westheimer Pkwy, Ste 349 Katy, TX 77494	02/08/24	02/29/24
McCown, Cathie Cone PO Box 658 Dripping Springs, TX 78620	02/08/24	02/20/24
McCoy, Sandra P. 5127 FM 126 North Hamlin, TX 79520	02/08/24	02/15/24
Mekusukey Oil Company, LLC PO Box 816 Wewoka, OK 74884-0816	02/08/24	02/20/24
Melton, Shelly Shelton 4001 Siete Leguas El Paso, TX 79922	02/08/24	02/12/24
Misurek, Cheryl 8370 Hurakan Creek Crossing Cumming, GA 30028	02/08/24	02/21/24
Moeller, Gregory Aaron 11487 W. Water Birch Street Star, ID 83669	02/08/24	02/20/24
Moore, Joyce E. 3404 Springbranch Drive Richardson, TX 75082	02/08/24	02/20/24
Motowi, LLC PO Box 13128 Las Cruces, NM 88013	02/08/24	02/26/24
OGTEE Consultants LLC 2905 Sentinel Drive Midland, TX 79701	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/13/24 – Delivered to individual at the address.

**STATE OF NEW MEXICO
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LEA COUNTY, NEW MEXICO,**

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NOTICE LETTER CHART

George M. O'Brien & wife, Susan O'Brien PO Box 1743 Midland, TX 79702	02/08/24	02/16/24
Osborn Heirs Company, Ltd., d/b/a Osborn Heirs Company 1250 NE Interstate 410 Loop #1100 San Antonio, TX 78217	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/21/24 – Item returned to sender.
Oswald Family Trust, dtd 4/27/1998 PO Box 280969 Lakewood, CO 80228-0969	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/21/24 – Item picked up at post office.
Oswald III, Louis A. PO Box 280969 Lakewood, CO 80228-0969	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/21/24 – Item picked up at post office.
Patterson, Jean W. 312 East 6th Street Denver City, TX 79323	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/23/24 – Delivered to individual at the address.
Payne, Kenneth Lynn 6948 Zak Road Bryan, TX 77808	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/15/24 – Item in transit to next facility.
PetroVen Inc. Quorum Place 14901 Quorum Drive, Suite 850 Dallas, TX 75254	02/08/24	02/20/24

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NOTICE LETTER CHART

Phipps, Lynda B. 902 South Leon Ave. Monahans, TX 79756	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/15/24 – Item in transit to next facility.
Piani, Shanna Ebers 2031 Miramar Drive Newport Beach, CA 92661	02/08/24	02/20/24 No signature.
Progeny Petroleum LLC PO Box 30864 Santa Barbara, CA 93130	02/08/24	02/26/24
Pumpkin Buttes, LLC PO Box 1989 Casper, WY 82602	02/08/24	02/15/24
RRA Minerals LLC 2214 Toll Gate Road Huntsville, AL 35801-1833	02/08/24	02/20/24
Ralston, Mitzi Carolyn Terrell 23260 S. 449th W. Ave. Depew, OK 74028	02/08/24	02/15/24
Randall, Joan 4603 Park Stone Bryan, TX 77802	02/08/24	02/20/24
Robert Edward Eckels Jr. LLC PO Box 1093 Cedaredge, CO 81413	02/08/24	02/15/24
Rock House Resources, LLC 316 Bailey Avenue, Suite 113 Fort Worth, TX 76107	02/08/24	02/20/24
Rogers, Alyssa Nicole 4303 Dawn Circle Midland, TX 79707	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/12/24 – Delivered to individual at the address.

**STATE OF NEW MEXICO
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NOTICE LETTER CHART

Root Family Holdings, LLC PO Box 403 Rosemount, MN 55068-0403	02/08/24	02/26/24
Ross Family Trust, dated 3/9/1990 PO Box 86 Midland, TX 79702	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/28/24 – Item being returned to sender.
Russell N. McInturff Trust PO Box 6618 Lubbock, TX 79493-6618	02/08/24	02/16/24
Salinas, Brandie 8225 Leopard Street, Lot 122 Corpus Christi, TX 78409	02/08/24	03/01/24
Solis Resources Ltd. PO Box 51451 Midland, TX 79710-1451	02/08/24	02/16/24
Spradlin, Charles Andrew 304 Summit Ridge Dr. Glen Rose, TX 76043	02/08/24	02/20/24
Stephenson, Kerry Jo 7110 Echo Pines Drive Humble, TX 77346	02/08/24	02/15/24
Steven J. Terrell & Associates, Inc. 23907 Sunset Sky Katy, TX 77494	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/15/24 – Item in transit to next facility.
Sugarberry Minerals LP 5950 Cedar Springs Rd Ste 200 Dallas, TX 75235	02/08/24	02/20/24
Terra Nova Energy, LP 242 Spring Park Drive, Suite C Midland, TX 79705	02/08/24	02/14/24

**STATE OF NEW MEXICO
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LEA COUNTY, NEW MEXICO,**

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NOTICE LETTER CHART

Terrell, Britton Andrew 7203 Sungate Drive Austin, TX 78731	02/08/24	02/16/24
Terrell, Charles Ray 2205 East 12 St. Odessa, TX 79761	02/08/24	02/15/24 Return to sender.
Terrell, David Allen 2310 Bahama Road Austin, TX 78733	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/12/24 – Delivery attempted.
Terrell, Gary T. 8727 Sea Ash Circle Round Rock, TX 78681	02/08/24	02/16/24
Terrell, James Michael 3912 113th Street Lubbock, TX 79423	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/28/24 – Item in transit to the destination.
Terrell III, Jennings Bryan 13680 East Camino La Cebadilla Tuscon, AZ 85749	02/08/24	02/20/24
Terrell, Ky J. 13407 Wisterwood Street Austin, TX 78729	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/14/24 – Delivered to individual at the address.
Terrell, Larry Dale PO Box 690 Lexington, TX 78947-0690	02/08/24	02/20/24
Terrell, Ralph Douglas 710 Golf Course Road Hamlin, TX 79520	02/08/24	02/20/24
Terrell, Robert Drake 4119 Gairloch Lane Houston, TX 77025-2911	02/08/24	02/20/24

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NOTICE LETTER CHART

Terry A. Cone Trust "A", u/w/o Hubert E. Cone c/o Terry A. Cone, Trustee 991 Old Smith Road Fortson, GA 31808	02/08/24	02/21/24
Terry G. McInturff Trust PO Box 6618 Lubbock, TX 79493-6618	02/08/24	02/20/24
Tipps, Stephen G. 2115 Kingston Street Houston, TX 77019	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/12/24 – No access to delivery location.
Toles-Com-Ltd. LLC c/o Perry Toles PO Box 1300 Roswell, NM 88202-1300	02/08/24	02/14/24
W.B. Osborn Oil and Gas Operations 1250 NE Loop 410, Suite 600 San Antonio, TX 78209	02/08/24	02/26/24
Whittington, Judith Hunt 2605 Oak Point Drive Garland, TX 75044	02/08/24	02/15/24
William N. Heiss Profit Sharing Plan PO Box 2680 Casper, WY 82607	02/08/24	02/20/24
Williams Trust, dated 4/10/1996, f/b/o MMP PO Box 3499 Tulsa, OK 74101	02/08/24	02/20/24
Williams, Danny R. PO Box 104 Denver City, TX 79323	02/08/24	02/14/24
Williams, George H. 4249 Bayouside Drive Houma, LA 70363	02/08/24	02/21/24

**STATE OF NEW MEXICO
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NOTICE LETTER CHART

Kay Elkins Bingham Williams P.O. Box 178 Matador, TX 79244-0178	02/08/24	02/16/24
Williams Jr., Kenneth D. 8322 Brixton San Antonio, TX 78254	02/08/24	02/23/24
Kolby Williams 2531 FM 602 Floydada, TX 79235	02/08/24	02/14/24
Williams, Larry D. PO Box 178 Matador, TX 79244	02/08/24	02/20/24
Williams, Malcham Eli 3355 Jonathan Lane Early, TX 76802	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/28/24 – Item being returned to sender.
Williams, Mark Eric 321 W. Autumn Creek Dr. Saratoga Springs, UT 84045	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/12/24 – Item available for pick up.
Williams, Matthew Elias 702 S Avenue F Knox City, TX 79529-2106	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/26/24 – Individual picked up at post office.
Williams, Myranda Eve 508 Cortes St. Krugerville, TX 76227	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/13/24 – Delivery attempted.
Williams, Patsy Irene 406 S. Pine St. Ponca City, OK 74601	02/08/24	02/20/24

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NOTICE LETTER CHART

Williams, Raymond B. 721 Oak Lane Grapevine, TX 76051-2974	02/08/24	02/20/24
Williams, Stella Evelyn 804 S.E. Avenue G, Unit A Seminole, TX 79360-5194	02/08/24	02/15/24
Williams, Steven B. 109 Summerland Dr. Buchanan Dam, TX 78609	02/08/24	02/15/24
Wood, Kimberly Ann 13204 Springcreek Court Oklahoma City, OK 73170	02/08/24	02/15/24
Wytex Oil Company PO Box 280969 Lakewood, CO 80228-0969	02/08/24	Per USPS Tracking (Last Checked 02/29/24): 02/21/24 – Item picked up at post office.

9589 0710 5270 0752 4615 76

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Street an. A&P Family Limited Partnership

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City, State Eunice, NM 88231-1046

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <i>Luann H Pearson</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Luann H Pearson</i> C. Date of Delivery <i>2-26-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>RECEIVED</p> <p>FEB 26 2024</p>
<p>1. Article Addressed to:</p> <p>A&P Family Limited Partnership PO Box 1046 Eunice, NM 88231-1046</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8561 3186 6095 79</p>	<p>3. Service Type <i>Hinkle Shanor</i> <input checked="" type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <input checked="" type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4615 76</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

Steward Energy II, LLC
Case No. 24169
Exhibit C-3

9589 0710 5270 0752 4615 83

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 Agel, Ronald C.
 35 Shore Road
 West Harwich, MA 02671

City, State, ZIP 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Agel, Ronald C.
 35 Shore Road
 West Harwich, MA 02671
 24169 - Steward Pest Control

2. Article Number (Transfer from service label)
 9589 0710 5270 0752 4615 83

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 2/14/2024

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

RECEIVED
 FEB 20 2024

3. Service Type

Adult Signature Hinkle Shanor LLP Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Santa Fe NM 87501 Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0752 4615 90

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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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

Street and Apt. Allen, Wanda Merlene
845 CR 211

City, State, ZIP+4® Rotan, TX 79546

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>X Wanda Merlene Allen</i></p> <p>B. Received by (Printed Name) <i>WANDA MERLENE ALLEN</i></p> <p>C. Date of Delivery <i>2/12/24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p> <p>RECEIVED FEB 15 2024</p>
<p>1. Article Addressed to:</p> <p>Allen, Wanda Merlene 845 CR 211 Rotan, TX 79546</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8721 58</p>	<p>3. Service Type <i>Hinkle Shanor LP</i></p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4615 90</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4615 07

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$



Sent To

Street and Apt. Andrews, Mark Lane
2000 Doran Road
Lima, NY 14485

City, State, ZIP 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Andrews, Mark Lane
2000 Doran Road
Lima, NY 14485

24169 - Steward Pest Control



9590 9402 8560 3186 8721 72

2. Article Number (Transfer from service label)

9589 0710 5270 0752 4615 07

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Mark Andrews

B. Received by (Printed Name) C. Date of Delivery
MARK ANDREWS *2/15/24*

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

RECEIVED
FEB 23 2024

3. Service Type *Hinkle Shanor LLP*
Santa Fe NM 87501

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

Domestic Return Receipt

9589 0710 5270 0752 4615 14



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OFFICIAL USE

Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To	
Street and A	Andrews, Matt Lynn 110 Tally St Brady, TX 76825
City, State, Z	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/>  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>1. Article Addressed to:</p> <p style="text-align: center;">Andrews, Matt Lynn 110 Tally St Brady, TX 76825</p> <p style="text-align: right;">24169 - Steward Pest Control</p>	<p style="text-align: center;">RECEIVED</p> <p style="text-align: center;">FEB 15 2024</p>																
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4615 14</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table> <p style="text-align: center;">  </p>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt																

9589 0710 5270 0752 4615 21

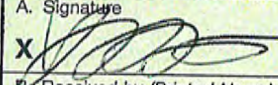

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OFFICIAL USE

Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To	
Street and Apt	Antweil, Barry 12610 Stillwood Park Court Cypress, TX 77433-1284
City, State, Zi	Cypress, TX 77433-1284 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7930-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/>  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Antweil, Barry 12610 Stillwood Park Court Cypress, TX 77433-1284</p> <p>24169 - Steward Pest Control</p>  <p>9590 9402 8560 3186 8721 96</p>	<p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED</p> <p>FEB 26 2024</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4615 21</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt

9589 0710 5270 0752 4615 38

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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. Antweil, Mark
 4450 Oak Park Lane #101842
 Fort Worth, TX 76185

City, State, Z. 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1 Article Addressed to:</p> <p>Antweil, Mark 4450 Oak Park Lane #101842 Fort Worth, TX 76185</p> <p>24169 - Steward Pest Control</p>	<p>RECEIVED <i>M</i> / FEB 16 2024</p>
<p>2 Barcode: 9590 9402 8560 3186 8722 02</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>9589 0710 5270 0752 4615 38</p>	<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>

9589 0710 5270 0752 4614 46

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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 No. Antweil, Mary Frances
 5410 Ledgestone Drive
 Fort Worth, TX 76132-2345

City, State, Z. 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-0047 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:

Antweil, Mary Frances
 5410 Ledgestone Drive
 Fort Worth, TX 76132-2345
 24169 - Steward Pest Control

2. Article Number (Transfer from service label)
 9589 0710 5270 0752 4614 46

3. Service Type (Data Fe NM B7504)

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Signature Confirmation

Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Julie A Silverman*

Agent

Addressee

B. Received by (Printed Name) *Julie A Silverman*

C. Date of Delivery

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

RECEIVED

MAR 01 2024

Steward Pest Control LLC

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

9589 0710 5270 0752 4614 53

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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
Apilado Resources, LLC
Street and 3839 McKinney Ave Ste 155-257
Dallas, TX 75204
City, State, ... 24169 - Steward Pest Control



PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature X <i>[Signature]</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) OSD C/90</p> <p>C. Date of Delivery 2/15/24</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>Addressed to: Apilado Resources, LLC 3839 McKinney Ave Ste 155-257 Dallas, TX 75204 24169 - Steward Pest Control</p>	<p>3. Service Type Hinkle Shanor LLP <input type="checkbox"/> Adult Signature Santa Fe NM 87505 <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>9590 9402 8560 3186 8722 26</p> <p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4614 53</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

9589 0710 5270 0752 4614 60

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	
Street and Apt.	Ashton, Alisa Williams PO Box 463
City, State, ZIP+4	Andrews, TX 79714 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Brent Hays</i></p> <p>C. Date of Delivery <i>FEB 23 2024</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter deliver address below <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Ashton, Alisa Williams PO Box 463 Andrews, TX 79714 24169 - Steward Pest Control</p>	<p>RECEIVED FEB 23 2024 USPS ANDREWS, TEXAS 79701</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4614 60</p>	<p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><i>Hinkle Shanor LLP</i> Santa Fe NM 87504</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4614 77

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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. B. Davis Gentry GST Trust
 c/o Prosperity Bank, Trustee
 1401 Avenue Q

City, State, ZIP+4® Lubbock, TX 79401
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery <u>2/12/24</u></p>	
<p>1. Article Addressed to:</p> <p>B. Davis Gentry GST Trust c/o Prosperity Bank, Trustee 1401 Avenue Q Lubbock, TX 79401 24169 - Steward Pest Control</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below: _____</p> <p>RECEIVED</p> <p>FEB 14 2024</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4614 77</p>	<p>3. Service Type <input checked="" type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p>Hinkle Shanor Santa Fe, NM 87501</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt	

9589 0710 5270 0752 4614 39

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$

Sent To
 Street and BMD Exploration, LLC
 33 Yale Street
 City, State Williston Park, NY 11596
 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

BMD Exploration, LLC
 33 Yale Street
 Williston Park, NY 11596
 24169 - Steward Pest Control

2. Article Number (Transfer from service label)
 9589 0710 5270 0752 4614 39

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

RECEIVED
 FEB 20 2024

3. Service Type **Hinkle Shanon LLP**
 Adult Signature **Santa Fe NM 87504** Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Signature Confirmation™
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery Restricted Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

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

9589 0710 5270 0752 4614 84

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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., William C. Bahlburg
 PO Box 560430
 City, State, ZIP+4® The Colony, TX 75056-0430
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Alyssa Harvey</u></p> <p>C. Date of Delivery <u>2-15-2024</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED FEB 15 2024</p>
<p>1</p> <p>William C. Bahlburg PO Box 560430 The Colony, TX 75056-0430 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8722 57</p>	<p>3. Service Type <u>Hinkie Shanor LLP</u> <input type="checkbox"/> Priority Mail Express® <u>Santa Fe NM 87501</u> <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2 Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4614 84</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4614 08

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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. Barrett Oklahoma Interests, Ltd. _____

PO Box 171190 _____

San Antonio, TX 78217 _____

City, State, Z 24169 - Steward Pest Control _____

PS Form 3800, January 2023 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:

Barrett Oklahoma Interests, Ltd.
 PO Box 171190
 San Antonio, TX 78217
 24169 - Steward Pest Control

9590 9402 8560 3186 8722 64

2. Article Number (Transfer from service label)
 9589 0710 5270 0752 4614 08

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Clerk

[Signature]

B. Received by (Printed Name) *Dee L A / 01*

C. Date of Delivery *2-20-24*

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

RECEIVED
 FEB 23 2024

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Hinkle Shanor LLP
 Santa Fe, NM 87504

Domestic Return Receipt

9589 0710 5270 0752 4614 15

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
Blackburn, Cynthia H.
Street and Ap: 23811 Wispy Way
City, State, Zi: Katy, TX 77494

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> [Signature] <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery 2-13</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p> <p>RECEIVED FEB 21 2024</p>
<p>1. Article Addressed to:</p> <p>Blackburn, Cynthia H. 23811 Wispy Way Katy, TX 77494</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8722 71</p>	<p>3. Service Type Hinkle Shanor LLE <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input checked="" type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4614 15</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4614 22

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OFFICIAL USE

Certified Mail Fee \$ _____

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

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

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and Apt. Blasco, LLC
6235 Savannah Way

City, State, ZIP Colorado Springs, CO 80919

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery <u>2-15-24</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below.</p>
<p>1. Article Addressed to:</p> <p>Blasco, LLC 6235 Savannah Way Colorado Springs, CO 80919 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8722 88</p>	<p>RECEIVED FEB 26 2024</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4614 22</p>	<p>3. Service Type <u>Winkie Shanon LLC</u> <input type="checkbox"/> Adult Signature <u>Santa Fe NM 87501</u> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>

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

9589 0710 5270 0752 4613 78

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OFFICIAL USE

Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To	
Street and Apt.	Bowerman, Jan Cone 4354 Middleton Road
City, State, ZIP	Dallas, TX 75229 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery 2/12/24</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center; font-size: 1.2em;">Bowerman, Jan Cone 4354 Middleton Road Dallas, TX 75229</p> <p style="text-align: center; font-size: 0.8em;">24169 - Steward Pest Control</p>	<div style="font-size: 2em; font-weight: bold; border: 2px solid black; padding: 5px; display: inline-block;">RECEIVED</div> <div style="font-size: 1.2em; font-weight: bold; border: 1px solid black; padding: 2px; display: inline-block;">FEB 15 2024</div>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4613 78</p>	<p>3. Service Type Hinkle Shanor LLP Santa Fe NM 87501</p> <p> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) </p> <p> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery </p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0752 4613 85

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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. # Bud & Mary Lou Flocchini Family LP
 1330 Capital Boulevard
 City, State, ZIP+4 Reno, NV 89502

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Lou Cooper</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery 2/14</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Bud & Mary Lou Flocchini Family LP 1330 Capital Boulevard Reno, NV 89502</p> <p>24169 - Steward Pest Control</p>	<p>RECEIVED FEB 21 2024</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4613 85</p>	<p>3. Service Type Hinkle Shanor LP</p> <p><input type="checkbox"/> Adult Signature Santa Fe NM 87508 <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0752 4613 30

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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. C.R. Hutcheson 1967 Trust
 901 Tradewinds Blvd., Suite B
 City, State, ZIP Midland, TX 79706

24169 - Steward Pest Control

PS Form 3800, January 2023 RSN 7530-02-000-9047 - See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>
<p>1. Article Addressed to:</p> <p>C.R. Hutcheson 1967 Trust 901 Tradewinds Blvd., Suite B Midland, TX 79706</p> <p>24169 - Steward Pest Control</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED</p> <p>FEB 14 2024</p> <p>(Hinkle Shanor LLP)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4613 30</p>	<p>3. Service Type Santa Fe NM 87504</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>

9589 0710 5270 0752 4613 47

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$

Sent To
 Street and Apt. # Caldwell, Mark M.
 3512 A Shell Ave.
 City, State, ZIP+4 Midland, TX 79707
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-8047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) C. Date of Delivery	
1. Article Addressed to: Caldwell, Mark M. 3512 A Shell Ave. Midland, TX 79707 24169 - Steward Pest Control		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No <h1>RECEIVED</h1> FEB 15 2024	
2. Article Number (Transfer from carrier label) 9589 0710 5270 0752 4613 47		3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
Barcode: 9590 9402 8560 3186 8723 49		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	

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

9589 0710 5270 0752 4613 54

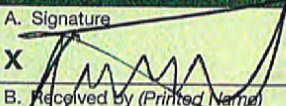
U.S. Postal Service
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OFFICIAL USE

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 \$	
Sent To	
Street and Apt.	Chalfant Family Partnership, LP
	PO Box 3123
City, State, ZIP	Midland, TX 79702
	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/>  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;">RECEIVED FEB 20 2024</p>
<p>1. Article Addressed to:</p> <p>Chalfant Family Partnership, LP PO Box 3123 Midland, TX 79702</p> <p style="text-align: right;">24169 - Steward Pest Control</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4613 54</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery</p> <p>Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) <input type="checkbox"/></p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0725 3438 23


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OFFICIAL USE

Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To	
Street and Apt. #	Chatfield Company 325 West 93rd Street #3B
City, State, ZIP+4	New York, NY 10025 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p>	
<p>1. Article Addressed to:</p> <p>Chatfield Company 325 West 93rd Street #3B New York, NY 10025 24169 - Steward Pest Control</p>  <p>9590 9402 8560 3186 8723 70</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED FEB 21 2024</p>	
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0725 3438 23</p>		<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p>Hinkle Shanor LPA Sarah Pelton 87508</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

9589 0710 5270 0725 3438 47

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 City, State _____
 Citadel Oil & Gas Corporation
 PO Box 27527
 Denver, CO 80227
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 - See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Deborah S. Izquierdo</i></p> <p>C. Date of Delivery <i>2/12/24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;">RECEIVED FEB 20 2024</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Citadel Oil & Gas Corporation PO Box 27527 Denver, CO 80227 24169 - Steward Pest Control</p> <p style="text-align: center;">9590 9402 8560 3186 8723 94</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0725 3438 47</p>	

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

9589 0710 5270 0725 3438 54

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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. Cone Jr., James Raymond
 PO Box 10217
 Lubbock, TX 79406

City, State, ZIP+4 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>J.M. Cone</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>J.M. Cone</i> C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Cone Jr., James Raymond PO Box 10217 Lubbock, TX 79406</p> <p>24169 - Steward Pest Control</p>	<p>RECEIVED FEB 14 2024 SANTA FE NM 87504</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0725 3438 54</p>	<p>3. Service Type Hinkle Shanor LLP <input type="checkbox"/> Adult Signature Santa Fe NM 87504 <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0725 3438 61

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

OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$


Sent To

Street and Apt
 Cone, Kenneth G.
 PO Box 507
 Dripping Springs, TX 78620

City, State, Z
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Teresa Quick</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Teresa Quick</i></p> <p>C. Date of Delivery <i>2/15/24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;">RECEIVED FEB 20 2024</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Cone, Kenneth G. PO Box 507 Dripping Springs, TX 78620 24169 - Steward Pest Control</p> <p style="text-align: center;">  9590 9402 8560 3186 8724 17</p>	<p>3. Service Type <i>Hinkle Shanor LLC</i> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <i>Santa Fe NM 87501</i> <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0725 3438 61</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0725 3439 22

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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 Cone, Thomas R.
 PO Box 400
 Southwest City, MO 64863

City, State, ZIP 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Cone, Thomas R.
 PO Box 400
 Southwest City, MO 64863
 24169 - Steward Pest Control

2. Article Number (Transfer from service label)
 9589 0710 5270 0725 3439 22

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Sue Cone Agent Addressee

B. Received by (Printed Name)
 SUE CONE

C. Date of Delivery
 2/15/24

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

RECEIVED
 FEB 20 2024

3. Service Type **Hinkle Shanor NP** Priority Mail Express®
Santa Fe NM 87505 Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Delivery
 Certified Mail Restricted Delivery Signature Confirmation™
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0725 3439 39

U.S. Postal Service
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 Domestic Mail Only

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OFFICIAL RECEIPT

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To
 Street and Apt. Copperhead Resources, LLC
 PO Box 8355
 Midland, TX 79708
 City, State, ZIP+4 24169 - Steward Post Control

PS Form 3800, January 2023 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:

Copperhead Resources, LLC
 PO Box 8355
 Midland, TX 79708
 24169 - Steward Post Control

9590 9402 8560 3186 8724 31

2. Article Number (Transfer from service label)
 9589 0710 5270 0725 3439 39

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *Matthew Darn*

C. Date of Delivery *FEB 21 10/24*

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

RECEIVED
 FEB 26 2024

3. Service Type *Hinkle Shanor LLP Santa Fe NM 87508*
- Adult Signature Priority Mail Express®
- Adult Signature Restricted Delivery Registered Mail™
- Certified Mail® Registered Mail Restricted Delivery
- Certified Mail Restricted Delivery Signature Confirmation™
- Collect on Delivery Signature Confirmation Restricted Delivery
- Collect on Delivery Restricted Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)

9589 0710 5270 0725 3439 77

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street: Davidson, Ruthanne
 4115 Pinehurst Drive
 City, St: Amarillo, TX 79109
 24169 - Steward Pest Control

Postmark Here

PS Form 3800, January 2023 PSN 7530-02-000-0047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Ruthanne Davidson</u></p> <p>C. Date of Delivery <u>FEB 15 2024</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Davidson, Ruthanne 4115 Pinehurst Drive Amarillo, TX 79109 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8724 79</p>	<p>3. Service Type <u>Hinkle Shanor LLC</u> <u>Santa Fe NM 87505</u></p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0725 3439 77</p>	<p>RECEIVED FEB 15 2024</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0725 3439 84

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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
 City, State, ZIP+4

Kortney Williams DeBock
 2581 FM 28
 Floydada, TX 79235
 24169 - Steward Post Control



PS Form 3800, January 2023 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:

Kortney Williams DeBock
 2581 FM 28
 Floydada, TX 79235
 24169 - Steward Post Control



2 Article Number (Optional)

9589 0710 5270 0725 3439 84

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X

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: _____

RECEIVED

FEB 15 2024

3. Service Type Hinkle Shanor LLP Priority Mail Express®

Adult Signature Santa Fe NM 87501 Registered Mail™

Adult Signature Restricted Delivery Registered Mail Restricted Delivery

Certified Mail® Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

9589 0710 5270 0725 3439 15

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

Street and City, State: **Dorchester Minerals, L.P.**
3838 Oak Lawn Ave., Suite 300
Dallas, TX 75219-4541

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-09-000-9047 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:

Dorchester Minerals, L.P.
3838 Oak Lawn Ave., Suite 300
Dallas, TX 75219-4541

24169 - Steward Pest Control

2. Article Number (Transfer from sender label)

9589 0710 5270 0725 3439 15

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

Christine Ferguson

B. Received by (Printed Name) _____

C. Date of Delivery **2/12/2024**

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

RECEIVED
FEB 20 2024

3. Service Type

Adult Signature **Hinkle Shanor** Priority Mail Express®

Adult Signature Restricted Delivery **Santa Fe NM 87504** Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail (over \$500)

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0725 3438 09

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

Sent To

Street and A1 Dotson-Ice, Jan C.
 PO Box 7366
 Covington, WA 98042

City, State, Z 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-8047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>1. Article Addressed to:</p> <p>Dotson-Ice, Jan C. PO Box 7366 Covington, WA 98042 24169 - Steward Pest Control</p>		<p>RECEIVED FEB 26 2024</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0725 3438 09</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

9589 0710 5270 0725 3438 16

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

OFFICIAL USE

Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	\$ _____
Total Postage and Fees	\$ _____

Sent To

Street: Downing, William Terrell
 2607 Hodges Street
 City, State, ZIP+4: Midland, TX 79705
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>Cathryn Downing</i></p> <p>B. Received by (Printed Name) <i>Cathryn Downing</i> C. Date of Delivery <i>2/12/24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>1. Article Addressed to:</p> <p>Downing, William Terrell 2607 Hodges Street Midland, TX 79705</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8721 41</p>	<p>RECEIVED</p> <p><i>Cathryn Downing</i></p> <p>FEB 15 2024</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0725 3438 16</p>	<p>3. Service Type <i>Hinkle Shano Santa Fe, NM 87401</i></p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt

9589 0710 5270 0752 4591 22

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

OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$

Sent To: Edward T. Dreessen, Jr. & Kathleen G.
 Dreessen Living Trust, dated 6/13/2014
 PO Box 1390
 Grants Pass, OR 97528
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047. See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>K. DREESSEN</i></p> <p>C. Date of Delivery <i>FEB 20 2024</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Edward T. Dreessen, Jr. & Kathleen G. Dreessen Living Trust, dated 6/13/2014 PO Box 1390 Grants Pass, OR 97528 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8737 04</p>	<p>3. Service Type <i>Hinkle Sharor LLP</i> <input type="checkbox"/> Adult Signature <i>Santa Fe NM 87501</i> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4591 22</p>	<p>RECEIVED FEB 20 2024 SANTA FE NM 87501 GRANTS PASS OR 97528 FEB 15 2024</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4591 39

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OFFICIAL USE

Certified Mail Fee
\$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage
\$ _____


Total Postage and Fees
\$ _____

Sent To
 Street and Apt. No., or PO Box No. Drew R. Scott Family Minerals, LLC
 PO Box 9143
 City, State, ZIP+4® Midland, TX 79708

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Drew Scott</i></p> <p>C. Date of Delivery <i>2/23/24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p> <p style="text-align: center;">RECEIVED FEB 26 2024</p>
<p>1. Article Addressed to:</p> <p>Drew R. Scott Family Minerals, LLC PO Box 9143 Midland, TX 79708</p> <p style="text-align: right;">24169 - Steward Pest Control</p>  <p>9590 9402 8560 3186 8737 42</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <i>Hinkle Shanor LLP</i></p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <i>Santa Fe, NM 87501</i></p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4591 39</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0752 4591 15

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OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and Apt. No., or PO Box No. _____ Eckels, Christopher R.F. _____

City, State, ZIP+4® _____ PO Box 30 _____

_____ Cedaredge, CO 81413 _____

_____ 24169 - Steward Pest Control _____

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>Eckels</i></p> <p>B. Received by (Printed Name) <input type="checkbox"/> Date of Delivery</p> <p><i>Eckels</i> <i>2-12-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below.</p>
<p>1. Article Addressed to:</p> <p>Eckels, Christopher R.F. PO Box 30 Cedaredge, CO 81413</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8736 81</p>	<p>RECEIVED</p> <p>FEB 15 2024</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4591 15</p>	<p>3. Service Type <i>Mike Sharor LLP</i></p> <p><input type="checkbox"/> Adult Signature <i>Santa Fe NM 87501</i> <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0752 4591 53

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Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Apt. No., or PO Box No. Elizabeth Jane Kay Family Trust PO Box 9602

City, State, ZIP+4® Colorado Springs, CO 80932

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p><i>[Signature]</i></p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____</p>
<p>1. Article Addressed to:</p> <p>Elizabeth Jane Kay Family Trust PO Box 9602 Colorado Springs, CO 80932</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8737 11</p>	<p>RECEIVED FEB 14 2024 Santa Fe NM 87504</p> <p>Hinda Shanor LLP</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4591 53</p>	<p>3. Service Type Santa Fe NM 87504</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4591 60

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OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and Apt. No., or PO Box No. _____ Elk Range Royalties, LP
 2110 Farrington Street
 Dallas, TX 75207

City, State, ZIP+4® _____ 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Elk Range Royalties, LP
 2110 Farrington Street
 Dallas, TX 75207

24169 - Steward Pest Control



9590 9402 8560 3186 8737 28

2. Article Number (Transfer from service label)
 9589 0710 5270 0752 4591 60

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

RECEIVED

FEB 15 2024

Hinkle Shanor LLP
 Santa Fe NM 87504

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0752 4590 54

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	
Street and Apt. No., or PO Box No.	FFF, Inc. PO Box 20129 Sarasota, FL 34276
City, State, ZIP+4®	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Maria Hannifin</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Maria Hannifin</i></p> <p>C. Date of Delivery <i>2.12.24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED FEB 20 2024</p>
<p>1. Article Addressed to:</p> <p>FFF, Inc. PO Box 20129 Sarasota, FL 34276 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8736 74</p>	<p>3. Service Type <i>Prinkie Chanor LLP</i> <input type="checkbox"/> Adult Signature <input type="checkbox"/> First-Class Mail® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4590 54</p>	

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

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OFFICIAL USE

Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and Apt. No., or PO Box No. _____ Fall River Resources, Inc. PO Box 13456 City, State, ZIP+4® _____ Denver, CO 80201 24169 - Steward Pest Control	

PS Form 3800, January 2023 PSN 7530-02-000-9047. See Reverse for Instructions

9589 0710 5270 0752 4591 91

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Robert Desmond</i></p> <p>C. Date of Delivery <i>2/12/2022</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>																
<p>1. Article Addressed to:</p> <div style="text-align: center; padding: 10px;"> <p>Fall River Resources, Inc. PO Box 13456 Denver, CO 80201</p> <p style="font-size: 0.8em;">24169 - Steward Pest Control</p>  <p style="font-size: 1.2em; font-weight: bold;">9590 9402 8560 3186 8737 73</p> </div>	<div style="text-align: center; padding: 10px;"> <p style="font-size: 2em; font-weight: bold; color: green;">RECEIVED</p> <p style="font-size: 1.5em; color: green;">FEB 14 2024</p> </div>																
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">9589 0710 5270 0752 4591 91</p>	<p>3. Service Type</p> <table style="width: 100%; font-size: 0.8em;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	

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

9589 0710 5270 0752 4592 07


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Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To	
Street and Apt. No., or PO Box No.	Ferguson Marital Trust, u/w/o John Dickson Ferguson Jr. PO Box 489 Hamlin, TX 79520 24169 - Steward Pest Control
City, State, ZIP+4®	

PS Form 3800, January 2023 PSN 7580-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Elizabeth H...</i></p> <p>C. Date of Delivery <i>2-12-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;">RECEIVED FEB 15 2024</p>
<p>1. Article Addressed to:</p> <p>Ferguson Marital Trust, u/w/o John Dickson Ferguson Jr. PO Box 489 Hamlin, TX 79520 24169 - Steward Pest Control</p> <p> 9590 9402 8560 3186 8737 35</p>	<p>3. Service Type <i>Hinkle Sharon LLP</i> <input type="checkbox"/> Adult Signature <i>Santa Fe NM 87501</i> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label) 589 0710 5270 0752 4592 07</p> <p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0752 4590 16

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OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and Apt. No., or PO Box No. Fleet Dickey Mineral Properties, LLC
 5050 North 40th St., Ste. 280

City, State, ZIP+4® Phoenix, AZ 85018 24169 – Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature</p> <p>X </p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p>Fleet Dickey Mineral Properties, LLC 5050 North 40th St., Ste. 280 Phoenix, AZ 85018</p> <p>24169 – Steward Pest Control</p>	<p>B. Received by (Printed Name) Amy Rukstales</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED FEB 20 2024</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4590 16</p>	<p>3. Service Type Hinkle Shanor LLC Priority Mail Express®</p> <p>Santa Fe NM 87501 Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>

9589 0710 5270 0752 4590 30

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OFFICIAL U.S. MAIL

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$



Sent To

Street and Apt. No., or PO Box No. Fleet Family Mineral Properties, Inc.
PO Box 8757

City, State, ZIP+4® Spring, TX 77387-8757

24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Fleet Family Mineral Properties, Inc.
PO Box 8757
Spring, TX 77387-8757

24169 - Steward Pest Control



9590 9402 8560 3186 8736 05

2. Article Number (Transfer from service label)

9589 0710 5270 0752 4590 30

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X

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

John Fleet 2/8/24

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

If YES, enter delivery address below:

RECEIVED

FEB 9 2024

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0752 4590 47

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. Frannifin Minerals, LLC
PO Box 13128

City, State, ZIP+4® Las Cruces, NM 88013
24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Frannifin Minerals, LLC
PO Box 13128
Las Cruces, NM 88013

24169 - Steward Pest Control



9590 9402 8560 3186 8736 36

2. Article Number (Transfer from service label)

9589 0710 5270 0752 4590 47

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

[Signature]

B. Received by (Printed Name) *FRAN HAMM*

C. Date of Delivery

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



3. Service Type *Frannifin Minerals, LLC*

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0752 4590 78

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	
Street and Apt. No., or PO Box No.	G&M Oil, LLC 5801 Highland Blvd. Midland, TX 79707-5032
City, State, ZIP+4®	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-6047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>George J. Ulmo</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>George J. Ulmo</i></p> <p>C. Date of Delivery RECEIVED FEB 15 2024 <i>Hinkle Shanor LLP</i></p>																
<p>1. Article Addressed to:</p> <p style="text-align: center;">G&M Oil, LLC 5801 Highland Blvd. Midland, TX 79707-5032</p> <p style="text-align: right; font-size: small;">24169 - Steward Pest Control</p>  <p style="text-align: center;">9590 9402 8560 3186 8735 99</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>2. Article Number (Transfer from service label) 589 0710 5270 0752 4590 78</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt																

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OFFICIAL USE

9589 0710 5270 0752 4590 85

Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and Apt. No., or PO Box No. _____ City, State, ZIP+4® _____	
Gallman, Tamara Terrell 6203 Lost Horizon Drive Austin, TX 78759 24169 - Steward Pest Control	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery 2-14-24</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>1. Article Addressed to:</p> <p style="text-align: center; font-size: 1.2em;">Gallman, Tamara Terrell 6203 Lost Horizon Drive Austin, TX 78759</p> <p style="text-align: right; font-size: 0.8em;">24169 - Steward Pest Control</p>	<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">RECEIVED</div> <div style="font-size: 1.5em;">FEB 21 2024</div>																
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">9589 9402 8560 3186 8736 29</p>	<p>3. Service Type</p> <table style="width: 100%; font-size: 0.8em;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
<p style="font-size: 1.2em; font-weight: bold;">9589 0710 5270 0752 4590 85</p> <p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>																	

9589 0710 5270 0752 4590 92

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

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

City, State, ZIP+4® _____

Gamble, Jolene Terrell
812 West Cochiti Avenue
Hobbs, NM 88240-1106
24169 - Steward Pest Control



PS Form 3800, January 2023 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:

Gamble, Jolene Terrell
812 West Cochiti Avenue
Hobbs, NM 88240-1106
24169 - Steward Pest Control



9590 9402 8560 3186 8736 43

2. Article Number (Transfer from service label)
9589 0710 5270 0752 4590 92

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X *David N. Potter*

B. Received by (Printed Name) *David N. Potter*

C. Date of Delivery *2/12/24*

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

RECEIVED

FEB 15 2024

3. Service Type *Hinkle Shanor* Priority Mail Express® Registered Mail™

Adult Signature *Santa Fe NM 87501* Registered Mail Restricted Delivery

Adult Signature Restricted Delivery Certified Mail® Signature Confirmation™

Certified Mail Restricted Delivery Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Insured Mail

Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

9589 0710 5270 0752 4591 08

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OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Apt. No., or PO Box No. _____ Garnett, John B.
 3505 FM 1058
 Hereford, TX 79045-7443
 24169 - Steward Pest Control

City, State, ZIP+4® _____

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>
<p>1. Article Addressed to:</p> <p>Garnett, John B. 3505 FM 1058 Hereford, TX 79045-7443 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8737 66</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____</p> <p>RECEIVED FEB 14 2024</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4591 08</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4589 89

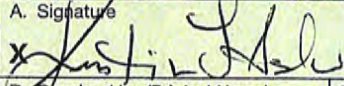

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OFFICIAL USE

Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To	
Street and Apt. No., or PO Box No. _____	Guitar, Jane Ellen PO Box 2213 Abilene, TX 79604
City, State, ZIP+4® _____	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
1. Article Addressed to:	B. Received by (Printed Name) KRISTIN ASKEN	C. Date of Delivery FEB 21 2024
<p>Guitar, Jane Ellen PO Box 2213 Abilene, TX 79604</p> <p>24169 - Steward Pest Control</p>  <p>9590 9402 8560 3186 8738 72</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below <input type="checkbox"/> No</p> <p>RECEIVED FEB 21 2024 OFFICE USPS</p>	
2. Article Number (Transfer from service label) 9589 0710 5270 0752 4589 89	<p>3. Service Type Santa Fe NM 87802 <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt	

9589 0710 5270 0752 4589 96

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OFFICIAL USE

Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To Street and Apt. No., or PO Box No. City, State, ZIP+4®	Harle, Inc. 29555 NE Wilsonville Road Newberg, OR 97132 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature x <i>Justin D Harle</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
Harle, Inc. 29555 NE Wilsonville Road Newberg, OR 97132 24169 - Steward Pest Control	<i>Justin D Harle</i>	<i>2-15-23</i>
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
	RECEIVED FEB 20 2024	
2. Article Number (Transfer from service label)	3. Service Type	
9589 0710 5270 0752 4589 96	<input type="checkbox"/> Adult Signature <i>Hinkle Shanor LE</i> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt	

9589 0710 5270 0752 4589 65

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OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Apt. No., or PO Box No. _____ Heller, Melynda E.
 405 E. 19th St.
 City, State, ZIP+4® _____ Monahans, TX 79756
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Stacy Heller</i> C. Date of Delivery <i>2-12-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Heller, Melynda E. 405 E. 19th St. Monahans, TX 79756 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8738 41</p>	<p>RECEIVED FEB 15 2024</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4589 65</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4589 72

U.S. Postal Service™
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Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____



Sent To

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

City, State, ZIP+4® _____

Higgs, David A.
11 Rivermist Lane
Savannah, GA 31410-2524
24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-6047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature</p> <p>X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Higgs, David A. 11 Rivermist Lane Savannah, GA 31410-2524 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8738 65</p>	<p>RECEIVED</p> <p>FEB 16 2024</p>
<p>2. Article Number (Transfer from service label)</p> <p>1589 0710 5270 0752 4589 72</p>	<p>3. Service Type Hinkle Shanor LLP Priority Mail Express® Santa Fe NM 87501 Registered Mail™</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Restricted Delivery</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4589 27

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	
Street and Apt. No., or PO Box No.	Holladay, Ben R. 5445 FM 1179 Bryan, TX 77808-7252 24169 - Steward Pest Control
City, State, ZIP+4®	

PS Form 3800, January 2023 PSN 7530-02-000-8047. See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Ben Holladay</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Ben Holladay</i></p> <p>C. Date of Delivery <i>2-13-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;">RECEIVED FEB 16 2024</p>
<p>1. Article Addressed to:</p> <p>Holladay, Ben R. 5445 FM 1179 Bryan, TX 77808-7252 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8738 03</p>	<p>3. Service Types</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4589 27</p>	

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

9589 0710 5270 0752 4589 41

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. Holladay, Cathy S.
19714 Gable Woods Dr.
City, State, ZIP+4® Tomball, TX 77375
24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Holladay, Cathy S. *Sign of Robert*
19714 Gable Woods Dr.
Tomball, TX 77375
24169 - Steward Pest Control

9590 9402 8560 3186 8737 97

2. Article Number (Transfer from service label)

9589 0710 5270 0752 4589 41

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Cathy S. Holladay* 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:

RECEIVED
FEB 20 2024

3. Service Type *Clickie Chanon LLP Santa Fe NM 87501*

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Domestic Receipt

9589 0710 5270 0752 4589 03

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	Holladay, Montie W. 18456 Widgeon Trail Drive College Station, TX 77845 24169 - Steward Pest Control
Street and Apt. No., or PO Box No.	
City, State, ZIP+4®	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Holladay, Montie W. 18456 Widgeon Trail Drive College Station, TX 77845 24169 - Steward Pest Control</p>	<p>FEB 14 2024</p> <p>RECEIVED</p> <p>FEB 20 2024</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4589 03</p>	<p>3. Service type: Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

9589 0710 5270 0752 4589 10

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	
Street and Apt. No., or PO Box No.	Jesse A. Cone Trust "A", u/w/o Hubert E. Cone c/o Jesse A. Cone, Trustee 5050 Clairemont Mesa Blvd, #4 San Diego, CA 92117-1434
City, State, ZIP+4®	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047. See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Jesse A. Cone</u></p> <p>C. Date of Delivery <u>2/19/24</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Jesse A. Cone Trust "A", u/w/o Hubert E. Cone c/o Jesse A. Cone, Trustee 5050 Clairemont Mesa Blvd, #4 San Diego, CA 92117-1434</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8739 33</p>	<p>RECEIVED</p> <p>FEB 20 2024</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4589 10</p>	<p>3. Service Type <u>Hinkle Shanor LLP</u> <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <u>Santa Fe NM 87501</u> <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4589 58


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OFFICIAL USE

Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To Street and Apt. No., or PO Box No. City, State, ZIP+4®	John Robert Cone Trust "A", u/w/o Hubert E. Cone 3601 Aransas Street Corpus Christi, TX 78411 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <i>John Robert Cone TRUSTEE</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
John Robert Cone Trust "A", u/w/o Hubert E. Cone 3601 Aransas Street Corpus Christi, TX 78411 24169 - Steward Pest Control	<i>John Robert Cone TRUSTEE</i>	<i>2/21/2024</i>
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		
2. Article Number (Transfer from service label)	3. Service Type	
9590 9402 8560 3186 8739 26	<input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
9589 0710 5270 0752 4589 58	Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt	

9589 0710 5270 0752 4588 73

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 \$ _____



Sent To Jonathan S. Roderick Trust, dated 2/8/2007

Street and Apt. No., or PO Box No. PO Box 7961

City, State, ZIP+4® Boulder, CO 80306 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Jonathan S. Roderick Trust,
dated 2/8/2007
PO Box 7961
Boulder, CO 80306
24169 - Steward Pest Control

9590 9402 8560 3186 8738 96

2. Article Number (Transfer from service label)
9589 0710 5270 0752 4588 73

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Jonathan S. Roderick* Agent Addressee

B. Received by (Printed Name)
Jonathan S. Roderick

C. Date of Delivery
FEB 6 2024

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

3. Service Type *Inkling Shanor LLP* Priority Mail Express®
Santa Fe NM 87504 Registered Mail™
 Adult Signature Restricted Delivery Registered Mail Restricted Delivery
 Certified Mail® Signature Confirmation™
 Certified Mail Restricted Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)



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

9589 0710 5270 0752 4588 11

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee
 \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage
 \$ _____

Total Postage and Fees
 \$ _____

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

Katy Pipeline & Production Corp.
 104 Audubon Lane
 Lufkin, TX 75904

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>Thelma R. Todd</i></p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Katy Pipeline & Production Corp. 104 Audubon Lane Lufkin, TX 75904</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8739 02</p>	<p>RECEIVED</p> <p>FEB 16 2024</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4588 11</p>	<p>3. Service Type Hinkle Shanor LLP Priority Mail Express®</p> <p>Santa Fe NM 87501 Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0752 4589 34

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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OFFICIAL RECEIPT

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street and Apt. No., or PO Box No. Kennedy Minerals, Ltd.
223 West Wall Street, Suite 700

City, State, ZIP+4® Midland, TX 79701-4695

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Kennedy Minerals, Ltd. 223 West Wall Street, Suite 700 Midland, TX 79701-4695</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8738 89</p>	<p>RECEIVED</p> <p>FEB 16 2024</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4589 34</p>	<p>3. Service Type <input checked="" type="checkbox"/> Hinkle Shanor LLP <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4588 97

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® _____

Kettle Investment I LLC
 PO Box 51138
 Midland, TX 79710
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN:7580-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>[Signature]</i></p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: _____</p> <p>RECEIVED FEB 14 2024</p>
<p>1 Article Addressed to:</p> <p>Kettle Investment I LLC PO Box 51138 Midland, TX 79710</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8739 40</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2 Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4588 97</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4588 66

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. Kurt Frederick Oheim Trust Dtd January 1, 2017
 6600 Wentworth Drive
 Amarillo, TX 79109

City, State, ZIP+4® Amarillo, TX 79109

24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Kurt Frederick Oheim Trust Dtd
 January 1, 2017
 6600 Wentworth Drive
 Amarillo, TX 79109

24169 - Steward Pest Control

9590 9402 8560 3186 8739 64

2. Article Number (Transfer from service label)
 9589 0710 5270 0752 4588 66

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 2-12-24

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

RECEIVED
 FEB 14 2024

3. Service Type Certified Mail® Registered Mail™ Signature Confirmation™

Adult Signature Certified Mail Restricted Delivery Collect on Delivery Insured Mail Registered Mail Restricted Delivery Signature Confirmation Restricted Delivery

Adult Signature Restricted Delivery Collect on Delivery Restricted Delivery Insured Mail Restricted Delivery (over \$500)

Hinkle Shanor LLP
 Santa Fe NM 87501

Domestic Return Receipt

9589 0710 5270 0725 3438 30

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

Christa L. Leavell and husband, Gregory Leavell

Street and Apt. NPO Box 470

Robinson, IL 62454

City, State, ZIP+4

24169 - Steward Post Control



PS Form 3800, January 2023 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:

Christa L. Leavell and husband,
Gregory Leavell
PO Box 470
Robinson, IL 62454

24169 - Steward Post Control



9590 9402 8560 3186 8723 87

2. Article Number (Transfer from service label)

9589 0710 5270 0725 3438 30

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Michelle C Leavell

- Agent
- Addressee

B. Received by (Printed Name)

Michelle C Leavell

C. Date of Delivery

2-24-24

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

RECEIVED

FEB 20 2024

3. Service Type

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

Hinkle Shanor
Santa Fe NM 87505

Domestic Return Receipt

9589 0710 5270 0752 4588 28

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

Street and Apt. No., or PO Box No. Leavell, Michelle C.
 PO Box 470
 Robinson, IL 62454

City, State, ZIP+4® 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <i>Michelle C Leavell</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Michelle C Leavell</i></p> <p>C. Date of Delivery <i>2-14-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED FEB 20 2024</p>
<p>1. Article Addressed to:</p> <p>Leavell, Michelle C. PO Box 470 Robinson, IL 62454 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8739 88</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p>4. Insured Mail (over \$500) <input type="checkbox"/></p> <p>5. Insured Mail Restricted Delivery <input type="checkbox"/></p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4588 28</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4624 43

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

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

City, State, ZIP+4® _____

The Long Trusts
 PO Box 3096
 Kilgore, TX 75663
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-0047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>Belinda S. Lipscomb</i></p> <p>B. Received by (Printed Name) <input type="checkbox"/> C. Date of Delivery</p> <p><i>Belinda S. Lipscomb</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>The Long Trusts PO Box 3096 Kilgore, TX 75663 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8731 79</p>	<p>RECEIVED</p> <p>TEXAS FEB 11 2024</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4624 43</p>	<p>3. Service Type <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0725 3443 32

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee
 \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage
 \$ _____

Total Postage and Fees
 \$ _____

Sent To
 Street MMS Royalties, LLC
 PO Box 9622
 Midland, TX 79708
 City, TX 24169 - Steward Pest Control

Postmark Here


PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/>  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery M. Vesquez 2/14</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED FEB 16 2024</p>
<p>1. Article Addressed to:</p> <p>MMS Royalties, LLC PO Box 9622 Midland, TX 79708</p> <p>24169 - Steward Pest Control</p>  <p>9590 9402 8530 3186 0584 83</p>	<p>3. Service Type Hinkle Shanor LLP Priority Mail Express® Santa Fe NM 87505 Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0725 3443 32</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0752 4605 93

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	\$



Sent To

Street M.W. Oil Investment Company, Inc.
PO Box 13128
City Las Cruces, NM 88013
24169 - Steward Pest Control

PS Form 3800, January 2023 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:

M.W. Oil Investment Company, Inc.
PO Box 13128
Las Cruces, NM 88013
24169 - Steward Pest Control



9590 9402 7635 2122 6667 27

2. Article Number (Transfer from service label)
9589 0710 5270 0752 4605 93

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name) Frankie Sharon
- C. Date of Delivery FEB 23 2024
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:



3. Service Type Linkto Share LLC Santa Fe NM 87504
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

9589 0710 5270 0725 3444 79

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	\$

Postmark Here
 FEB 15 2024
 SANTA FE MAIN STATION
 SANTA FE, NM 87501-5895

Send To
 St Martin, Stacy Lynn Terrell
 45594 W. 231st St. S.
 Depew, OK 74028
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 - See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input checked="" type="checkbox"/> Stacy Munde <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p>	
<p>1. Article Addressed to:</p> <p>Martin, Stacy Lynn Terrell 45594 W. 231st St. S. Depew, OK 74028 24169 - Steward Pest Control</p> <p>9590 9402 8595 3244 3688 41</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED FEB 15 2024</p>	
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0725 3444 79</p>		<p>3. Service Type <i>Steward Pest Control</i> <input type="checkbox"/> Adult Signature <input checked="" type="checkbox"/> Santa Fe NM 87501 <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

9589 0710 5270 0725 3444 00

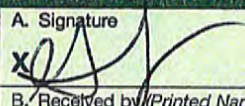

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OFFICIAL USE

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 \$	
S Mary Cone Lewis Trust "A", u/w/o Hubert E. Cone c/o Mary Cone Lewis, Trustee 4501 Upland Avenue Lubbock, TX 79407-5107 C 24169 - Steward Pest Control	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Mary Cone Lewis Trust "A", u/w/o Hubert E. Cone c/o Mary Cone Lewis, Trustee 4501 Upland Avenue Lubbock, TX 79407-5107 24169 - Steward Pest Control	B. Received by (Printed Name) Hinkle Shanor	C. Date of Delivery 2/12/24
2. Article Number (Transfer from service label) 9589 0710 5270 0725 3444 00	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
 9590 9402 7635 2122 6667 10	3. Service Type <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
PS Form 3811, July 2020 PSN 7530-02-000-9053		RECEIVED FEB 14 2024
		Domestic Return Receipt

9589 0710 5270 0725 3444 17

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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 McBride Oil and Gas Corporation
 PO Box 1515

City Roswell, NM 88202-1515

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p>McBride Oil and Gas Corporation PO Box 1515 Roswell, NM 88202-1515</p> <p>24169 - Steward Pest Control</p>	<p>B. Received by (Printed Name) Jennifer Aguilar</p> <p>C. Date of Delivery 2-12-24</p>
<p>2. Article Number (Transfer from carrier label) 9589 0710 5270 0725 3444 17</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>RECEIVED FEB 14 2024</p>
<p>3. Service Type: Hinkle Shanor LLP</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0725 3444 24

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

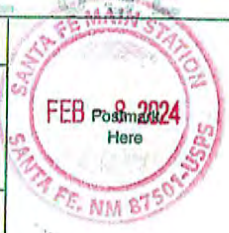
For delivery information, visit our website at www.usps.com®.

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
 City McCarthy Oil & Gas, LLC
 25807 Westheimer Pkwy, Ste 349
 Katy, TX 77494
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: McCarthy Oil & Gas, LLC 25807 Westheimer Pkwy, Ste 349 Katy, TX 77494 24169 - Steward Pest Control	B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No RECEIVED FEB 29 2024
2. Article Number (Transfer from service label) 9589 0710 5270 0725 3444 24	3. Service Type Shankle Shanor LLP Santa Fe NM 87504 <ul style="list-style-type: none"> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0725 3444 31

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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

SANTA FE MAIN STATION
 FEB - 8 2024
 SANTA FE, NM 87504-USPS

Str. McCown, Cathie Cone
 PO Box 658
 Dripping Springs, TX 78620
 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

McCown, Cathie Cone
 PO Box 658
 Dripping Springs, TX 78620
 24169 - Steward Pest Control

2. Article Number (Transfer from service label)
 9589 0710 5270 0725 3444 31

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Teresa Quick Agent
 Addressee

B. Received by (Printed Name)
Teresa Quick

C. Date of Delivery
2/14/24

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

RECEIVED
 FEB 20 2024

3. Service Type *Hinkle Shanor LLP*
 Adult Signature *Santa Fe NM 87504* Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Certified Mail Restricted Delivery Signature Confirmation™
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery Insured Mail
 Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0725 3443 70

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	\$



McCoy, Sandra P. 5127 FM 126 North Hamlin, TX 79520 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-3047 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:

McCoy, Sandra P.
5127 FM 126 North
Hamlin, TX 79520
24169 - Steward Pest Control

9590 9402 8530 3186 0584 21

2. Article Number (Transfer from service label)
9589 0710 5270 0725 3443 70

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 [Signature]

B. Received by (Printed Name) Agent Addressee
 Tim Smith

C. Date of Delivery
2-12-24

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

RECEIVED
FEB 15 2024

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

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

9589 0710 5270 0725 3443 87

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

OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$

Sent To

Mekusukey Oil Company, LLC
 PO Box 816
 Wewoka, OK 74884-0816
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Kim Yerby</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Kim Yerby</i></p> <p>C. Date of Delivery <i>2/12/24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;">RECEIVED FEB 20 2024</p>
<p>1. Article Addressed to:</p> <p>Mekusukey Oil Company, LLC PO Box 816 Wewoka, OK 74884-0816 24169 - Steward Pest Control</p> <p>9590 9402 7635 2122 6667 03</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <i>Hinkle Shanor</i> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0725 3443 87</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0725 3443 94

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)	
<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

St Melton, Shelly Shelton
4001 Siete Leguas
El Paso, TX 79922

24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Melton, Shelly Shelton
4001 Siete Leguas
El Paso, TX 79922

24169 - Steward Pest Control



9590 9402 8530 3186 0585 37

2. Article Number (Transfer from service label)

9589 0710 5270 0725 3443 94

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent
 Addressee

B. Received by (Printed Name) _____

C. Date of Delivery 2-10-24

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

RECEIVED

FEB 12 2024

3. Service Type **Hinkle Shanor LLP** Priority Mail Express®

Adult Signature **Santa Fe, NM 87508** Registered Mail™

Adult Signature Restricted Delivery Registered Mail Restricted Delivery

Certified Mail® Signature Confirmation™

Certified Mail Restricted Delivery Signature Confirmation Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

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

9589 0710 5270 0725 3443 25

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 Misurek, Cheryl
 8370 Hurakan Creek Crossing
 Cumming, GA 30028

City 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Misurek, Cheryl 8370 Hurakan Creek Crossing Cumming, GA 30028 24169 - Steward Pest Control</p>	<p>RECEIVED FEB 1 2024</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0725 3443 25</p>	<p>3. Service Type Hinkle Shanor LLP <input checked="" type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Santa Fe NM 87504 <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0725 3442 71

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	\$



Sender	Moeller, Gregory Aaron
Street	11487 W. Water Birch Street
City	Star, ID 83669
	24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Moeller, Gregory Aaron
11487 W. Water Birch Street
Star, ID 83669

24169 - Steward Pest Control

9590 9402 7635 2122 6667 34

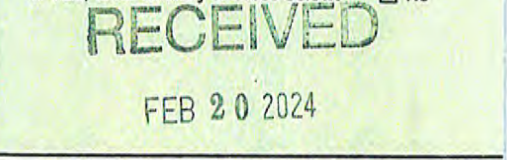
2. Article Number (Transfer from service label)
9589 0710 5270 0725 3442 71

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Handwritten Signature]* Agent Addressee

B. Received by (Printed Name) *Lise Moeller* C. Date of Delivery *2/12/24*

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



3. Service Type *Hinkle Shanor LLP* Priority Mail Express® Registered Mail™

Santa Fe NM 87501 Registered Mail Restricted Delivery Signature Confirmation™

Adult Signature Certified Mail® Collect on Delivery Insured Mail

Adult Signature Restricted Delivery Certified Mail Restricted Delivery Collect on Delivery Restricted Delivery Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

9589 0710 5270 0725 3443 01

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
 Moore, Joyce E.
 3404 Springbranch Drive
 Richardson, TX 75082
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <i>X Joyce Moore</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Moore, Joyce E. 3404 Springbranch Drive Richardson, TX 75082 24169 - Steward Pest Control</p>		<p>B. Received by (Printed Name) <i>Joyce Moore</i></p> <p>C. Date of Delivery <i>2/14/24</i></p>	
<p>2. Article Number (Transfer from carrier label) 9589 0710 5270 0725 3443 01</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below.</p> <p>RECEIVED FEB 20 2024</p>	
<p>3. Service Type <input checked="" type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

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

9589 0710 5270 0725 3443 63

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To

Street Motowi, LLC
 PO Box 13128
 City Las Cruces, NM 88013
 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Motowi, LLC
 PO Box 13128
 Las Cruces, NM 88013
 24169 - Steward Pest Control

9590 9402 7635 2122 6666 97

2. Article Number (Transfer from service label)
 9589 0710 5270 0725 3443 63

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

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

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

RECEIVED
 FEB 5 2024

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

Domestic Return Receipt

9589 0710 5270 0725 3442 64

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

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

OFFICIAL USE

Certified Mail Fee
 \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage
 \$ _____

Total Postage and Fees
 \$ _____

Postmark Here

George M. O'Brien & wife, Susan O'Brien
 PO Box 1743
 Midland, TX 79702

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-8047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery FRANCES WOODARD 2/13/24</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED 1743 FEB 16 2024</p>
<p>1. Article Addressed to:</p> <p>George M. O'Brien & wife, Susan O'Brien PO Box 1743 Midland, TX 79702</p> <p>24169 - Steward Pest Control</p>  <p>9590 9402 8530 3186 0585 06</p>	<p>3. Service Type Santa Fe NM 87584 <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0725 3442 64</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

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: PetroVen Inc.
 Quorum Place
 Street: 14901 Quorum Drive, Suite 850
 City, State: Dallas, TX 75254 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 0725 3441 65



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:

PetroVen Inc.
 Quorum Place
 14901 Quorum Drive, Suite 850
 Dallas, TX 75254
 24169 - Steward Pest Control

9590 9402 8530 3186 0584 52

2. Article Number (Transfer from service label)
 9589 0710 5270 0725 3441 65

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Rosa Luna Agent Addressee

B. Received by (Printed Name)
 ROSA LUNA

C. Date of Delivery
 2/20/24

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

RECEIVED
 FEB 20 2024

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Hinkle Shanor LLC
 Sent to NW 87502

Domestic Return Receipt

9589 0710 5270 0725 3442 19

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	\$

St	Piani, Shanna Ebers
St	2031 Miramar Drive
St	Newport Beach, CA 92661
St	24169 - Steward Pest Control



PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature</p> <p>X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>1. Article Addressed to:</p> <p>Piani, Shanna Ebers 2031 Miramar Drive Newport Beach, CA 92661 24169 - Steward Pest Control</p>	<p>RECEIVED FEB 20 2024</p>																
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0725 3442 19</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt																

9589 0710 5270 0725 3442 02

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

St Progeny Petroleum LLC
 PO Box 30864
 Santa Barbara, CA 93130

City 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Progeny Petroleum LLC PO Box 30864 Santa Barbara, CA 93130 24169 - Steward Pest Control</p> <p>9590 9402 7635 2122 6677 55</p>	<p>B. Received by (Printed Name) <i>Markus Kanak</i></p>	<p>C. Date of Delivery <i>02/21/2024</i></p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0725 3442 02</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>RECEIVED FEB 26 2024</p>	
<p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	<p>Hinkle Shanon Santa Fe NM 87501</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt	

9589 0710 5270 0725 3442 40

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

St Pumpkin Buttes, LLC
PO Box 1989
Casper, WY 82602

City 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Pumpkin Buttes, LLC
PO Box 1989
Casper, WY 82602

24169 - Steward Pest Control



9590 9402 8530 3186 0584 69

2. Article Number (Transfer from service label)
9589 0710 5270 0725 3442 40

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent
 Addressee

B. Received by (Printed Name)
RAY SADER

C. Date of Delivery
2-12-24

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

RECEIVED

FEB 15 2024

3. Service Type *Hinkle Shanor LLC* Priority Mail Express®
Santa Fe NM 87508 Registered Mail™
 Adult Signature Registered Mail Restricted Delivery
 Adult Signature Restricted Delivery Certified Mail®
 Certified Mail Restricted Delivery Signature Confirmation™
 Collect on Delivery Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery Insured Mail
 Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0725 3440 73

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

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

OFFICIAL USE

Certified Mail Fee \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Postmark Here

Santa Fe Main Street
 Santa Fe, NM 87505
 FEB - 8 2024

Sender To:
 RRA Minerals LLC
 2214 Toll Gate Road
 Huntsville, AL 35801-1833
 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

RRA Minerals LLC
 2214 Toll Gate Road
 Huntsville, AL 35801-1833
 24169 - Steward Pest Control

2. Article Number (Transfer from service label)
 9589 9402 8595 3244 3691 21

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Robert Smith

B. Received by (Printed Name) *Robert Smith*

C. Date of Delivery *2-19-24*

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

RECEIVED
 FEB 20 2024

3. Service Type *Hinkle Sharon LLP Santa Fe NM 87505*

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

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

9589 0710 5270 0725 3442 33

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

St Ralston, Mitzi Carolyn Terrell
 23260 S. 449th W. Ave.
 Depew, OK 74028

24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Ralston, Mitzi Carolyn Terrell
 23260 S. 449th W. Ave.
 Depew, OK 74028

24169 - Steward Pest Control

2. Article Number (Transfer from service label)
 9589 0710 5270 0725 3442 33

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) Eddue Ralston

C. Date of Delivery 2-12-24

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

RECEIVED
 FEB 15 2024

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

4. Insured Mail
 Insured Mail Restricted Delivery (over \$500)

5. Certified Mail®
 Certified Mail Restricted Delivery

6. Collect on Delivery
 Collect on Delivery Restricted Delivery

7. Adult Signature Required
 Adult Signature Restricted Delivery

8. Return Receipt (hardcopy)
 Return Receipt (electronic)

9. Return Receipt (hardcopy)
 Return Receipt (electronic)

10. Certified Mail Restricted Delivery
 Adult Signature Required
 Adult Signature Restricted Delivery

11. Certified Mail Restricted Delivery
 Adult Signature Required
 Adult Signature Restricted Delivery

12. Certified Mail Restricted Delivery
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 Adult Signature Required
 Adult Signature Restricted Delivery

9589 0710 5270 0725 3442 88

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

Str Randall, Joan

City 4603 Park Stone
Bryan, TX 77802

24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Randall, Joan
 4603 Park Stone
 Bryan, TX 77802

24169 - Steward Pest Control

9590 9402 8530 3186 0584 76

2. Article Number (Transfer from service label)
 9589 0710 5270 0725 3442 88

COMPLETE THIS SECTION ON DELIVERY

A. Signature J Randall 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: _____

RECEIVED
 FEB 20 2024

3. Service Type Hinkle Shanor LP Priority Mail Express® 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 Insured Mail

Collect on Delivery Restricted Delivery Insured Mail Restricted Delivery (over \$500)

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

9589 0710 5270 0725 3442 95

U.S. Postal Service™
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 Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee
 \$ _____

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

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage
 \$ _____

Total Postage and Fees
 \$ _____

Sent To
 St Robert Edward Eckels Jr. LLC
 PO Box 1093
 Cedaredge, CO 81413
 24169 - Steward Pest Control

Postmark Here

PS Form 3800, January 2023 PSN 7530-02-000-8047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Robert E. Eckels</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Robert Eckels</i></p> <p>C. Date of Delivery <i>2-17-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED FEB 15 2024</p>
<p>1. Article Addressed to:</p> <p>Robert Edward Eckels Jr. LLC PO Box 1093 Cedaredge, CO 81413 24169 - Steward Pest Control</p> <p>9590 9402 8561 3186 6086 33</p>	<p>3. Service Type <i>Hinkle Shanor</i> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0725 3442 95</p>	

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

Domestic Return Receipt

9589 0710 5270 0725 3440 97

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



Postage	\$
Total Postage and Fees	\$

Sent to
 Street: Rock House Resources, LLC
 316 Bailey Avenue, Suite 113
 Fort Worth, TX 76107
 City: 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Rock House Resources, LLC
 316 Bailey Avenue, Suite 113
 Fort Worth, TX 76107
 24169 - Steward Pest Control



2. Article Number (Transfer from service label)
 9589 0710 5270 0725 3440 97

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Agent
 Addressee

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

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

RECEIVED
 FEB 20 2024

3. Service Type

<input type="checkbox"/> Adult Signature	Hinkle Shanor LLC	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	316 Bailey Avenue, Suite 113	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	Fort Worth, TX 76107	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery		<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery		<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery		
<input type="checkbox"/> Insured Mail		
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)		

Domestic Return Receipt

9589 0710 5270 0725 3440 66

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

Stn Root Family Holdings, LLC
 PO Box 403
 City Rosemount, MN 55068-0403
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Root Family Holdings, LLC PO Box 403 Rosemount, MN 55068-0403 24169 - Steward Pest Control</p> <p>9590 9402 8595 3244 3691 14</p>		<p>B. Received by (Printed Name) <i>Bryce Root</i> C. Date of Delivery <i>2-26-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED FEB 26 2024</p>	
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0725 3440 66</p>		<p>3. Service Type <i>Hinkle Shanor LLP</i> Priority Mail Express® <input type="checkbox"/> Adult Signature <i>Santa Fe NM 87501</i> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® Delivery <input type="checkbox"/> Certified Mail Restricted Delivery Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

9589 0710 5270 0725 3441 58

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	\$

Postmark Here - FEB 16 2024 SANTA FE NM 87504

Se Russell N. McInturff Trust
 PO Box 6618
 Lubbock, TX 79493-6618
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) DON MCINTURFF C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p>RECEIVED FEB 16 2024 FEB 13 2024 9413 USPS</p>
<p>1. Article Addressed to:</p> <p>Russell N. McInturff Trust PO Box 6618 Lubbock, TX 79493-6618</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8595 3244 3688 65</p>	<p>3. Service Type Santa Fe NM 87504 <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0725 3441 58</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0725 3441 41

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	\$



Salinas, Brandie
8225 Leopard Street, Lot 122
Corpus Christi, TX 78409
24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Salinas, Brandie
8225 Leopard Street, Lot 122
Corpus Christi, TX 78409
24169 - Steward Pest Control



9590 9402 8595 3244 3690 77

2. Article Number (Transfer from service label)
9589 0710 5270 0725 3441 41

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x *Brandie Salinas* Agent Addressee

B. Received by (Printed Name) _____

C. Date of Delivery
2/21/24

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

RECEIVED
MAR 01 2024

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

Domestic Return Receipt

9589 0710 5270 0725 3441 34

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

SI Solis Resources Ltd. _____

CI PO Box 51451 _____

Midland, TX 79710-1451 _____

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Debbie Lopez</u></p> <p>C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED FEB 16 2024</p>
<p>1. Article Addressed to:</p> <p>Solis Resources Ltd PO Box 51451 Midland, TX 79710-1451 24169 - Steward Pest Control</p> <p>9590 9402 8595 3244 3690 91</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>Article Number (Transfer from service label)</p> <p>9589 0710 5270 0725 3441 34</p>	<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p> <p>Domestic Return Receipt</p>

9589 0710 5270 0725 3441 27

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)	
<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	\$



Spradlin, Charles Andrew
 304 Summit Ridge Dr.
 Glen Rose, TX 76043
 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Spradlin, Charles Andrew
 304 Summit Ridge Dr.
 Glen Rose, TX 76043
 24169 - Steward Pest Control



9590 9402 8595 3244 3690 84

2. Article Number (Transfer from service label)

9589 0710 5270 0725 3441 27

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X Charles A. Spradlin

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:

RECEIVED



3. Service Type **Hinkle Shanor LLP** Priority Mail Express®
- Santa Fe NM 87504** Registered Mail™
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

Domestic Return Receipt

9589 0710 5270 0752 4620 30

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	
Street and Apt. No., or PO Box No.	Stephenson, Kerry Jo 7110 Echo Pines Drive Humble, TX 77346
City, State, ZIP+4®	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Stephenson</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>AWL53</i></p> <p>C. Date of Delivery <i>2/15/24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p style="text-align: center;">RECEIVED FEB 15 2024</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Stephenson, Kerry Jo 7110 Echo Pines Drive Humble, TX 77346 24169 - Steward Pest Control</p> <p style="text-align: center;">  9590 9402 8560 3186 8733 46 </p>	<p>3. Service Type <i>Hinkle Shanor LLP</i> <input type="checkbox"/> Adult Signature <i>Santa Fe NM 87501</i> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4620 30</p>	

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

9589 0710 5270 0752 4620 54

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. Sugarberry Minerals LP
5950 Cedar Springs Rd Ste 200
Dallas, TX 75235

City, State, ZIP+4® 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Sugarberry Minerals LP
5950 Cedar Springs Rd Ste 200
Dallas, TX 75235

24169 - Steward Pest Control



2. Article Number (Transfer from service label)

9589 0710 5270 0752 4620 54

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) Irma Agosto

C. Date of Delivery 2/13/24

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

RECEIVED

FEB 20 2024

3. Service Type Hinkle Shanor LLP Priority Mail Express®

Adult Signature Santa Fe NM 87504 Registered Mail™

Adult Signature Restricted Delivery Registered Mail Restricted Delivery

Certified Mail® Signature Confirmation™

Certified Mail Restricted Delivery Signature Confirmation Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0752 4620 61

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	
Street and Apt. No., or PO Box No. Terra Nova Energy, LP 242 Spring Park Drive, Suite C	
City, State, ZIP+4® Midland, TX 79705	
24169 - Steward Pest Control	

PS Form 3800, January 2023 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:

Terra Nova Energy, LP
242 Spring Park Drive, Suite C
Midland, TX 79705

24169 - Steward Pest Control



9590 9402 8560 3186 8733 15

2. Article Number (Transfer from service label)

9589 0710 5270 0752 4620 61

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Daniela Pineda

- Agent
- Addressee

B. Received by (Printed Name)

Daniela Pineda

C. Date of Delivery

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

RECEIVED

FEB 14 2024

3. Service Type: Inkle Shanor LLP

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

Domestic Return Receipt

9589 0710 5270 0752 4620 85

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® _____

Terrell, Britton Andrew
 7203 Sungate Drive
 Austin, TX 78731
 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Terrell, Britton Andrew
 7203 Sungate Drive
 Austin, TX 78731
 24169 - Steward Pest Control

9590 9402 8560 3186 8732 92

2. Article Number (Transfer from service label)
 9589 0710 5270 0752 4620 85

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 [Signature] Agent
 Addressee

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

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

RECEIVED
 FEB 16 2024

3. Service Type *Hinkie Sh...*

Adult Signature *Santa Fe NM 87501* Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0752 4608 21

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	Terrell, Gary T.
Street and Apt. No., or PO Box No.	8727 Sea Ash Circle
City, State, ZIP+4®	Round Rock, TX 78681
	24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Terrell, Gary T.
8727 Sea Ash Circle
Round Rock, TX 78681

24169 - Steward Pest Control

9590 9402 8560 3186 8732 61

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Gary T. Terrell*

Agent
 Addressee

B. Received by (Printed Name) *Gary T. Terrell*

C. Date of Delivery *FEB 16 2024*

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

RECEIVED

FEB 16 2024

Hinkle Shonor LLP

2. Article Number (Transfer from service label)

9589 0710 5270 0752 4608 21

3. Service Type *Santa Fe NM 87501 Priority Mail Express®*

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery	
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

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

9589 0710 5270 0752 4620 78

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
Terrell III, Jennings Bryan
Street and Apt. No., or PO Box No. 13680 East Camino La Cebadilla
Tuscon, AZ 85749

City, State, ZIP+4® _____ 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Terrell III, Jennings Bryan
13680 East Camino La Cebadilla
Tuscon, AZ 85749

24169 - Steward Pest Control



2. Article Number (Transfer from service label)
9589 0710 5270 0752 4620 78

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) _____ C. Date of Delivery **2/20/24**

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

RECEIVED

FEB 20 2024

3. Service Type

Adult Signature **Hinkle Shanor** Priority Mail Express®

Adult Signature Restricted Delivery **13680 East Camino La Cebadilla** Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

9589 0710 5270 0752 4619 89

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 N

Terrell, Larry Dale

PO Box 690

Lexington, TX 78947-0690

City, State, ZIP+4®

24169 - Steward Post Control

PS Form 3800, January 2023 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:

Terrell, Larry Dale
PO box 690
Lexington, TX 78947-0690



9590 9402 8560 3186 8732 23

2. Article Number (Transfer from service label)

0710 5270 0752 4619 89

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

RECEIVED

FEB 20 2024

3. Service Type

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

Hinkle Shanor LLP
Santa Fe, NM 87501

Domestic Return Receipt

9589 0710 5270 0752 4619 96

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	
Street and Apt. No., or PO Box No.	Terrell, Ralph Douglas 710 Golf Course Road Hamlin, TX 79520
City, State, ZIP+4®	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-0047 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:

Terrell, Ralph Douglas
710 Golf Course Road
Hamlin, TX 79520
24169 - Steward Pest Control



9590 9402 8560 3186 8732 16

2. Article Number (Transfer from service label)
9589 0710 5270 0752 4619 96

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x *Eileen Terrell* Agent Addressee

B. Received by (Printed Name)
Eileen Terrell

C. Date of Delivery
2-13-24

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

RECEIVED
FEB 20 2024

3. Service Type *Hinkle Shanor LP* Priority Mail Express®
Santa Fe NM 87501 Registered Mail™
 Adult Signature Registered Mail Restricted Delivery
 Adult Signature Restricted Delivery Signature Confirmation™
 Certified Mail® Signature Confirmation Restricted Delivery
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

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

9589 0710 5270 0752 4620 09

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® _____

Terrell, Robert Drake
 4119 Gairloch Lane
 Houston, TX 77025-2911
 24169 - Steward Pest Control

Postmark
 Here
FEB - 8 2024

SANTA FE MAIN STATION
 SANTA FE, NM 87501-USPS

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>J. Terrell</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>J. TERRELL</i></p> <p>C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <p>Terrell, Robert Drake 4119 Gairloch Lane Houston, TX 77025-2911 24169 - Steward Pest Control</p>  <p>9590 9402 8560 3186 8732 09</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED FEB 20 2024</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4620 09</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0752 4620 16

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 Street and Apt. No., or PO Box No. City, State, ZIP+4®	Terry A. Cone Trust "A", u/w/o Hubert E. Cone c/o Terry A. Cone, Trustee 991 Old Smith Road Fortson, GA 31808 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece or on the front if space permits. 		A. Signature <i>x Pam Cone</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) <i>Pam Cone</i>	
1. Article Addressed to: Terry A. Cone Trust "A", u/w/o Hubert E. Cone c/o Terry A. Cone, Trustee 991 Old Smith Road Fortson, GA 31808 24169 - Steward Pest Control		C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No <div style="text-align: center; font-size: 2em; font-weight: bold;">RECEIVED</div> FEB 21 2024	
2. Article Number (Transfer from service label) 9589 0710 5270 0752 4620 16		3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

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

9589 0710 5270 0752 4620 23

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. Terry G. McInturff Trust
 PO Box 6618

City, State, ZIP+4® Lubbock, TX 79493-6618
 24169 – Steward Pest Control

PS Form 3800, January 2023 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:

Terry G. McInturff Trust
 PO Box 6618
 Lubbock, TX 79493-6618
 24169 – Steward Pest Control

2. Article Number (Transfer from service label)
 9589 0710 5270 0752 4620 23

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent
 Addressee

B. Received by (Printed Name) Dave McInturff

C. Date of Delivery FEB 13 2024

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

RECEIVED
 FEB 20 2024

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Insured Mail

Insured Mail Restricted Delivery (over \$500)

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

9589 0710 5270 0752 4624 67

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	Toles-Com-Ltd. LLC
Street and Apt. No., or PO Box No.	c/o Perry Toles PO Box 1300
City, State, ZIP+4®	Roswell, NM 88202-1300 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Toles-Com-Ltd. LLC
c/o Perry Toles
PO Box 1300
Roswell, NM 88202-1300
24169 - Steward Pest Control



9590 9402 8560 3186 8731 55

2. Article Number (Transfer from service label)

9589 0710 5270 0752 4624 67

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X *Susan James* **SANTA FE NM 88202**

B. Received by (Printed Name) *Susan James*

C. Date of Delivery

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

RECEIVED
FEB 14 2024
USPS

3. Service Type **Hinkle Shanor LLP** Priority Mail Express®

Santa Fe NM 87501 Registered Mail™

Adult Signature Registered Mail Restricted Delivery

Adult Signature Restricted Delivery Signature Confirmation™

Certified Mail® Signature Confirmation Restricted Delivery

Certified Mail Restricted Delivery

Collect on Delivery Insured Mail

Collect on Delivery Restricted Delivery Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0752 4624 74

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. W.B. Osborn Oil and Gas Operations
 1250 NE Loop 410, Suite 600

City, State, ZIP+4® San Antonio, TX 78209

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>[Signature]</i></p> <p>B. Received by (Printed Name) <i>R F</i></p> <p>C. Date of Delivery <i>2-21-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>RECEIVED</p> <p>FEB 26 2024</p>
<p>1. Article Addressed to:</p> <p>W.B. Osborn Oil and Gas Operations 1250 NE Loop 410, Suite 600 San Antonio, TX 78209</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8731 48</p>	<p>3. Service Type <i>Linkle Shanor LLP</i></p> <p><input type="checkbox"/> Adult Signature <i>Santa Fe NM 87501</i> <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4624 74</p>	

9589 0710 5270 0752 4624 81

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	Whittington, Judith Hunt
Street and Apt. No., or PO Box No.	2605 Oak Point Drive
City, State, ZIP+4®	Garland, TX 75044
	24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Whittington, Judith Hunt
2605 Oak Point Drive
Garland, TX 75044

24169 - Steward Pest Control



9590 9402 8560 3186 8731 31

2. Article Number (Transfer from service label)

9589 0710 5270 0752 4624 81

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature	<i>Judith Hunt</i>	<input type="checkbox"/> Agent
<input checked="" type="checkbox"/> Received by (Printed Name)		<input checked="" type="checkbox"/> Addressee
		C. Date of Delivery
		2/12

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

RECEIVED

FEB 15 2024

3. Service Type	Inkline Shanor LLP	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature	Santa Fe NM 87504	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery		<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail®		<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Certified Mail Restricted Delivery		<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery		
<input type="checkbox"/> Collect on Delivery Restricted Delivery		
<input type="checkbox"/> Insured Mail		
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)		

Domestic Return Receipt

9589 0710 5270 0752 4624 98

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	
Street and Apt. No., or PO Box No.	William N. Heiss Profit Sharing Plan PO Box 2680
City, State, ZIP+4®	Casper, WY 82607 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

William N. Heiss Profit Sharing Plan
PO Box 2680
Casper, WY 82607

24169 - Steward Pest Control



9590 9402 8560 3186 8731 17

2. Article Number (Transfer from service label)

9589 0710 5270 0752 4624 98

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature		<input type="checkbox"/> Agent
<input checked="" type="checkbox"/> 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

RECEIVED

FEB 8 2024

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

Domestic Return Receipt

9589 0710 5270 0752 4609 20




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)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To	
Street and Apt. No., or PO Box No.	Williams Trust, dated 4/10/1996, f/b/o MMP PO Box 3499
City, State, ZIP+4®	Tulsa, OK 74101 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/>  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Williams Trust, dated 4/10/1996, f/b/o MMP PO Box 3499 Tulsa, OK 74101 24169 - Steward Pest Control</p>  <p>9590 9402 8560 3186 8730 94</p>	<p></p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4609 20</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4609 37

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	\$



Sent To	Williams, Danny R.
Street and Apt. No., or PO Box No.	PO Box 104
City, State, ZIP+4®	Denver City, TX 79323
	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7580-02-000-9047 - See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Williams, Danny R.
PO Box 104
Denver City, TX 79323
24169 - Steward Pest Control



9590 9402 8560 3186 8730 87

2. Article Number (Transfer from service label)

9589 0710 5270 0752 4609 37

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Age Add
 x *Danny Williams*

B. Received by (Printed Name) *Danny Williams* C. Date of Delivery *2-14-24*

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

RECEIVED

FEB 14 2024

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

Hinkle Shanor LLP
Santa Fe, NM 87504

Domestic Return Receipt

9589 0710 5270 0752 4609 44

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

Street and Apt. No., or PO Box No. Williams, George H.
4249 Bayouside Drive
City, State, ZIP+4® Houma, LA 70363
24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Williams, George H.
4249 Bayouside Drive
Houma, LA 70363

24169 - Steward Pest Control



9590 9402 8560 3186 8730 70

2. Article Number (Transfer from service label)

9589 0710 5270 0752 4609 44

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

RECEIVED

FEB 21 2024

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

Hinkle Shanon
Santa Fe NM 87507

Domestic Return Receipt

9589 0710 5270 0752 4608 76

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 PO Box No. Kay Elkins Bingham Williams
P.O. Box 178

City, State, ZIP+4® Matador, TX 79244-0178
24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature x <i>Kay Williams</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Kay Williams</i></p> <p>C. Date of Delivery <i>2-14-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Kay Elkins Bingham Williams P.O. Box 178 Matador, TX 79244-0178 24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8730 63</p>	<p>3. Service Type <i>Steward Pest Control LLC</i> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <i>Santa Fe NM 87504</i> <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4608 76</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4609 13

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 PO Box No. Williams Jr., Kenneth D. 8322 Brixton

City, State, ZIP+4® San Antonio, TX 78254

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>K Williams</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>K Williams</i></p> <p>C. Date of Delivery <i>2-20</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Williams Jr., Kenneth D. 8322 Brixton San Antonio, TX 78254</p> <p>24169 - Steward Pest Control</p>	<p>RECEIVED</p> <p>FEB 23 2024</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4609 13</p>	
<p>3. Service Type <i>Hinkle Shanor LLP</i></p> <p><input type="checkbox"/> Adult Signature <i>Santa Fe NM 87501</i> <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>

9589 0710 5270 0752 4608 83

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	
Street and Apt. No., or PO Box No.	Kolby Williams 2531 FM 602
City, State, ZIP+4®	Floydada, TX 79235 24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Kolby Williams
2531 FM 602
Floydada, TX 79235
24169 - Steward Pest Control

9590 9402 8560 3186 8730 56

2. Article Number (Transfer from service label)
9589 0710 5270 0752 4608 83

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Kolby Williams Agent Addressee

B. Received by (Printed Name)
Kolby Williams

C. Date of Delivery
1-12-24

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

RECEIVED
FEB 14 2024

3. Service Type

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

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

9589 0710 5270 0752 4608 90

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. Williams, Larry D.
 PO Box 178

City, State, ZIP+4® Matador, TX 79244

24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION-ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature x <i>Kay Williams</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received By (Printed Name) Kay Williams</p> <p>C. Date of Delivery 2-14-24</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>RECEIVED FEB 20 2024 SANTA FE, NM USPS</p>
<p>1. Article Addressed to:</p> <p>Williams, Larry D. PO Box 178 Matador, TX 79244</p> <p>24169 - Steward Pest Control</p> <p> 9590 9402 8560 3186 8730 49</p>	<p>3. Service Type Hinkle Shanor LLP <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Santa Fe NM 87501 <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4608 90</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

9589 0710 5270 0752 4608 69

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	Williams, Patsy Irene
Street and Apt. No., or PO Box	406 S. Pine St.
City, State, ZIP+4®	Ponca City, OK 74601
	24169 - Steward Pest Control

PS Form 3800, January 2023 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:

Williams, Patsy Irene
406 S. Pine St.
Ponca City, OK 74601

24169 - Steward Pest Control



2. Article Number (Transfer from service label)

9589 0710 5270 0752 4608 69

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Cindy Maldonado* Agent Addressee

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

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

RECEIVED
FEB 20 2024

3. Service Type *Hinkle Shanor Santa Fe, NM 87501*

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

Domestic Return Receipt

9589 0710 5270 0752 4609 99

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)	
<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	Williams, Raymond B.
Street and Apt. No., or PO Box No	721 Oak Lane
City, State, ZIP+4®	Grapevine, TX 76051-2974
	24169 - Steward Pest Control


PS Form 3800, January 2023 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:

Williams, Raymond B.
721 Oak Lane
Grapevine, TX 76051-2974
24169 - Steward Pest Control

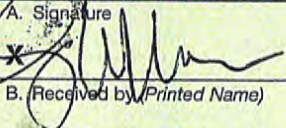


9590 9402 8560 3186 8729 43

2. Article Number (Transfer from service label)
9589 0710 5270 0752 4609 99

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent Addressee

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

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

RECEIVED
FEB 20 2024

3. Service Type Hinkle Shanor LLP Priority Mail Express®
Santa Fe NM 87501 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 Insured Mail

Collect on Delivery Restricted Delivery Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

9589 0710 5270 0752 4609 82

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	
Street and Apt. No., or PO Box No.	Williams, Stella Evelyn 804 S.E. Avenue G, Unit A Seminole, TX 79360-5194
City, State, ZIP+4®	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Stella E. Williams</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Stella E. Williams</i></p> <p>C. Date of Delivery <i>2-12-24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Williams, Stella Evelyn 804 S.E. Avenue G, Unit A Seminole, TX 79360-5194</p> <p>24169 - Steward Pest Control</p> <p>9590 9402 8560 3186 8729 50</p>	<p>RECEIVED</p> <p>FEB 15 2024</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4609 82</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>

9589 0710 5270 0752 4609 75

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. Williams, Steven B.
 109 Summerland Dr.
 Buchanan Dam, TX 78609

City, State, ZIP+4® Buchanan Dam, TX 78609
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Steven Williams</i></p> <p>C. Date of Delivery <i>2/15/24</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p style="text-align: center;">RECEIVED</p> <p style="text-align: center;">FEB 15 2024</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Williams, Steven B. 109 Summerland Dr. Buchanan Dam, TX 78609 24169 - Steward Pest Control</p>	<p>3. Service Type <i>Steward Pest Control</i></p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0752 4609 75</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

9589 0710 5270 0752 4609 68


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	
Street and Apt. No., or PO Box No.	Wood, Kimberly Ann 13204 Springcreek Court Oklahoma City, OK 73170
City, State, ZIP+4®	24169 - Steward Post Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Kim Wood</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Kim Wood</i></p> <p>C. Date of Delivery 2-12-24</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Wood, Kimberly Ann 13204 Springcreek Court Oklahoma City, OK 73170</p> <p>24169 - Steward Post Control</p>  <p>9590 9402 8560 3186 8729 74</p>	<p>RECEIVED FEB 15 2024</p>
<p>2. Article Number (Transfer from service label) 9589 0710 5270 0752 4609 68</p>	<p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p>Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>

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

9589 0710 5270 0725 3439 53

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	\$

Postmark Here

Sent To
 Street and: Danglade/Speight Family Oil and Gas I, LP
 c/o Sproles Woodard LLP
 777 Main Street, Suite 3250
 City, State: Midland, TX 79710

24169 – Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions.

CERTIFIED MAIL®

ATTORNEYS AT LAW
 POST OFFICE BOX 2068
 SANTA FE, NEW MEXICO 87504



9589 0710 5270 0725 3439 53

FIRST-CLASS

US POSTAGE™ PITNEY BOWES

ZIP 87501 \$ **008.69⁰**
 02 7H
 0006052409 FEB 08 2024

RECEIVED

FEB 16 2024

Hinkle Shanor LLP
 Santa Fe NM 87504

Danglade/Speight Family Oil and Gas I, LP
 c/o Sproles Woodard LLP
 777 Main Street, Suite 3250
 Midland, TX 79710

24169 – Steward Pest Control

NIXIE 799 DE 1 000Z/13/24

LETTER TO
 REGISTERED MAIL
 TO THE ADDRESSEE

2024 FEB 08 10 28 AM
 0006052409

87504VZ000R

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

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

OFFICIAL USE

9589 0710 5270 0752 4591 77

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
 Estate of Ruth Lucille Terrell Smith
 PO Box 14085
 South Lake Tahoe, CA 95702
 24169 - Steward Pest Control

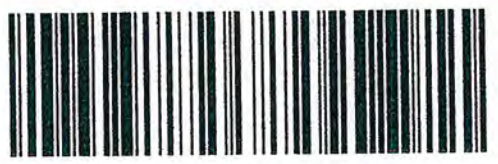
Street and Apt. No., or PO Box No.
 City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-0047 See Reverse for Instructions



CERTIFIED MAIL®

HINKLE SHANOR LLP
 ATTORNEYS AT LAW
 POST OFFICE BOX 2068
 SANTA FE, NEW MEXICO 87504



9589 0710 5270 0752 4591 77

FIRST-CLASS

US POSTAGE IMPITNEY BOWES

ZIP 87501
 02 7H
 0006052409

\$ 008.690
 FEB 08 2024

RECEIVED
 FEB 27 2024
 Hinkle Shanor LLP
 Santa Fe NM 87504

Estate of Ruth Lucille Terrell Smith
 PO Box 14085
 South Lake Tahoe, CA 95702

[Handwritten signature]

MAIL BOX FULL 02/07/2024

RETURN TO SENDER
 ATTEMPTED - NOT KNOWN
 UNABLE TO FORWARD

EC: 87504206868 *0988-02698-00-00

0701 04 48 ANK
 0701 04 48 ANK

9589 0710 5270 0752 4591 84

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	Faraway Farms, Ltd.
Street and Apt. No., or PO Box No.	c/o Lindsey Gentry 9304 York Avenue Lubbock, TX 79424
City, State, ZIP+4®	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL®

HINKLE SHANOR LLP
ATTORNEYS AT LAW
POST OFFICE BOX 2068
SANTA FE, NEW MEXICO 87504



9589 0710 5270 0752 4591 84

FIRST-CLASS



US POSTAGE™PITNEY BOWES
ZIP 87501 \$ 008.69⁰
02 7H
0006052409 FEB 08 2024

Faraway Farms, Ltd.
c/o Lindsey Gentry
9304 York Avenue
Lubbock, TX 79424

24169 - Steward Pest Control

RECEIVED

FEB 27 2024

Hinkle Shanor LLP
Santa Fe NM 87504

9589 0710 5270 0752 4620 92

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		
Street and Apt. No., or PO Box No.		Terrell, Charles Ray 2205 East 12 St. Odessa, TX 79761
City, State, ZIP+4®		24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

CERTIFIED MAIL®

HINKLE SHANOR LLP
ATTORNEYS AT LAW
POST OFFICE BOX 2068
SANTA FE, NEW MEXICO 87504



9589 0710 5270 0752 4620 92

FIRST-CLASS

US POSTAGE™ MADE IN THE USA **PITNEY BOWES**



ZIP 87501 **\$ 008.69⁰**
 02 7H
 0006052409 FEB 08 2024

RECEIVED

FEB 15 2024

Hinkle Shanor LLP
Santa Fe NM 87504

2/2
2/12

Terrell, Charles Ray
2205 East 12 St.
Odessa, TX 79761

FORWARD TIME TXF 1 12310002/09/24
 RETURN TO SENDER
 COMPANY BOTH INST
 COMPANY TX 79762-7886
 RETURN TO SENDER
 87504-2068
 79761-921

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

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

OFFICIAL USE

9589 0710 5270 0752 4614 91

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$



Sent To	
Street and A1	Andrews, Christopher Michael 4402 Humble Avenue Midland, TX 79707
City, State, Z	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700752461491

Copy

Schedule a Redelivery (<https://tools.usps.com/redelivery.htm>)

Latest Update

This is a reminder to arrange for redelivery of your item before March 7, 2024 or your item will be returned on March 8, 2024. You may arrange redelivery by using the Schedule a Redelivery feature on this page or may pick up the item at the Post Office indicated on the notice.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivery Attempt: Action Needed

Reminder to Schedule Redelivery of your item before March 7, 2024

February 27, 2024

Notice Left (No Authorized Recipient Available)

MIDLAND, TX 79707

February 22, 2024, 12:23 pm

In Transit to Next Facility

February 21, 2024

Arrived at USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER

February 16, 2024, 4:40 pm

Arrived at USPS Regional Facility

EL PASO TX DISTRIBUTION CENTER

February 15, 2024, 12:17 pm

- **Forwarded**
MIDLAND, TX
February 12, 2024, 1:28 pm
- **Arrived at USPS Regional Facility**
MIDLAND TX DISTRIBUTION CENTER
February 10, 2024, 4:54 pm
- **Departed USPS Facility**
ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am
- **Arrived at USPS Facility**
ALBUQUERQUE, NM 87101
February 8, 2024, 11:08 pm
- **Hide Tracking History**

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



Schedule Redelivery



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

9589071052700752461446

Need More Help?

Contact USPS Tracking support for further assistance.

9589 0710 5270 0752 4613 92

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	
C & I Powell Revocable Living Trust, dated	
6/16/1978	
Street and	114 Las Brisas Drive
City, State	Monterey, CA 93940
24169 - Steward Pest Control	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752461392

[Copy](#)

[Schedule a Redelivery \(https://tools.usps.com/redelivery.htm\)](https://tools.usps.com/redelivery.htm)

Latest Update

This is a reminder to arrange for redelivery of your item before March 9, 2024 or your item will be returned on March 10, 2024. You may arrange redelivery by using the Schedule a Redelivery feature on this page or may pick up the item at the Post Office indicated on the notice.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivery Attempt: Action Needed

Reminder to Schedule Redelivery of your item before March 9, 2024

February 29, 2024

Notice Left (No Authorized Recipient Available)

MONTEREY, CA 93940

February 24, 2024, 11:12 am

Held at Post Office, At Customer Request

MONTEREY, CA 93940

February 13, 2024, 1:21 pm

Arrived at USPS Regional Facility

SAN JOSE CA DISTRIBUTION CENTER

February 12, 2024, 9:46 am

In Transit to Next Facility

February 11, 2024

- **Departed USPS Facility**
ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am
- **Arrived at USPS Facility**
ALBUQUERQUE, NM 87101
February 8, 2024, 11:08 pm
- **Hide Tracking History**

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



Schedule Redelivery



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4613 61

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To Chase, Leah Beata Olivia 685 Mangrove Trl. Saginaw, TX 76131 24169 - Steward Pest Control	
Street and Ap. City, State, Zip	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700752461361

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your item was delivered to an individual at the address at 1:10 pm on February 13, 2024 in FORT WORTH, TX 76131.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivered

Delivered, Left with Individual

FORT WORTH, TX 76131
February 13, 2024, 1:10 pm

Arrived at USPS Regional Facility

FORT WORTH TX DISTRIBUTION CENTER
February 12, 2024, 8:24 am

In Transit to Next Facility

February 11, 2024

Departed USPS Facility

ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101
February 8, 2024, 11:08 pm

● Hide Tracking History

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 3439 46

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	
Street	Craig Jr., Robert Lee 9816 Slide Road, Suite 201
City	Lubbock, TX 79424
	24169 - Steward Post Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700725343946

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your item was delivered to an individual at the address at 12:12 pm on February 12, 2024 in LUBBOCK, TX 79424.

Get More Out of USPS Tracking:

[USPS Tracking Plus®](#)

Feedback

Delivered

Delivered, Left with Individual

LUBBOCK, TX 79424

February 12, 2024, 12:12 pm

Arrived at USPS Regional Facility

LUBBOCK TX DISTRIBUTION CENTER

February 10, 2024, 7:03 am

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:02 pm

[Hide Tracking History](#)

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 3439 60

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

Street and /
Daughtrey, Alicia F. Williams
864 Jerry Lane

City, State,
Bedford, TX 76022-7307
24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700725343960

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

We attempted to deliver your item at 2:39 pm on February 13, 2024 in BEDFORD, TX 76022 and a notice was left because an authorized recipient was not available.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivery Attempt

Notice Left (No Authorized Recipient Available)

BEDFORD, TX 76022

February 13, 2024, 2:39 pm

Arrived at USPS Regional Facility

FORT WORTH TX DISTRIBUTION CENTER

February 12, 2024, 8:24 am

In Transit to Next Facility

February 11, 2024

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:08 pm

● Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 3437 93

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
<i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	\$ _____
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	\$ _____
Total Postage and Fees	\$ _____
Sent To	
Street and	Dreessen, Cecile Marie PO Box 1370
City, State	Poulsbo, WA 98370 24169 - Steward Pest Control
PS Form 3800, January 2023 PSN 7550-02-000-9047 See Reverse for Instructions	



ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700725343793

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your item was picked up at the post office at 3:40 pm on February 26, 2024 in POULSBO, WA 98370.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivered

Delivered, Individual Picked Up at Post Office

POULSBO, WA 98370

February 26, 2024, 3:40 pm

Available for Pickup

POULSBO

19240 JENSEN WAY NE

POULSBO WA 98370-6100

M-F 0830-1700; SAT 1000-1400

February 12, 2024, 11:45 am

Arrived at Post Office

POULSBO, WA 98370

February 12, 2024, 11:44 am

Departed USPS Regional Facility

TACOMA WA DISTRIBUTION CENTER

February 10, 2024, 10:13 am

Arrived at USPS Regional Facility

TACOMA WA DISTRIBUTION CENTER

- February 10, 2024, 4:56 am
- Departed USPS Facility**
ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am
- Arrived at USPS Facility**
ALBUQUERQUE, NM 87101
February 8, 2024, 11:08 pm
- Hide Tracking History**

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4591 46

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees <i>(check box, add fee as appropriate)</i>	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$



Sent To	
Street and Apt. No., or PO Box No.	Eight Energy, Inc. 3804 Saint Andrews Ct. Midland, TX 79707
City, State, ZIP+4®	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752459146

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Delivered

Out for Delivery

Preparing for Delivery

Moving Through Network

In Transit to Next Facility

February 16, 2024

Arrived at USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER

February 10, 2024, 4:54 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

Feedback

February 8, 2024, 11:08 pm

Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4590 23

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OFFICIAL USE

Certified Mail Fee

\$ _____

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

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

Postage

\$ _____

Total Postage and Fees

\$ _____



Sent To

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

City, State, ZIP+4® _____

Fredricka H. Crain Trust
 c/o Travis Property Management
 PO Box 56429
 Houston, TX 77256-6429
 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700752459023

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivered

Out for Delivery

Preparing for Delivery

Moving Through Network

In Transit to Next Facility

February 16, 2024

Arrived at USPS Regional Facility

NORTH HOUSTON TX DISTRIBUTION CENTER

February 10, 2024, 2:57 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:08 pm

● Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4590 61

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



Sent To	
Street and Apt. No., or PO Box No.	GTR Investments, LLC 4536 Mill Run Rd Dallas, TX 75244
City, State, ZIP+4®	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-6047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752459061

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your item was delivered to an individual at the address at 5:26 pm on February 12, 2024 in DALLAS, TX 75244.

Get More Out of USPS Tracking:

[USPS Tracking Plus®](#)

Feedback

Delivered

Delivered, Left with Individual

DALLAS, TX 75244

February 12, 2024, 5:26 pm

Arrived at USPS Regional Facility

DALLAS TX DISTRIBUTION CENTER

February 10, 2024, 4:35 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:08 pm

[Hide Tracking History](#)

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 07J0 5270 0752 4590 09

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____ Postage \$ _____ Total Postage and Fees \$ _____	
Sent To Street and Apt. No., or PO Box No. _____ City, State, ZIP+4® _____	
Helton, Janice S. 6520 Lake Forest Lane Sachse, TX 75048 24169 – Steward Pest Control	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752459009

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your item could not be delivered on February 27, 2024 at 3:06 pm in GARLAND, TX 75044. It was held for the required number of days and is being returned to the sender.

Get More Out of USPS Tracking:

[USPS Tracking Plus®](#)

Feedback

Alert

Unclaimed/Being Returned to Sender

GARLAND, TX 75044
February 27, 2024, 3:06 pm

Notice Left (No Authorized Recipient Available)

SACHSE, TX 75048
February 12, 2024, 11:21 am

Arrived at USPS Regional Facility

COPPELL TX DISTRIBUTION CENTER
February 10, 2024, 10:17 am

Departed USPS Facility

ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:08 pm

Hide Tracking History

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4588 59

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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and Apt. No., or PO Box No.	Howard H. Cone Trust "A", u/w/o Hubert E. Cone c/o Howard H. Cone, Trustee 1801 CR 289
City, State, ZIP+4®	Georgetown, TX 78628 24169 - Steward Pest Control
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752458859

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Delivered

Out for Delivery

Preparing for Delivery

Moving Through Network

In Transit to Next Facility

February 15, 2024

Arrived at USPS Regional Facility

AUSTIN TX DISTRIBUTION CENTER

February 10, 2024, 10:08 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

Feedback

February 8, 2024, 11:08 pm

Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4588 35

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and Apt. No., or PO Box No. _____ City, State, ZIP+4® _____	Humphrey, Trevor Scott 2300 Lighthouse Drive New Braunfels, TX 78130 24169 - Steward Pest Control
PS Form 3800, January 2023 PSN 7630-02-000-9047 - See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752458835

[Copy](#)

[Schedule a Redelivery \(https://tools.usps.com/redelivery.htm\)](https://tools.usps.com/redelivery.htm)

Latest Update

This is a reminder to arrange for redelivery of your item before March 5, 2024 or your item will be returned on March 6, 2024. You may arrange redelivery by using the Schedule a Redelivery feature on this page or may pick up the item at the Post Office indicated on the notice.

Get More Out of USPS Tracking:

[USPS Tracking Plus®](#)

Feedback

Delivery Attempt: Action Needed

Reminder to Schedule Redelivery of your item before March 5, 2024

February 25, 2024

Notice Left (No Authorized Recipient Available)

NEW BRAUNFELS, TX 78130

February 20, 2024, 3:13 pm

In Transit to Next Facility

February 19, 2024

Arrived at USPS Regional Facility

SAN ANTONIO TX DISTRIBUTION CENTER

February 17, 2024, 2:12 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

● **Arrived at USPS Facility**
 ALBUQUERQUE, NM 87101
 February 8, 2024, 11:08 pm

● **Hide Tracking History**

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



Schedule Redelivery



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4588 80

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	\$
Total Postage and Fees	\$



Sent To	Johnston, Mary Carolyn
Street and Apt. No., or PO Box No.	667 Yosemite Drive
	Indianapolis, IN 40217
City, State, ZIP+4®	24169 - Steward Post Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752458880

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

We attempted to deliver your item at 3:08 pm on February 12, 2024 in INDIANAPOLIS, IN 46217 and a notice was left because an authorized recipient was not available.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivery Attempt

Notice Left (No Authorized Recipient Available)

INDIANAPOLIS, IN 46217
February 12, 2024, 3:08 pm

Arrived at USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER
February 11, 2024, 11:28 am

In Transit to Next Facility

February 10, 2024

Departed USPS Facility

ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101
February 8, 2024, 11:08 pm

● Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4588 42

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OFFICIAL USE

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	
\$	
Total Postage and Fees	
\$	



Sent To	
Street and Apt. No., or PO Box No.	Lamoreaux, Kelly Renee 5075 East 52nd Street, Apt. B 203 Odessa, TX 79762-5186
City, State, ZIP+4®	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700752458842

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Delivered

Out for Delivery

Preparing for Delivery

Moving Through Network

In Transit to Next Facility

February 17, 2024

Arrived at USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER

February 12, 2024, 4:45 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

Feedback

February 8, 2024, 11:08 pm

● Hide Tracking History

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 3443 56

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To MQH Investments 11 Mariner Court Midland, TX 79705 24169 - Steward Pest Control	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700725344356

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Delivered

Out for Delivery

Preparing for Delivery

Moving Through Network

In Transit to Next Facility

February 16, 2024

Arrived at USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER

February 10, 2024, 4:54 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

Feedback

February 8, 2024, 11:00 pm

Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package


Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9569 0710 5270 0725 3444 62

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 Management Trust f/b/o Megan Elizabeth Humphrey c/o John S. Humphrey, Sole Trustee 16 Moss Rock Rd New Braunfels, TX 78130 <small>24169 - Steward Post Control</small>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700725344462

Copy

Schedule a Redelivery (<https://tools.usps.com/redelivery.htm>)

Latest Update

This is a reminder to arrange for redelivery of your item before March 5, 2024 or your item will be returned on March 6, 2024. You may arrange redelivery by using the Schedule a Redelivery feature on this page or may pick up the item at the Post Office indicated on the notice.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Delivery Attempt: Action Needed

Reminder to Schedule Redelivery of your item before March 5, 2024

February 25, 2024

Notice Left (No Authorized Recipient Available)

NEW BRAUNFELS, TX 78130

February 20, 2024, 3:23 pm

In Transit to Next Facility

February 18, 2024

Arrived at USPS Regional Facility

SAN ANTONIO TX DISTRIBUTION CENTER

February 17, 2024, 2:12 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Feedback

- Arrived at USPS Facility
ALBUQUERQUE, NM 87101
February 8, 2024, 11:00 pm
- Hide Tracking History

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



Schedule Redelivery



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 3442 57

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (<i>check box, add fee as appropriate</i>)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sen' --- Stri _____ City _____	OGTEE Consultants LLC 2905 Sentinel Drive Midland, TX 79701 24169 - Steward Pest Control
PS Form 3800, January 2023 PSN 7630-02-000-8047 See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700725344257

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your item was delivered to an individual at the address at 1:58 pm on February 13, 2024 in MIDLAND, TX 79701.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivered

Delivered, Left with Individual

MIDLAND, TX 79701

February 13, 2024, 1:58 pm

Notice Left (No Authorized Recipient Available)

MIDLAND, TX 79701

February 12, 2024, 2:04 pm

In Transit to Next Facility

February 11, 2024

Arrived at USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER

February 10, 2024, 4:54 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

● **Arrived at USPS Facility**
 ALBUQUERQUE, NM 87101
 February 8, 2024, 11:00 pm

● **Hide Tracking History**

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

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)	
<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	
Osborn Heirs Company, Ltd.,
d/b/a Osborn Heirs Company
SI 1250 NE Interstate 410 Loop #1100
C San Antonio, TX 78217
24169 - Steward Pest Control

PS Form 3800, January 2023. PSN 7530-02-000-6047 See Reverse for Instructions

9589 07J0 5270 0725 3443 1B

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700725344318

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your item was returned to the sender on February 21, 2024 at 7:48 am in SAN ANTONIO, TX 78209 because the address was vacant or the business was no longer operating at the location and no further information was available.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Alert

Vacant

SAN ANTONIO, TX 78209
February 21, 2024, 7:48 am

In Transit to Next Facility

February 20, 2024

Arrived at USPS Regional Facility

SAN ANTONIO TX DISTRIBUTION CENTER
February 17, 2024, 2:12 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:00 pm

Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 3443 49

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To	
Str Oswald Family Trust, dtd 4/27/1998 PO Box 280969	
City Lakewood, CO 80228-0969 24169 - Steward Pest Control	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700725344349

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your item was picked up at the post office at 8:34 am on February 21, 2024 in DENVER, CO 80226.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivered

Delivered, Individual Picked Up at Post Office

DENVER, CO 80226

February 21, 2024, 8:34 am

In Transit to Next Facility

February 18, 2024

Arrived at USPS Regional Facility

DENVER CO DISTRIBUTION CENTER

February 11, 2024, 7:13 am

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:00 pm

● Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 3441 96

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

OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	\$ _____
Total Postage and Fees	\$ _____



Street	Oswald III, Louis A. _____
City	PO Box 280969 _____
	Lakewood, CO 80228-0969 _____
	24169 - Steward Pest Control _____

PS Form 3800, January 2023 PSN 7530-02-000-8047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700725344196

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your item was picked up at the post office at 8:34 am on February 21, 2024 in DENVER, CO 80226.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivered

Delivered, Individual Picked Up at Post Office

DENVER, CO 80226

February 21, 2024, 8:34 am

In Transit to Next Facility

February 18, 2024

Arrived at USPS Regional Facility

DENVER CO DISTRIBUTION CENTER

February 11, 2024, 7:13 am

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:00 pm

● **Hide Tracking History**

What Do USPS Tracking Statuses Mean? (<https://faq.usps.com/s/article/Where-is-my-package>)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 3441 89

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$



Sent To

Patterson, Jean W. _____
 312 East 6th Street _____
 Denver City, TX 79323 _____
 24169 - Steward Pest Control _____

PS Form 3800, January 2023 PSN 7530-02-000-6047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700725344189

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your item was delivered to an individual at the address at 9:48 am on February 23, 2024 in DENVER CITY, TX 79323.

Get More Out of USPS Tracking:

[USPS Tracking Plus®](#)

Feedback

Delivered

Delivered, Left with Individual

DENVER CITY, TX 79323

February 23, 2024, 9:48 am

Notice Left (No Authorized Recipient Available)

DENVER CITY, TX 79323

February 12, 2024, 9:29 am

Arrived at USPS Regional Facility

LUBBOCK TX DISTRIBUTION CENTER

February 10, 2024, 7:03 am

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:00 pm

● **Hide Tracking History**

What Do USPS Tracking Statuses Mean? (<https://faq.usps.com/s/article/Where-is-my-package>)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 344J 72

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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	 <p>Postmark Here</p>
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 \$ _____	
Set Sir City	Payne, Kenneth Lynn 6948 Zak Road Bryan, TX 77808 24169 - Steward Pest Control
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700725344172

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivered

Out for Delivery

Preparing for Delivery

Moving Through Network

In Transit to Next Facility

February 15, 2024

Arrived at USPS Regional Facility

NORTH HOUSTON TX DISTRIBUTION CENTER

February 10, 2024, 2:57 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:00 pm

Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 3442 26

U.S. Postal Service™	
CERTIFIED MAIL® RECEIPT	
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For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	\$ _____
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	\$ _____
Total Postage and Fees	\$ _____
Sent To	
St:	Phipps, Lynda B. _____
Ad:	902 South Leon Ave. _____
City:	Monahans, TX 79756 _____
	24169 - Steward Pest Control
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700725344226

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Delivered

Out for Delivery

Preparing for Delivery

Moving Through Network

In Transit to Next Facility

February 15, 2024

Arrived at USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER

February 10, 2024, 4:54 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

Feedback

February 8, 2024, 11:00 pm

● **Hide Tracking History**

What Do USPS Tracking Statuses Mean? (<https://faq.usps.com/s/article/Where-is-my-package>)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 3440 80

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (<i>check box, add fee as appropriate</i>)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Rogers, Alyssa Nicole 4303 Dawn Circle Midland, TX 79707 24169 - Steward Pest Control	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700725344080

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your item was delivered to an individual at the address at 10:29 am on February 12, 2024 in MIDLAND, TX 79707.

Get More Out of USPS Tracking:

[USPS Tracking Plus®](#)

Feedback

Delivered

Delivered, Left with Individual

MIDLAND, TX 79707

February 12, 2024, 10:29 am

Arrived at USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER

February 10, 2024, 4:54 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:00 pm

[Hide Tracking History](#)

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0725 3440 59

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$



Sent To	
St	Ross Family Trust, dated 3/9/1990
	PO Box 86
	Midland, TX 79702
Ci	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700725344059

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your item could not be delivered on February 28, 2024 at 12:57 pm in MIDLAND, TX 79701. It was held for the required number of days and is being returned to the sender.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Alert

Unclaimed/Being Returned to Sender

MIDLAND, TX 79701

February 28, 2024, 12:57 pm

Out for Delivery

MIDLAND, TX 79701

February 13, 2024, 6:10 am

Arrived at Post Office

MIDLAND, TX 79701

February 12, 2024, 5:45 pm

In Transit to Next Facility

February 11, 2024

Arrived at USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER

February 10, 2024, 4:54 pm

- **Departed USPS Facility**
ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am
- **Arrived at USPS Facility**
ALBUQUERQUE, NM 87101
February 8, 2024, 11:00 pm
- **Hide Tracking History**

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4620 47

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$



Sent To

Street and Apt. No., or PO Box No. Steven J. Terrell & Associates, Inc.
23907 Sunset Sky

City, State, ZIP+4® Katy, TX 77494 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700752462047

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivered

Out for Delivery

Preparing for Delivery

Moving Through Network

In Transit to Next Facility

February 15, 2024

Arrived at USPS Regional Facility

NORTH HOUSTON TX DISTRIBUTION CENTER

February 10, 2024, 2:57 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:02 pm

● Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4621 08

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

OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$



Sent To	
Street and Apt. No., or PO Box No.	Terrell, David Allen 2310 Bahama Road Austin, TX 78733
City, State, ZIP+4®	24169 - Steward Post Control

PS Form 3800, January 2023 PSN 7530-02-600-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700752462108

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

We attempted to deliver your item at 4:16 pm on February 12, 2024 in AUSTIN, TX 78733 and a notice was left because an authorized recipient was not available.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivery Attempt

Notice Left (No Authorized Recipient Available)

AUSTIN, TX 78733

February 12, 2024, 4:16 pm

In Transit to Next Facility

February 11, 2024

Arrived at USPS Regional Facility

AUSTIN TX DISTRIBUTION CENTER

February 10, 2024, 3:44 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:02 pm

● **Hide Tracking History**

What Do USPS Tracking Statuses Mean? (<https://faq.usps.com/s/article/Where-is-my-package>)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4625 04

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$



Sent To	
Street and Apt. No., or PO Box No.	Terrell, James Michael 3912 113th Street Lubbock, TX 79423
City, State, ZIP+4®	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700752462504

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your item arrived at our USPS facility in COPPELL TX DISTRIBUTION CENTER on February 28, 2024 at 7:58 am. The item is currently in transit to the destination.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Moving Through Network

Arrived at USPS Regional Facility

COPPELL TX DISTRIBUTION CENTER
February 28, 2024, 7:58 am

In Transit to Next Facility

February 26, 2024

Departed USPS Regional Facility

LUBBOCK TX DISTRIBUTION CENTER
February 22, 2024, 10:35 pm

Arrived at USPS Regional Facility

LUBBOCK TX DISTRIBUTION CENTER
February 22, 2024, 8:51 am

Arrived at USPS Regional Facility

COPPELL TX DISTRIBUTION CENTER
February 20, 2024, 11:46 am

- **Forwarded**
LUBBOCK, TX
February 12, 2024, 8:36 am
- **Arrived at USPS Regional Facility**
LUBBOCK TX DISTRIBUTION CENTER
February 10, 2024, 7:03 am
- **Departed USPS Facility**
ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am
- **Arrived at USPS Facility**
ALBUQUERQUE, NM 87101
February 8, 2024, 11:02 pm
- **Hide Tracking History**

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4619 65

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	Terrell, Ky J.
Street and Apt. No., or PO Box No.	13407 Wisterwood Street
City, State, ZIP+4®	Austin, TX 78729
	24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752461965

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your item was delivered to an individual at the address at 2:56 pm on February 14, 2024 in AUSTIN, TX 78717.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivered

Delivered, Left with Individual

AUSTIN, TX 78717

February 14, 2024, 2:56 pm

Redelivery Scheduled

AUSTIN, TX 78729

February 12, 2024

Notice Left (No Authorized Recipient Available)

AUSTIN, TX 78729

February 12, 2024, 1:42 pm

In Transit to Next Facility

February 11, 2024

Arrived at USPS Regional Facility

AUSTIN TX DISTRIBUTION CENTER

February 10, 2024, 3:44 pm

- **Departed USPS Facility**
ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am
- **Arrived at USPS Facility**
ALBUQUERQUE, NM 87101
February 8, 2024, 11:02 pm
- **Hide Tracking History**

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4624 50

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and Apt. No., or PO Box No. _____ City, State, ZIP+4® _____	
Tipps, Stephen G. 2115 Kingston Street Houston, TX 77019 24169 - Steward Pest Control	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752462450

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

We could not access the delivery location to deliver your package at 6:58 pm on February 12, 2024 in HOUSTON, TX 77019. We will redeliver on the next delivery day. No action needed.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Alert

No Access to Delivery Location

HOUSTON, TX 77019
February 12, 2024, 6:58 pm

In Transit to Next Facility

February 12, 2024

Arrived at USPS Regional Facility

NORTH HOUSTON TX DISTRIBUTION CENTER
February 10, 2024, 2:57 pm

Departed USPS Facility

ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101
February 8, 2024, 11:02 pm

● Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4609 06

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and Apt. No., or PO Box No. Williams, Malcham Eli 3355 Jonathan Lane City, State, ZIP+4® Early, TX 76802 24169 - Steward Pest Control	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752460906

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your item could not be delivered on February 28, 2024 at 3:25 pm in BENJAMIN, TX 79505. It was held for the required number of days and is being returned to the sender.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Alert

Unclaimed/Being Returned to Sender

BENJAMIN, TX 79505
February 28, 2024, 3:25 pm

Available for Pickup

BENJAMIN
105 S HINTON ST
BENJAMIN TX 79505-9998
M-F 1130-1530
February 13, 2024, 12:22 pm

Arrived at Post Office

BENJAMIN, TX 79505
February 13, 2024, 12:21 pm

Departed USPS Regional Facility

ABILENE TX DISTRIBUTION CENTER
February 12, 2024, 8:37 pm

Arrived at USPS Regional Facility

ABILENE TX DISTRIBUTION CENTER
February 12, 2024, 12:20 pm

In Transit to Next Facility

February 11, 2024

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:08 pm

Hide Tracking History

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4608 38

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$



Sent To	
Street and Apt. No., or PO Box No.	Williams, Mark Eric 321 W. Autumn Creek Dr. Saratoga Springs, UT 84045
City, State, ZIP+4®	24169 - Steward Post Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700752460838

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your item arrived at the LEHI, UT 84043 post office at 5:04 pm on February 12, 2024 and is ready for pickup. Your item may be picked up at LEHI, 333 E MAIN ST, LEHI, UT 840439998, M-F 0830-1730; SAT 0830-1530.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Available for Pickup

Available for Pickup

LEHI
333 E MAIN ST
LEHI UT 84043-9998
M-F 0830-1730; SAT 0830-1530
February 12, 2024, 5:04 pm

Redelivery Scheduled

SARATOGA SPRINGS, UT 84045
February 12, 2024

Notice Left (No Authorized Recipient Available)

SARATOGA SPRINGS, UT 84045
February 12, 2024, 11:50 am

In Transit to Next Facility

February 11, 2024

Departed USPS Regional Facility

Feedback

SALT LAKE CITY UT NETWORK DISTRIBUTION CENTER
February 10, 2024, 9:22 am

Arrived at USPS Regional Facility

SALT LAKE CITY UT NETWORK DISTRIBUTION CENTER
February 10, 2024, 9:09 am

Departed USPS Facility

ALBUQUERQUE, NM 87101
February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101
February 8, 2024, 11:08 pm

Hide Tracking History

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4608 45

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OFFICIAL USE

Certified Mail Fee

\$

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

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

Postage

\$

Total Postage and Fees

\$

Sent To

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

City, State, ZIP+4®-----



Williams, Matthew Elias
 702 S Avenue F
 Knox City, TX 79529-2106
 24169 - Steward Pest Control

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

FAQs >

Tracking Number:

Remove X

9589071052700752460845

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

Latest Update

Your item was picked up at the post office at 1:31 pm on February 26, 2024 in KNOX CITY, TX 79529.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivered

Delivered, Individual Picked Up at Post Office

KNOX CITY, TX 79529

February 26, 2024, 1:31 pm

Notice Left (No Authorized Recipient Available)

KNOX CITY, TX 79529

February 12, 2024, 2:06 pm

Departed USPS Regional Facility

ABILENE TX DISTRIBUTION CENTER

February 10, 2024, 7:50 pm

Arrived at USPS Regional Facility

ABILENE TX DISTRIBUTION CENTER

February 10, 2024, 9:34 am

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

● **Arrived at USPS Facility**
 ALBUQUERQUE, NM 87101
 February 8, 2024, 11:08 pm

● **Hide Tracking History**

[What Do USPS Tracking Statuses Mean? \(https://faq.usps.com/s/article/Where-is-my-package\)](https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4608 52

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OFFICIAL USE

Certified Mail Fee	\$ _____
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	\$ _____
Total Postage and Fees	\$ _____



Sent To	
Street and Apt. No., or PO Box No.	Williams, Myranda Eve 508 Cortes St.
City, State, ZIP+4®	Krugerville, TX 76227 24169 - Steward Pest Control

PS Form 3800, January 2023 PSN 7530-02-000-9047. See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752460852

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

We attempted to deliver your item at 11:36 am on February 13, 2024 in AUBREY, TX 76227 and a notice was left because an authorized recipient was not available.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivery Attempt

Notice Left (No Authorized Recipient Available)

AUBREY, TX 76227

February 13, 2024, 11:36 am

Arrived at USPS Regional Facility

FORT WORTH TX DISTRIBUTION CENTER

February 12, 2024, 8:24 am

In Transit to Next Facility

February 11, 2024

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:08 pm

● Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

FAQs

9589 0710 5270 0752 4609 51

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	\$



Sent To	
Street and Apt. No., or PO Box No	Wyotex Oil Company PO Box 280969 Lakewood, CO 80228-0969
City, State, ZIP+4®	24169 - Steward Post Control

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

ALERT: SEVERE WEATHER CONDITIONS ACROSS THE U.S. MAY DELAY FINAL DELIVERY OF Y...

USPS Tracking®

[FAQs >](#)

Tracking Number:

[Remove X](#)

9589071052700752460951

[Copy](#)

[Add to Informed Delivery \(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

Latest Update

Your item was picked up at the post office at 8:34 am on February 21, 2024 in DENVER, CO 80226.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Feedback

Delivered

Delivered, Individual Picked Up at Post Office

DENVER, CO 80226

February 21, 2024, 8:34 am

In Transit to Next Facility

February 15, 2024

Arrived at USPS Regional Facility

DENVER CO DISTRIBUTION CENTER

February 11, 2024, 7:13 am

Departed USPS Facility

ALBUQUERQUE, NM 87101

February 9, 2024, 8:19 am

Arrived at USPS Facility

ALBUQUERQUE, NM 87101

February 8, 2024, 11:02 pm

● Hide Tracking History

[What Do USPS Tracking Statuses Mean?](https://faq.usps.com/s/article/Where-is-my-package) (https://faq.usps.com/s/article/Where-is-my-package)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ^

Track Another Package

Enter tracking or barcode numbers

Need More Help?

Contact USPS Tracking support for further assistance.

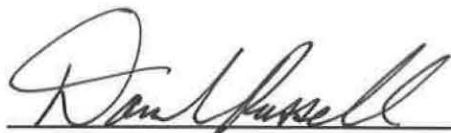
FAQs

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
February 14, 2024
and ending with the issue dated
February 14, 2024.



Publisher

Sworn and subscribed to before me this
14th day of February 2024.



Business Manager

My commission expires
January 29, 2027

(Seal) 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 February 14, 2024

This is to notify all interested parties, including A&P Family Limited Partnership; Agel, Ronald C.; Allen, Wanda Merlene; Andrews, Christopher Michael; Andrews, Mark Lane; Andrews, Matt Lynn; Antweil, Barry; Antweil, Mark; Antweil, Mary Frances; Apilado Resources, LLC; Ashton, Alisa Williams; B. Davis Gentry GST Trust; Barrett Oklahoma Interests, Ltd.; Blackburn, Cynthia H.; Blasco, LLC; BMD Exploration, LLC; Bowerman, Jan Cone; Bud & Mary Lou Flocchini Family LP; C & I Powell Revocable Living Trust, dated 6/16/1978; C.R. Hutcheson 1967 Trust; Caldwell, Mark M.; Chalfant Family Partnership, LP; Chase, Leah Beata Olivia; Chatfield Company; Christa L. Leavell and husband, Gregory Leavell; Citadel Oil & Gas Corporation; Cone Jr., James Raymond; Cone, Kenneth G.; Cone, Thomas R.; Copperhead Resources, LLC; Craig Jr., Robert Lee; Dangle/Speight Family Oil and Gas I, LP; Daughtrey, Alicia F. Williams; Davidson, Ruthanne; Kortney Williams DeBock; Dorchester Minerals, L.P.; Dotson-Ice, Jan C.; Downing, William Terrell; Dreessen, Cecile Marie; Drew R. Scott Family Minerals, LLC; Eckels, Christopher R.F.; Edward T. Dreessen, Jr. & Kathleen G. Dreessen Living Trust, dated 6/13/2014; Eight Energy, Inc.; Elizabeth Jane Kay Family Trust; Elk Range Royalties, LP; Estate of Ruth Lucille Terrell Smith; Fall River Resources, Inc.; Faraway Farms, Ltd.; Ferguson Marital Trust, u/w/o John Dickson Ferguson Jr.; FFF, Inc.; Fleet Dickey Mineral Properties, LLC; Fleet Family Mineral Properties, Inc.; Frannifin Minerals, LLC; Fredricka H. Crain Trust; G&M Oil, LLC; Gallman, Tamara Terrell; Gamble, Jolene Terrell; Garnett, John B.; George M. O'Brien and wife, Susan O'Brien; GTR Investments, LLC; Guitar, Jane Ellen; Harle, Inc.; Heller, Melynda E.; Helton, Janice S.; Higgs, David A.; Holladay, Ben R.; Holladay, Cathy S.; Holladay, Montie W.; Hoshi Kanri LLC; Howard H. Cone Trust "A", u/w/o Hubert E. Cone; Humphrey, Trevor Scott; Jesse A. Cone Trust "A", u/w/o Hubert E. Cone; John Robert Cone Trust "A", u/w/o Hubert E. Cone; Johnston, Mary Carolyn; Jonathan S. Roderick Trust, dated 2/8/2007; Katy Pipeline & Production Corporation; Kennedy Minerals, Ltd.; Kettle Investment I LLC; Kurt Frederick Oheim Trust Dated January 1, 2017; Lamoreaux, Kelly Renee; Leavell, Michelle C.; M.W. Oil Investment Company, Inc.; Management Trust f/b/o Megan Elizabeth Humphrey; Martin, Stacy Lynn Terrell; Mary Cone Lewis Trust "A", u/w/o Hubert E. Cone; McBride Oil and Gas Corporation; McCarthy Oil & Gas, LLC; McCown, Cathie Cone; McCoy, Sandra P.; Mekusukey Oil Company, LLC; Melton, Shelly Shelton; Misurek, Cheryl; MMS Royalties, LLC; Moeller, Gregory Aaron; Moore, Joyce E.; Motowi, LLC; MQH Investments; OGTEE Consultants LLC; Osborn Heirs Company, Ltd., d/b/a Osborn Heirs Company; Oswald Family Trust, dated 4/27/1998; Oswald III, Louis A.; Patterson, Jean W.; Payne, Kenneth Lynn; PetroVen Inc.; Phipps, Lynda B.; Piani, Shanna Ebers; Progeny Petroleum LLC; Pumpkin Buttes, LLC; Ralston, Mitzi Carolyn Terrell; Randall, Joan; Robert Edward Eckels Jr. LLC; Rock House Resources, LLC; Rogers, Alyssa Nicole; Root Family Holdings, LLC; Ross Family Trust, dated 3/9/1990; RRA Minerals LLC; Russell N. McInturf Trust; Salinas, Brandie; Solis Resources Ltd.; Spradlin, Charles Andrew; Stephenson, Kerry Jo; Steven J. Terrell and Associates, Inc.; Sugarberry Minerals LP; Terra Nova Energy, LP; Terrell III, Jennings Bryan; Terrell, Britton Andrew; Terrell, Charles Ray; Terrell, David Allen; Terrell, Gary T.; Terrell, James Michael; Terrell, Ky J.; Terrell, Larry Dale; Terrell, Ralph Douglas; Terrell, Robert Drake; Terry A. Cone Trust "A", u/w/o Hubert E. Cone; Terry G. McInturf Trust; The Long Trusts; Tipps, Stephen G.; Toles-Com-Ltd. LLC; W.B. Osborn Oil and Gas Operations; Whittington, Judith Hunt; William C. Bahlburg; William N. Heiss Profit Sharing Plan; Williams Jr., Kenneth D.; Williams Trust, dated 4/10/1996, f/b/o MMP; Williams, Danny R.; Williams, George H.; Kay Elkins Bingham Williams; Kolby Williams; Williams, Larry D.; Williams, Malcham Eli; Williams, Mark Eric; Williams, Matthew Elias; Williams, Myranda Eve; Williams, Patsy Irene; Williams, Raymond B.; Williams, Stella Evelyn; Williams, Steven B.; Wood, Kimberly Ann; Wyotex Oil Company; and their successors and assigns, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Steward Energy II, LLC (Case No. 24169). The hearing will be conducted on March 7, 2024 in a hybrid fashion, both in-person at the Energy, Minerals, Natural Resources Department, Wendell Chino Building, Pecos Hall, 1220 South St. Francis Drive, 1st Floor, Santa Fe, NM 87505 and via the WebEx virtual meeting platform. To participate virtually, see the instructions posted on the OCD Hearings website: <https://www.emnrd.nm.gov/ocd/hearing-info/>. Steward Energy II, LLC ("Applicant") seeks an order: (1) establishing a 320-acre, more or less, standard, overlapping horizontal spacing unit comprised of the W/2 W/2 of Sections 22 and 27, Township 13 South, Range 38 East, Lea County, New Mexico ("Unit"); and (2) pooling all uncommitted interests in the San Andres formation underlying the Unit. Applicant seeks to dedicate the Unit to the **Pest Control Fee 6H** well ("Well"), which will be drilled from a surface hole location in the SW/4 SW/4 (Unit M) of Section 15 to a bottom hole location in the SW/4 SW/4 (Unit M) of Section 27. The completed interval of the Well will be orthodox. The Unit will partially overlap with the spacing units for the Roof Pizza Fee 5H well (API #30-025-49481), the Vamonos Fee 4H well (API #30-025-51639), and the Vamonos Fee 5H well (API #30-025-49708). Also to be considered will be the cost of drilling and completing the Well and the allocation of the costs, the designation of Applicant as operator of the Well, and a 200% charge for the risk involved in drilling and completing the Well. The Well is located approximately 13.8 miles southeast of Tatum, New Mexico.
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Steward Energy II, LLC
Case No. 24169
Exhibit C-4