

ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
 - Engineering Bureau -
 1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Application Acronyms:

- [NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]
- [DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
- [PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
- [WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
- [SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
- [EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

RECEIVED
 2007 OCT 19 AM 11 55

- [1] **TYPE OF APPLICATION** - Check Those Which Apply for [A]
- [A] Location - Spacing Unit - Simultaneous Dedication
 NSL NSP SD
- Check One Only for [B] or [C]
- [B] Commingling - Storage - Measurement
 DHC CTB PLC PC OLS OLM
- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
 WFX PMX SWD IPI EOR PPR
- [D] Other: Specify _____
- [2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or Does Not Apply
- [A] Working, Royalty or Overriding Royalty Interest Owners
- [B] Offset Operators, Leaseholders or Surface Owner
- [C] Application is One Which Requires Published Legal Notice
- [D] Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
- [E] For all of the above, Proof of Notification or Publication is Attached, and/or,
- [F] Waivers are Attached
- [3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is accurate and complete to the best of my knowledge. I also understand that no action will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

PAUL C. THOMPSON Paul C. Thompson AGENT 9/12/07
 Print or Type Name Signature Title Date

cell phone PAUL@WALSHENG.NET
 575-320-3194 e-mail Address

Paul Thompson

71629 



ENGINEERING & PRODUCTION CORP.

Petroleum Engineering Consulting
Lease Management
Contract Pumping

7415 East Main
Farmington, New Mexico 87402
(505) 327-4892 • Fax: (505) 327-9834

September 10, 2007

Mr. Mark Fesmire, P.E.
NM Oil and Gas Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Re: Surface Commingling
Great Western Drilling Co.
J. E. Decker #9, #10, & #11
Basin Fruitland Coal
Section 7 and 8, T32N, R11W
and Section 12, T32N R12W

Dear Mr. Fesmire,

Great Western Drilling Company requests permission to surface commingle the gas production from the above mentioned wells so they can utilize a common gathering and metering station to a low pressure line. The three wells are on different Federal leases but are all producing from the Fruitland Coal pool.

1. Proposed System: The wells are to be commingled upstream from a CPD meter so they can utilize a common flow line. The existing Enterprise meter located in Section 8, T32N, R11W is northeast of the Decker #11 well pad. Allocation meters are installed on all three wells. The gas flows into Enterprises' gathering system and they will maintain the CPD meter. The Fruitland Coal wells do not produce liquid hydrocarbons but if they ever did, the liquids will not be commingled. ✓

The working and royalty interests in the three wells vary. Please refer to Exhibit #1 which lists each wells ownership. The interest owners of all three wells have been notified of this application by certified mail. Copies of these letters are attached in Exhibit #2.

The actual commercial value of the commingled production will not be less than the sum of the values of the production from each well.



2. Wells, Locations, and Lease numbers: Exhibit #3 is a topo map showing the location of the wells and the existing flow lines. Lease numbers, locations, and Lat.-Long. numbers for each well are included on Exhibit #3. All three wells are on fee surface lands. The BLM has received a copy of this application. See attached letter (Exhibit #5).

3. Schematic Diagram: Exhibit #4 is a schematic diagram of the proposed facilities.

4. Fuel Gas: There are no common facilities that use fuel gas. All separator fuel is used prior to the allocation meters on each well.

5. Mechanical Integrity: The flow lines from each well to the CDP meter are buried 4" steel with a pressure rating of 3,330 psig. The pipeline will be tested to the maximum wellhead pressure of the Fruitland wells.

6. Gravity/BTU: The BTU content of the three Fruitland Coal wells is similar. Enterprise will take semi-annual gas samples and calculate the Btu values. No liquid hydrocarbons are produced or will be commingled.

7. Allocation Formula: Since all three wells will have allocation meters, the production assigned to each well will be the integrated volume from the allocation meter adjusted to match the Enterprise CDP meter. *add.*

8. Line Purging: We do not anticipate purging the line very often, but when we do the lost gas will be allocated between the three wells.

9. Purged Fluids: We do not anticipate having to purge the system, however any fluids purged will be natural gas, condensate, and produced water. Any line purging will be done to a tank.

10. Meter Calibration: The allocation and CPD meters will be calibrated once each quarter. Enterprise Field Service will maintain and calibrate the CPD meter.



11. Gas Analysis Schedule: Enterprise Field Service will analyze the gas from the CPD meter twice a year.

12. Effective date: The pipeline system will be put into service as soon as approval is received.

Sincerely,

A handwritten signature in black ink that reads "Paul C. Thompson" with a long horizontal flourish extending to the right.

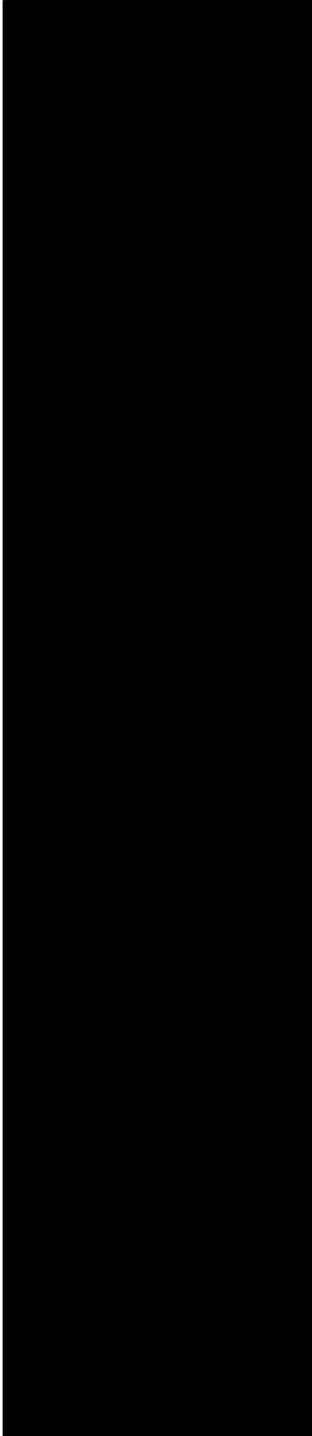
Paul C. Thompson, P.E.
Agent
Great Western Drilling Co.

JIB DIVISION OF INTEREST LISTING
All Decks

	OWNER	OWNER NAME	DDI	PREPAY	COST	SUBLDGR	DATA
				PROPERTY	CTR	NUMBER	EXPR
02835	DECKER, J E #9	Deck: A Act: Y Eff Date: 01/01/91	DECKER, J E #9				
	0251366	DAVOIL OIL & GAS LTD P O BOX 122269 FORT WORTH TX 76121-2269	0.35524000	02835	0		N
	9999901	GREAT WESTERN DRILLING COMPANY P O BOX 1659 MIDLAND TX 79702-1659	0.64476000	02835	0		N
*** DECK TOTAL 2 OWNERS				1.00000000			

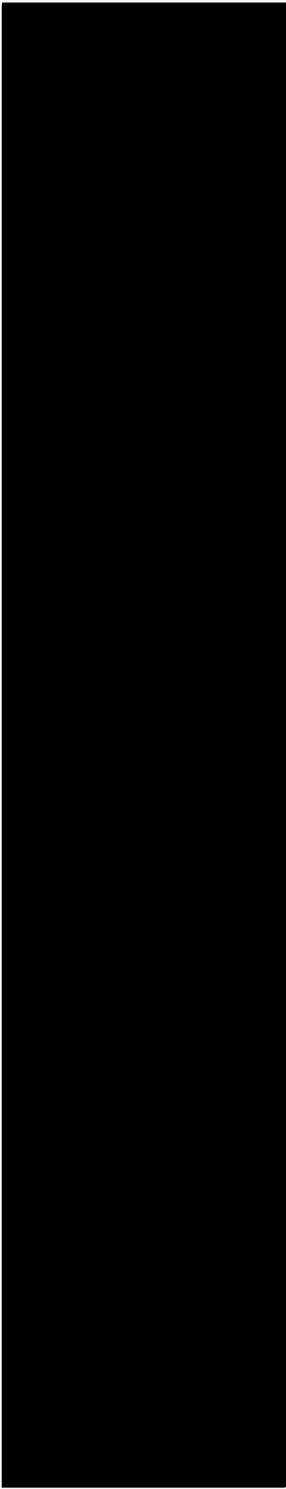
REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

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OWNER	SUB				DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F	
02835 DECKER, J E #9		G	01/91	DECKER, J E #9													County: SAN JUAN	State: NM
0116200	JULIE ANN ANTWEIL TRUST 4408 CANYON COURT N.E. ALBUQUERQUE NM 87111-0000			0.00028261	R	Y	Y	N							0		N	
0117913	KRISTIN DAWN BAKER ASHTON SOLE AND SEPARATE PROPERTY 4 MIDDLELOOP ROAD CLANCY MT 59634			0.00483402	O	Y	Y	N							0		N	
0211166	ALVIN DEWEY BAKER JR P O BOX 12992 EL PASO TX 79913-0992			0.00483403	O	Y	Y	N							0		N	
0212725	JANE K BEARD 4104 LOVERS LANE DALLAS TX 75225-0000			0.00008184	R	Y	Y	Y							0		N	
0212730	W THOMAS BEARD, III P O BOX 668 ALPINE TX 79830-0000			0.00008185	R	Y	Y	Y							0		N	
0216567	BONANZA CREEK MINERALS LLC 2321 CANDELARIA NS ALBUQUERQUE NM 87107			0.00037415	O	S	Y	Y	N						0		N	
0217840	DONALDSON BROWN AC 1 MERCANTILE SAFE DEPOSIT & TR P O BOX 1183 ABINGDON MD 21009-0000			0.00468740	O	Y	Y	N							0		N	
0218590	BURLINGTON RESOURCES LP OIL & GAS COMPANY 22295 NETWORK PLACE CHICAGO IL 60673-1222			0.01367190	O	Y	Y	N							0		N	
0234135	SANDRA MOSELEY CHAPMAN WELLS FARGO BANK (COLORADO) NA TRUST NATIONAL RESOURCES P O BOX 5383 DENVER CO 80217-5383			0.00167905	O	Y	Y	Y							0		N	
0251366	DAVOIL OIL & GAS LTD P O BOX 200292 DALLAS TX 75320-0292			0.26595287	W	Y	Y	Y							0		N	



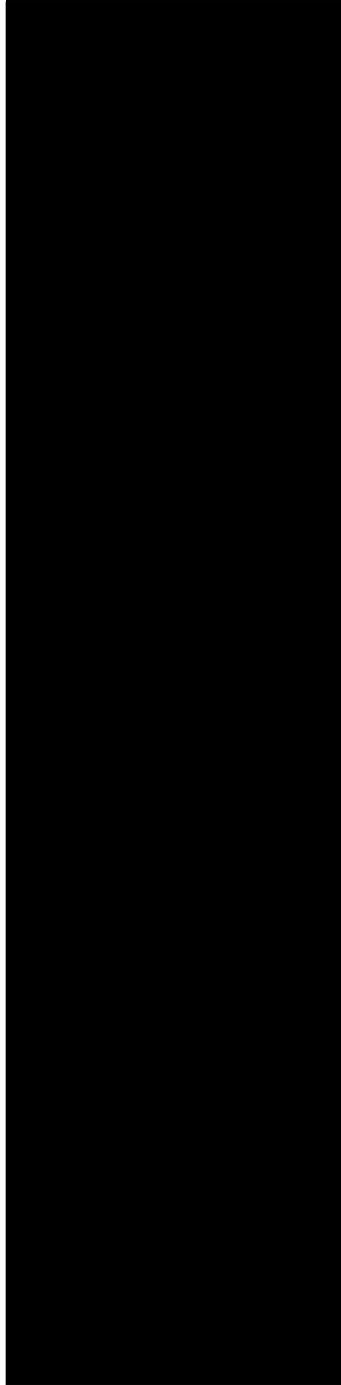
REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A	
					DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F
02835 DECKER, J E #9																	
G 01/91 (Continued)																	
0252719	DENNIS EGAN DECKER 2012 COUNTY ROAD 214 DURANGO CO 81303			0.00156250	R	Y	Y	N						0		N	
0252720	DECKER FAMILY LIVING TRUST JAMES W DECKER AND/OR LAVERNE DECKER TRUSTEES 712 LIGTH PLANT ROAD AZTEC NM 87410-0000			0.00781250	R	Y	Y	N						0		N	
0252721	JAYE ELMER DECKER 280COUNTY ROAD 1332 LA PLATA NM 87418			0.00156250	R	Y	Y	N						0		N	
0252722	JOHN AUSTIN DECKER 6145 COUNTY ROAD SS COPE CO 80812			0.00156250	R	Y	Y	N						0		N	
0252723	KENNON DECKER 141 COUNTY ROAD 2300 AZTEC NM 87410			0.00156250	R	Y	Y	N						0		N	
0252725	MARGARET L DECKER 413 STATE HIGHWAY 140 HESPERUS CO 81326-0000			0.00781250	R	Y	Y	Y						0		N	
0256384	KIM R DOUGHERTY TRUST P O BOX 702 RANCHO SANTA FE CA 92067			0.00055968	R	Y	Y	N						0		N	
0394303	GIBSON FAMILY TRUST P O BOX 546 TESUQUE NM 87574			0.00037388	O	Y	Y	N						0		N	
0394307	BRIAN D GIBSON 66 C ARROYO HONDO TRAIL SANTA FE NM 87508			0.00012463	O	Y	Y	N						0		N	
0396300	DONNA GOETTING 9020 W 82ND STREET OVERLAND PARK KS 66204-0000			0.00744050	R	Y	Y	Y						0		N	
0411230	MABEL GLENN HAM REVOCABLE TR KATHLYN NORA BLACK, TRUSTEE P O BOX 15040 SANTA FE NM 87506-5040			0.00049850	O	Y	Y	N						0		N	



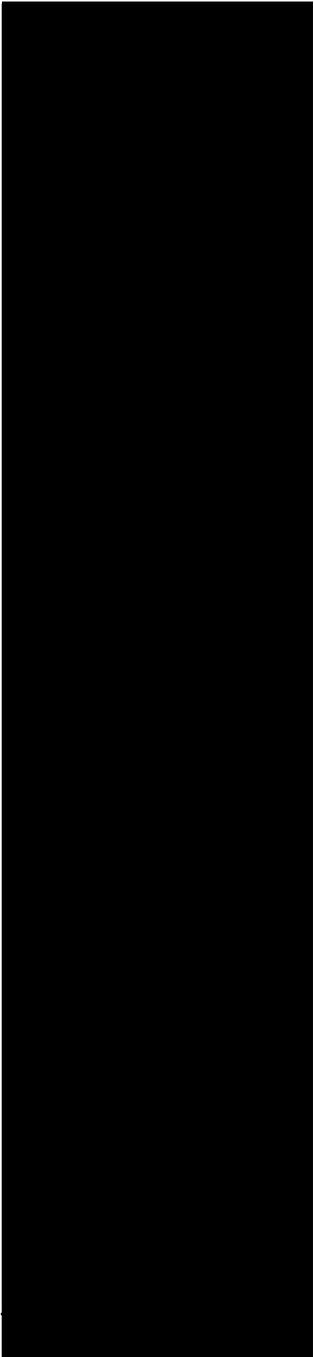
REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV EXMPT	TAX EXMPT	TAX FREE	CST CTR	SUB A LGR
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G 01/91 (Continued)															
0412305	H D S GROUP INC P O BOX 5075 GEORGETOWN TX 78627-5075			0.00585937	O	Y	Y	N						0	N
0495895	J K L CO 505 N BIG SPRING SUITE 403 MIDLAND TX 79701			0.00585937	O	Y	Y	N						0	N
0535711	MORTIMER A KLINE JR 11777 SAN VINCENTE BLVD SUITE 520 LOS ANGELES CA 90049			0.00556350	O	Y	Y	Y						0	N
0572710	HERBERT KOKERNOT LEA 300 EAST BROW RD LOOKOUT MTN TN 37350			0.00024553	R	Y	Y	Y						0	N
0572715	MICHAEL SCOTT LEA 4251 S ALLISON STREET LAKEWOOD CO 80235-0000			0.00016369	R	S	Y	Y	Y					0	N
0591475	MARQUITA MOSELEY MAYTAG P O BOX 1024 SUN VALLEY ID 83353-0000			0.00166910	R	Y	Y	Y						0	N
0594463	GURDON RANSOM MILLER III 704 CANYON CREST SIERRA MADRE CA 91024			0.00037467	O	Y	Y	Y						0	N
0594463	GURDON RANSOM MILLER III 704 CANYON CREST SIERRA MADRE CA 91024			0.00037467	O	Y	Y	N						0	N
0594474	MILNER TRUST A J ARTHUR GREENFIELD & CO LLP ATTN: HELEN WU 924 WESTWOOD BLVE STE 1000 LOS ANGELES CA 90024			0.00667610	R	Y	Y	N						0	N
0594490	DEPT OF THE INTERIOR-M M S ROYALTY MANAGEMENT PROGRAM P O BOX 5810 T A DENVER CO 80217-0000			0.01636910	F	Y	Y	N						0	N



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PROPERTY		DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A	
OWNER	SUB				DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F
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0596525	BARBARA J MOSELEY 7412 RIO GRANDE BLVD ALBUQUERQUE NM 87107-0000			0.00164900	R	Y	Y	N						0		N	
0732810	SHARYN PERKINS 9835 N SMALLEY KANSAS CITY MO 64157-0000			0.00744050	R	Y	Y	Y						0		N	
0766320	MARY F ROBERTS P O BOX 2203 RUIDOSO NM 88355-2203			0.00966805	O	Y	Y	N						0		N	
0766541	ROYALTY CLEARINGHOUSE LTD 401 CONGRESS AVENUE SUITE 1510 AUSTIN TX 78701			0.00009420	R	Y	Y	N						0		N	
0766552	SANDRA ROYCE TRUST 1605 GASCONY ROAD LEUCADIA CA 92024			0.00055969	R	Y	Y	N						0		N	
0766553	STEPHEN M ROYCE TRUST 727 NORTH RIOS AVE SOLANA BEACH CA 92075			0.00055968	R	Y	Y	N						0		N	
0792345	PATRICIA PENROSE SCHIEFFER BANK OF AMERICA NA, AGENT P O BOX 840738 DALLAS TX 75284-0738			0.03867170	O	Y	Y	N						0		N	
0794125	J L SHARP OR K B SHARP TRUSTEE SHARP TRUSTEES OF THE JAMES L SHARP AND KATHRYN B SHARP REV LIVING TRUST 1020 FOXWOOD LANE WYLIE TX 75098-0000			0.00009420	R	Y	Y	Y						0		N	
0794390	SINGER BROTHERS BANK OF OKLAHOMA DEPT 1063 P O BOX 2300 TULSA OK 74192-0000			0.00367389	R	Y	Y	N						0		N	



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PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A	
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02835 DECKER, J E #9																	
		G	01/91	(Continued)													
0795950	MICHAEL ALLEN SMITH 19240 CROSS RIDGE DR GERMANTOWN MD 20874-0000			0.00130950	R	Y	Y	Y						0			N
0795965	H W SMITH FDIC ACCOUNT OF H W SMITH ATTN: WILLIAM E GREGG DEPARTMENT HEAD P O BOX 7549 NEWPORT BEACH CA 92658-7549			0.00009420	R	S	Y	Y	Y					0			N
0797339	SPEEREX LIMITED PARTNERSHIP P O BOX 1363 MT PLEASANT SC 29465-1363			0.00130950	O	Y	Y	N						0			N
0798519	DONNA MARIE SULLIVAN P O BOX 1020 IGNACIO CO 81137-1020			0.00156250	R	Y	Y	N						0			N
0811145	ELIZABETH BEARD TANKSLEY P O BOX 720 ALPINE TX 79830-0000			0.00008185	R	Y	Y	Y						0			N
0811171	TATUM LIVING TR DTD 12/10/96 ROBERT S TATUM TRUSTEE NATIONSBANK DBA BANK OF AMERIC LOCK BOX 840738 DALLAS TX 75284-0738			0.01643580	O	Y	Y	N						0			N
0811180	LESLIE C TATUM P O BOX 7392 NORTH KANSAS CITY MO 64116-0000			0.00290030	O	Y	Y	Y						0			N
0818558	FRED TURNER MINERALS LTD P O BOX 910 MIDLAND TX 79702			0.01171876	O	Y	Y	N						0			N
0856120	ANADARKO E&P COMPANY LP RVENUE / ROYALTY P O BOX 730875 DALLAS TX 75373-0277			0.04687500	O	Y	Y	Y						0			N

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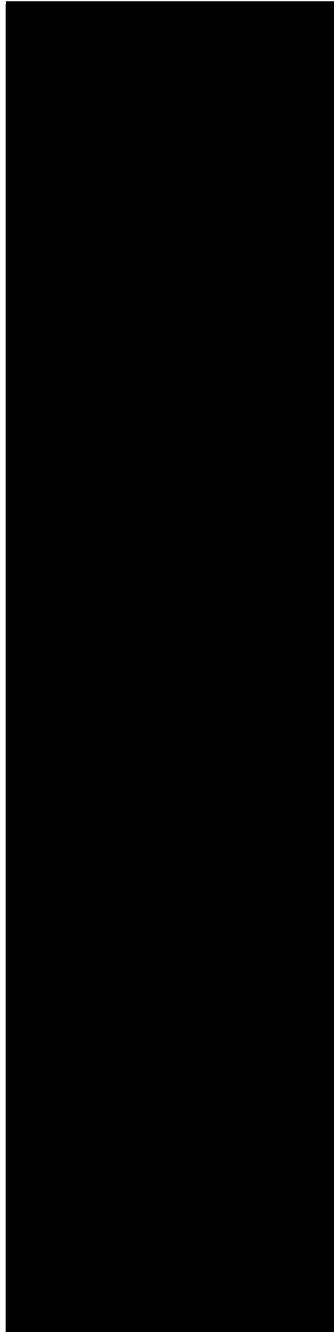
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0856140	UNITED PIPE & SUPPLY CO, INC 3622 RANCH CREEK DRIVE AUSTIN TX 78730-0000			0.00018840	R	Y	Y	Y						0			N
0902710	J BURTON VETETO 607 ABO HOBBS NM 88240-0000			0.00009420	R	Y	Y	N						0			N
0924145	ELIZABETH H WHITE FAMILY TR LINDA PAYNE, TRUSTEE P O BOX 780099 DALLAS TX 75378-0099			0.00049850	O	Y	Y	Y						0			N
0926390	EST OF LOTTIE PLUMMER WOOLLEY C/O B WYNNE WOOLLEY, JR 20936 NE CRYSTAL COURT BEND OR 97701-8309			0.00130950	O	Y	Y	Y						0			N
9999901	GREAT WESTERN DRILLING COMPANY P O BOX 1659 MIDLAND TX 79702-1659			0.48270407	W	Y	Y	N						0			N
DECK TOTAL				1.00000000													
ROYALTY INTEREST TOTAL				0.05647771													
WORKING INTEREST TOTAL				0.74865694													
OVERRIDE INTEREST TOTAL				0.17849625													
FEDERAL INTEREST TOTAL				0.01636910													

02835 DECKER, J E #9		O	01/91	DECKER, J E #9											County: SAN JUAN	State: NM	
0116200	JULIE ANN ANTWEIL TRUST 4408 CANYON COURT N.E. ALBUQUERQUE NM 87111-0000			0.00028261	R	Y	Y	N						0			N
0117913	KRISTIN DAWN BAKER ASHTON SOLE AND SEPARATE PROPERTY 4 MIDDLELOOP ROAD CLANCY MT 59634			0.00483402	O	Y	Y	N						0			N
0211166	ALVIN DEWEY BAKER JR P O BOX 12992 EL PASO TX 79913-0992			0.00483403	O	Y	Y	N						0			N

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02835 DECKER, J E #9		O	01/91	(Continued)													
0212725	JANE K BEARD 4104 LOVERS LANE DALLAS														0		N
		TX	75225-0000														
0212730	W THOMAS BEARD, III P O BOX 668 ALPINE														0		N
		TX	79830-0000														
0216567	BONANZA CREEK MINERALS LLC 2321 CANDELARIA NS ALBUQUERQUE														0		N
		NM	87107														
0217840	DONALDSON BROWN AC 1 MERCANTILE SAFE DEPOSIT & TR P O BOX 1183 ABINGDON														0		N
		MD	21009-0000														
0218590	BURLINGTON RESOURCES LP OIL & GAS COMPANY 22295 NETWORK PLACE CHICAGO														0		N
		IL	60673-1222														
0234135	SANDRA MOSELEY CHAPMAN WELLS FARGO BANK (COLORADO) NA TRUST NATIONAL RESOURCES P O BOX 5383 DENVER														0		N
		CO	80217-5383														
0251366	DAVOIL OIL & GAS LTD P O BOX 200292 DALLAS														0		N
		TX	75320-0292														
0252719	DENNIS EGAN DECKER 2012 COUNTY ROAD 214 DURANGO														0		N
		CO	81303														
0252720	DECKER FAMILY LIVING TRUST JAMES W DECKER AND/OR LAVERNE DECKER TRUSTEES 712 LIGTH PLANT ROAD AZTEC														0		N
		NM	87410-0000														



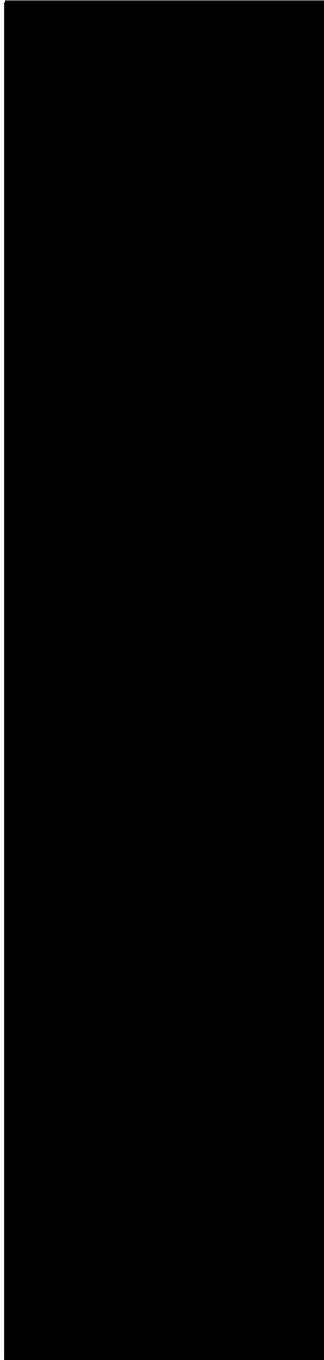
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OWNER	SUB				DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F
02835 DECKER, J E #9		O	01/91	(Continued)													
0252721	JAYE ELMER DECKER 280COUNTY ROAD 1332 LA PLATA NM 87418			0.00156250	R	Y	Y	N						0			N
0252722	JOHN AUSTIN DECKER 6145 COUNTY ROAD SS COPE CO 80812			0.00156250	R	Y	Y	N						0			N
0252723	KENNON DECKER 141 COUNTY ROAD 2300 AZTEC NM 87410			0.00156250	R	Y	Y	N						0			N
0252725	MARGARET L DECKER 413 STATE HIGHWAY 140 HESPERUS CO 81326-0000			0.00781250	R	Y	Y	Y						0			N
0256384	KIM R DOUGHERTY TRUST P O BOX 702 RANCHO SANTA FE CA 92067			0.00055968	R	Y	Y	N						0			N
0394303	GIBSON FAMILY TRUST P O BOX 546 TESUQUE NM 87574			0.00037388	O	Y	Y	N						0			N
0394307	BRIAN D GIBSON 66 C ARROYO HONDO TRAIL SANTA FE NM 87508			0.00012463	O	Y	Y	N						0			N
0396300	DONNA GOETTING 9020 W 82ND STREET OVERLAND PARK KS 66204-0000			0.00744050	R	Y	Y	Y						0			N
0411230	MABEL GLENN HAM REVOCABLE TR KATHLYN NORA BLACK, TRUSTEE P O BOX 15040 SANTA FE NM 87506-5040			0.00049850	O	Y	Y	N						0			N
0412305	H D S GROUP INC P O BOX 5075 GEORGETOWN TX 78627-5075			0.00585937	O	Y	Y	N						0			N
0495895	J K L CO 505 N BIG SPRING SUITE 403 MIDLAND TX 79701			0.00585937	O	Y	Y	N						0			N



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					DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F	
02835 DECKER, J E #9																		
		O	01/91	(Continued)														
0535711	MORTIMER A KLINE JR 11777 SAN VINCENTE BLVD SUITE 520 LOS ANGELES			CA 90049								0.00556350	R	Y	Y	Y	0	N
0572710	HERBERT KOKERNOT LEA 300 EAST BROW RD LOOKOUT MTN			TN 37350								0.00024553	R	Y	Y	Y	0	N
0572715	MICHAEL SCOTT LEA 4251 S ALLISON STREET LAKEWOOD			CO 80235-0000								0.00016369	R	S	Y	Y	0	N
0591475	MARQUITA MOSELEY MAYTAG P O BOX 1024 SUN VALLEY			ID 83353-0000								0.00166910	R	Y	Y	Y	0	N
0594463	GURDON RANSOM MILLER III 704 CANYON CREST SIERRA MADRE			CA 91024								0.00037467	O	Y	Y	Y	0	N
0594463	GURDON RANSOM MILLER III 704 CANYON CREST SIERRA MADRE			CA 91024								0.00037467	O	Y	Y	N	0	N
0594474	MILNER TRUST A J ARTHUR GREENFIELD & CO LLP ATTN: HELEN WU 924 WESTWOOD BLVE STE 1000 LOS ANGELES			CA 90024								0.00667610	R	Y	Y	N	0	N
0594490	DEPT OF THE INTERIOR-M M S ROYALTY MANAGEMENT PROGRAM P O BOX 5810 T A DENVER			CO 80217-0000								0.01636910	F	Y	Y	N	0	N
0596525	BARBARA J MOSELEY 7412 RIO GRANDE BLVD ALBUQUERQUE			NM 87107-0000								0.00164900	R	Y	Y	N	0	N
0732810	SHARYN PERKINS 9835 N SMALLEY KANSAS CITY			MO 64157-0000								0.00744050	R	Y	Y	Y	0	N



REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV EXMPT	TAX EXMPT	TAX FREE	CST CTR	SUB A LGR	F
02835 DECKER, J E #9		O	01/91	(Continued)												
0766320	MARY F ROBERTS P O BOX 2203 RUIDOSO			NM 88355-2203	0.00966805	O	Y	Y	N					0		N
0766541	ROYALTY CLEARINGHOUSE LTD 401 CONGRESS AVENUE SUITE 1510 AUSTIN			TX 78701	0.00009420	R	Y	Y	N					0		N
0766552	SANDRA ROYCE TRUST 1605 GASCONY ROAD LEUCADIA			CA 92024	0.00055969	R	Y	Y	N					0		N
0766553	STEPHEN M ROYCE TRUST 727 NORTH RIOS AVE SOLANA BEACH			CA 92075	0.00055968	R	Y	Y	N					0		N
0792345	PATRICIA PENROSE SCHIEFFER BANK OF AMERICA NA, AGENT P O BOX 840738 DALLAS			TX 75284-0738	0.03867170	O	Y	Y	N					0		N
0794125	J L SHARP OR K B SHARP TRUSTEE SHARP TRUSTEES OF THE JAMES L SHARP AND KATHRYN B SHARP REV LIVING TRUST 1020 FOXWOOD LANE WYLIE			TX 75098-0000	0.00009420	R	Y	Y	Y					0		N
0794390	SINGER BROTHERS BANK OF OKLAHOMA DEPT 1063 P O BOX 2300 TULSA			OK 74192-0000	0.00367389	R	Y	Y	N					0		N
0795950	MICHAEL ALLEN SMITH 19240 CROSS RIDGE DR GERMANTOWN			MD 20874-0000	0.00130950	R	Y	Y	Y					0		N
0795965	H W SMITH FDIC ACCOUNT OF H W SMITH ATTN: WILLIAM E GREGG DEPARTMENT HEAD P O BOX 7549 NEWPORT BEACH			CA 92658-7549	0.00009420	R	S	Y	Y					0		N

REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A	
					DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F
02835 DECKER, J E #9																	
O 01/91 (Continued)																	
0797339				SPEEREX LIMITED PARTNERSHIP	0.00130950	O	Y	Y	N					0		N	
				P O BOX 1363													
				MT PLEASANT SC 29465-1363													
0798519				DONNA MARIE SULLIVAN	0.00156250	R	Y	Y	N					0		N	
				P O BOX 1020													
				IGNACIO CO 81137-1020													
0811145				ELIZABETH BEARD TANKSLEY	0.00008185	R	Y	Y	Y					0		N	
				P O BOX 720													
				ALPINE TX 79830-0000													
0811171				TATUM LIVING TR DTD 12/10/96	0.01643580	O	Y	Y	N					0		N	
				ROBERT S TATUM TRUSTEE													
				NATIONSBANK DBA BANK OF AMERIC													
				LOCK BOX 840738													
				DALLAS TX 75284-0738													
0811180				LESLIE C TATUM	0.00290030	O	Y	Y	Y					0		N	
				P O BOX 7392													
				NORTH KANSAS CITY MO 64116-0000													
0818558				FRED TURNER MINERALS LTD	0.01171876	O	Y	Y	N					0		N	
				P O BOX 910													
				MIDLAND TX 79702													
0856120				ANADARKO E&P COMPANY LP	0.04687500	O	Y	Y	Y					0		N	
				RVENUE / ROYALTY													
				P O BOX 730875													
				DALLAS TX 75373-0277													
0856140				UNITED PIPE & SUPPLY CO, INC	0.00018840	R	Y	Y	Y					0		N	
				3622 RANCH CREEK DRIVE													
				AUSTIN TX 78730-0000													
0902710				J BURTON VETETO	0.00009420	R	Y	Y	N					0		N	
				607 ABO													
				HOBBS NM 88240-0000													
0924145				ELIZABETH H WHITE FAMILY TR	0.00049850	O	Y	Y	Y					0		N	
				LINDA PAYNE, TRUSTEE													
				P O BOX 780099													
				DALLAS TX 75378-0099													



REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A	
					DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F
02835 DECKER, J E #9																	
0926390		O	01/91	(Continued)													
	EST OF LOTTIE PLUMMER WOOLLEY			0.00130950	O	Y	Y	Y						0			N
	C/O B WYNNE WOOLLEY, JR																
	20936 NE CRYSTAL COURT																
	BEND	OR	97701-8309														
9999901	GREAT WESTERN DRILLING COMPANY			0.48270407	W	Y	Y	N						0			N
	P O BOX 1659																
	MIDLAND	TX	79702-1659														
DECK TOTAL				1.00000000													
ROYALTY INTEREST TOTAL				0.06204121													
WORKING INTEREST TOTAL				0.74865694													
OVERRIDE INTEREST TOTAL				0.17293275													
FEDERAL INTEREST TOTAL				0.01636910													



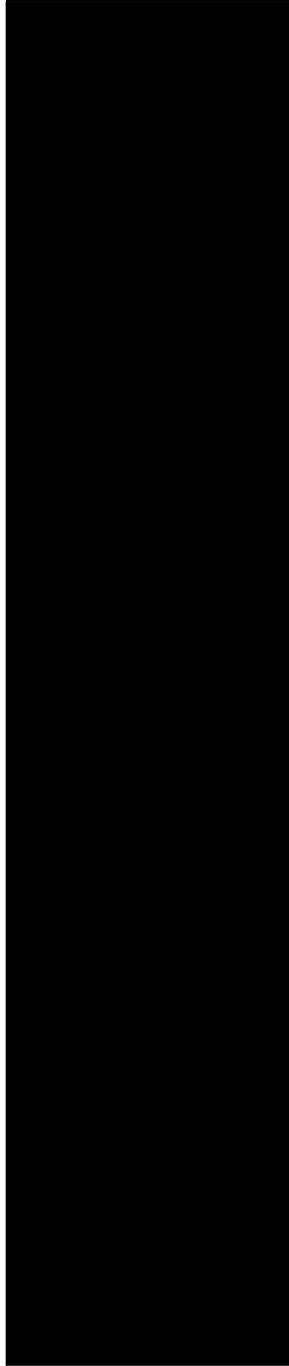
Great Western Drilling Co.
DJ078

JIB DIVISION OF INTEREST LISTING
Latest Decks

OWNER	OWNER NAME	Deck: A	Eff Date: 07/01/91	DECKER, J E #10	PREPAY	COST	SUBLDGR	DATA
					DDI	PROPERTY	CTR	NUMBER
02836	DECKER, J E #10							
0236580	CONOCO PHILLIPS ATTN: OUTSIDE OPERATED JIB 22295 NETWORK PLACE CHICAGO		IL 60673-1222	0.23483900	02836	0		N
0251366	DAVOIL OIL & GAS LTD P O BOX 122269 FORT WORTH		TX 76121-2269	0.27181580	02836	0		N
9999901	GREAT WESTERN DRILLING COMPANY P O BOX 1659 MIDLAND		TX 79702-1659	0.49334520	02836	0		N
*** DECK TOTAL 3 OWNERS					1.00000000			

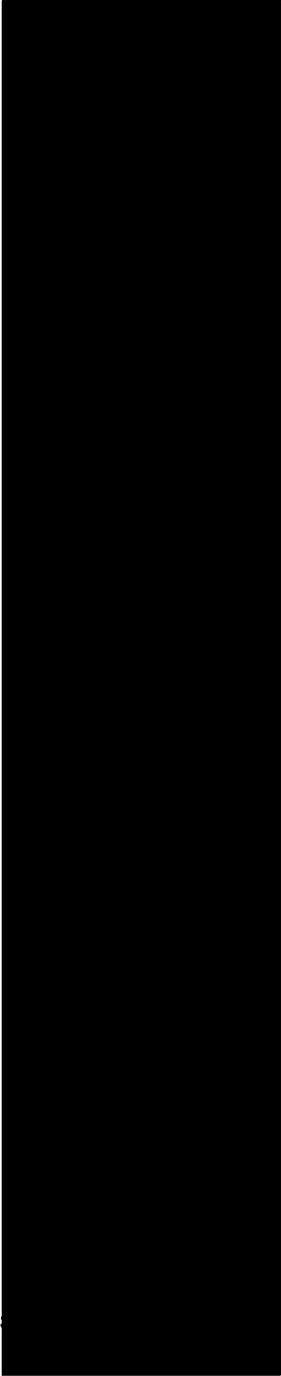
REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A	
					DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F
02836	DECKER, J E #10	G	07/91	DECKER, J E #10													
0116200	JULIE ANN ANTWEIL TRUST 4408 CANYON COURT N.E. ALBUQUERQUE NM 87111-0000			0.00028832	O	Y	Y	N						0			N
0117913	KRISTIN DAWN BAKER ASHTON SOLE AND SEPARATE PROPERTY 4 MIDDLELOOP ROAD CLANCY MT 59634			0.00108957	O	Y	Y	N						0			N
0211166	ALVIN DEWEY BAKER JR P O BOX 12992 EL PASO TX 79913-0992			0.00108958	O	Y	Y	N						0			N
0234135	SANDRA MOSELEY CHAPMAN WELLS FARGO BANK (COLORADO) NA TRUST NATIONAL RESOURCES P O BOX 5383 DENVER CO 80217-5383			0.00042568	O	Y	Y	Y						0			N
0234135	SANDRA MOSELEY CHAPMAN WELLS FARGO BANK (COLORADO) NA TRUST NATIONAL RESOURCES P O BOX 5383 DENVER CO 80217-5383			0.00127702	O	Y	Y	Y						0			N
0251366	DAVOIL OIL & GAS LTD P O BOX 200292 DALLAS TX 75320-0292			0.20242119	W	Y	Y	Y						0			N
0252719	DENNIS EGAN DECKER 2012 COUNTY ROAD 214 DURANGO CO 81303			0.00159409	O	Y	Y	N						0			N
0252720	DECKER FAMILY LIVING TRUST JAMES W DECKER AND/OR LAVERNE DECKER TRUSTEES 712 LIGTH PLANT ROAD AZTEC NM 87410-0000			0.00797043	O	Y	Y	N						0			N
0252721	JAYE ELMER DECKER 280COUNTY ROAD 1332 LA PLATA NM 87418			0.00159409	O	Y	Y	N						0			N



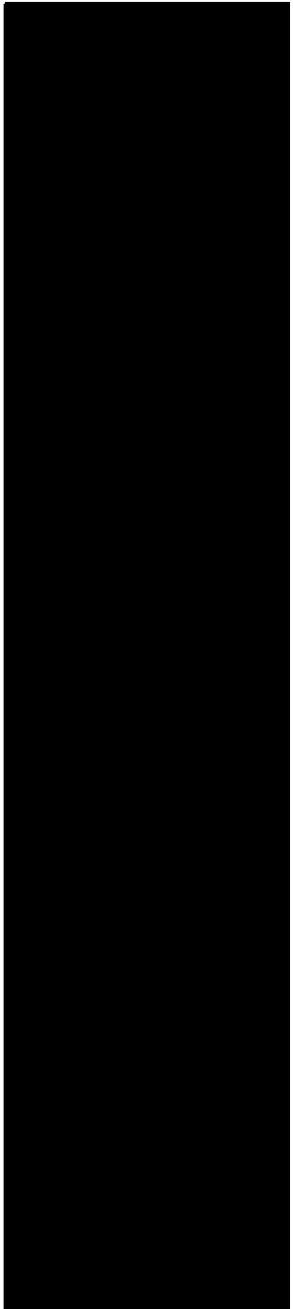
REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY		DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A	
OWNER	SUB				DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F
02836 DECKER, J E #10		G	07/91	(Continued)													
0252722	JOHN AUSTIN DECKER 6145 COUNTY ROAD SS COPE	CO	80812		0.00159409	O	Y	Y	N						0		N
0252723	KENNON DECKER 141 COUNTY ROAD 2300 AZTEC	NM	87410		0.00159409	O	Y	Y	N						0		N
0252725	MARGARET L DECKER 413 STATE HIGHWAY 140 HESPERUS	CO	81326-0000		0.00797043	O	Y	Y	Y						0		N
0256384	KIM R DOUGHERTY TRUST P O BOX 702 RANCHO SANTA FE	CA	92067		0.00056760	O	Y	Y	N						0		N
0412305	H D S GROUP INC P O BOX 5075 GEORGETOWN	TX	78627-5075		0.02177825	O	Y	Y	N						0		N
0495895	J K L CO 505 N BIG SPRING SUITE 403 MIDLAND	TX	79701		0.02177825	O	Y	Y	N						0		N
0535711	MORTIMER A KLINE JR 11777 SAN VINCENTE BLVD SUITE 520 LOS ANGELES	CA	90049		0.00567590	O	Y	Y	Y						0		N
0591475	MARQUITA MOSELEY MAYTAG P O BOX 1024 SUN VALLEY	ID	83353-0000		0.00170280	O	Y	Y	Y						0		N
0594474	MILNER TRUST A J ARTHUR GREENFIELD & CO LLP ATTN: HELEN WU 924 WESTWOOD BLVE STE 1000 LOS ANGELES	CA	90024		0.00681110	R	Y	Y	N						0		N
0596525	BARBARA J MOSELEY 7412 RIO GRANDE BLVD ALBUQUERQUE	NM	87107-0000		0.00170280	O	Y	Y	N						0		N



REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV EXMPT	TAX EXMPT	TAX FREE	CST CTR	SUB A LGR	F
02836 DECKER, J E #10		G	07/91	(Continued)												
0766320	MARY F ROBERTS P O BOX 2203 RUIDOSO			NM 88355-2203	0.00217915	O	Y	Y	N					0		N
0766541	ROYALTY CLEARINGHOUSE LTD 401 CONGRESS AVENUE SUITE 1510 AUSTIN			TX 78701	0.00009611	O	Y	Y	N					0		N
0766552	SANDRA ROYCE TRUST 1605 GASCONY ROAD LEUCADIA			CA 92024	0.00056760	O	Y	Y	N					0		N
0766553	STEPHEN M ROYCE TRUST 727 NORTH RIOS AVE SOLANA BEACH			CA 92075	0.00056760	O	Y	Y	N					0		N
0792345	PATRICIA PENROSE SCHIEFFER BANK OF AMERICA NA, AGENT P O BOX 840738 DALLAS			TX 75284-0738	0.01803880	O	Y	Y	N					0		N
0794125	J L SHARP OR K B SHARP TRUSTEE SHARP TRUSTEES OF THE JAMES L SHARP AND KATHRYN B SHARP REV LIVING TRUST 1020 FOXWOOD LANE WYLIE			TX 75098-0000	0.00009611	O	Y	Y	Y					0		N
0794390	SINGER BROTHERS BANK OF OKLAHOMA DEPT 1063 P O BOX 2300 TULSA			OK 74192-0000	0.00374813	O	Y	Y	N					0		N
0795965	H W SMITH FDIC ACCOUNT OF H W SMITH ATTN: WILLIAM E GREGG DEPARTMENT HEAD P O BOX 7549 NEWPORT BEACH			CA 92658-7549	0.00009611	O	S	Y	Y	Y				0		N

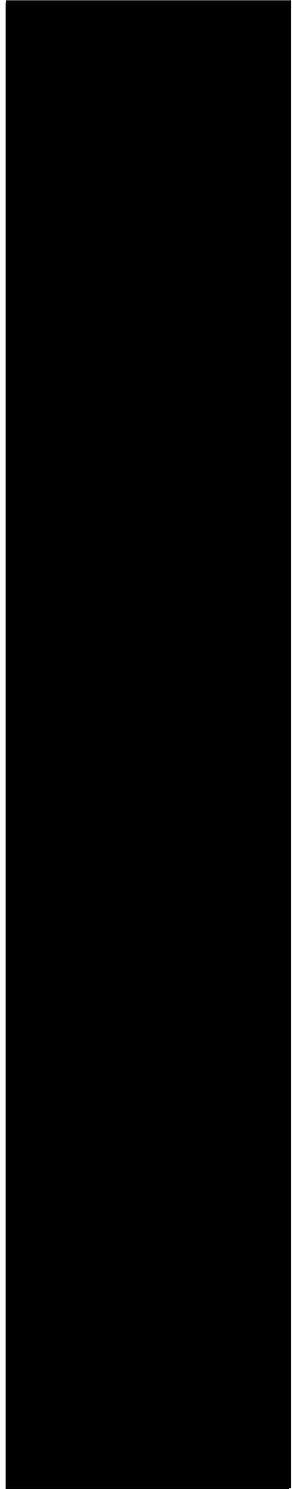


REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV EXMPT	TAX EXMPT	TAX FREE	CST CTR	SUB A LGR	F
02836 DECKER, J E #10		G	07/91	(Continued)												
0798519	DONNA MARIE SULLIVAN P O BOX 1020 IGNACIO		CO	81137-1020							O	Y	Y	N	0	N
0811171	TATUM LIVING TR DTD 12/10/96 ROBERT S TATUM TRUSTEE NATIONSBANK DBA BANK OF AMERIC LOCK BOX 840738 DALLAS		TX	75284-0738							O	Y	Y	N	0	N
0811180	LESLIE C TATUM P O BOX 7392 NORTH KANSAS CITY		MO	64116-0000							O	Y	Y	Y	0	N
0818558	FRED TURNER MINERALS LTD P O BOX 910 MIDLAND		TX	79702							O	Y	Y	N	0	N
0856120	ANADARKO E&P COMPANY LP RVENUE / ROYALTY P O BOX 730875 DALLAS		TX	75373-0277							O	Y	Y	Y	0	N
0856140	UNITED PIPE & SUPPLY CO, INC 3622 RANCH CREEK DRIVE AUSTIN		TX	78730-0000							O	Y	Y	Y	0	N
0902710	J BURTON VETETO 607 ABO HOBBS		NM	88240-0000							O	Y	Y	N	0	N
9999901	GREAT WESTERN DRILLING COMPANY P O BOX 1659 MIDLAND		TX	79702-1659							W	Y	Y	N	0	N
9999999	DELETED INTEREST										K & Y	Y	Y	0	N	
DECK TOTAL				1.00000000												
ROYALTY INTEREST TOTAL				0.00681110												
WORKING INTEREST TOTAL				0.56981530												
OVERRIDE INTEREST TOTAL				0.18853460												
DEL OTHER INTEREST TOTAL				0.23483900												

REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A	
					DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F
02836 DECKER, J E #10																	
0116200	JULIE ANN ANTWEIL TRUST		07/91	DECKER, J E #10													
	4408 CANYON COURT N.E.			0.00028832	O	Y	Y	N						0			N
	ALBUQUERQUE NM 87111-0000																
0117913	KRISTIN DAWN BAKER ASHTON			0.00108957	O	Y	Y	N						0			N
	SOLE AND SEPARATE PROPERTY																
	4 MIDDLELOOP ROAD																
	CLANCY MT 59634																
0211166	ALVIN DEWEY BAKER JR			0.00108958	O	Y	Y	N						0			N
	P O BOX 12992																
	EL PASO TX 79913-0992																
0234135	SANDRA MOSELEY CHAPMAN			0.00042568	O	Y	Y	Y						0			N
	WELLS FARGO BANK (COLORADO) NA																
	TRUST NATIONAL RESOURCES																
	P O BOX 5383																
	DENVER CO 80217-5383																
0234135	SANDRA MOSELEY CHAPMAN			0.00127702	O	Y	Y	Y						0			N
	WELLS FARGO BANK (COLORADO) NA																
	TRUST NATIONAL RESOURCES																
	P O BOX 5383																
	DENVER CO 80217-5383																
0236580	CONOCO PHILLIPS			0.20548400	W	Y	Y	N						0			N
	22342 NETWORK PLACE																
	CHICAGO IL 60673-1223																
0236580	CONOCO PHILLIPS			0.02935500	R	Y	Y	N						0			N
	22342 NETWORK PLACE																
	CHICAGO IL 60673-1223																
0251366	DAVOIL OIL & GAS LTD			0.20242119	W	Y	Y	Y						0			N
	P O BOX 200292																
	DALLAS TX 75320-0292																
0252719	DENNIS EGAN DECKER			0.00159409	O	Y	Y	N						0			N
	2012 COUNTY ROAD 214																
	DURANGO CO 81303																
0252720	DECKER FAMILY LIVING TRUST			0.00797043	O	Y	Y	N						0			N
	JAMES W DECKER AND/OR LAVERNE																
	DECKER TRUSTEES																
	712 LIGTH PLANT ROAD																
	AZTEC NM 87410-0000																



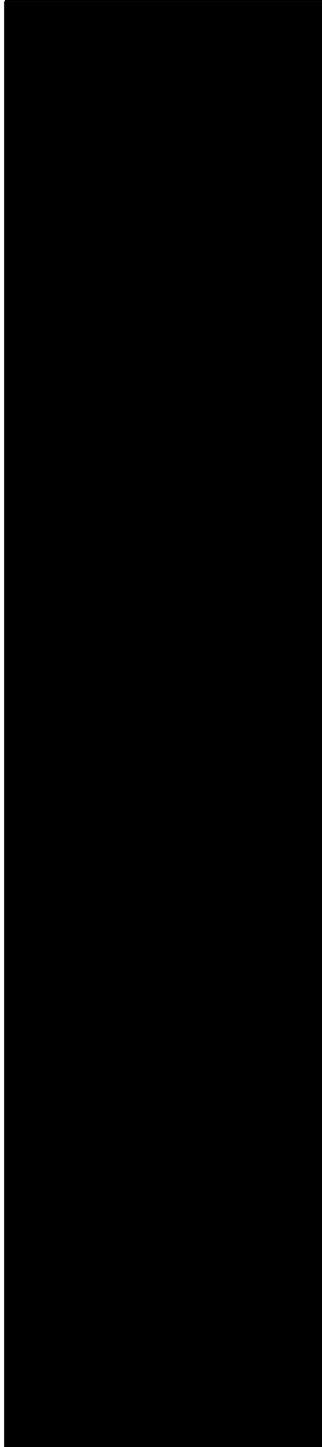
REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV EXMPT	TAX EXMPT	TAX FREE	CST CTR	SUB LGR	A F	
02836 DECKER, J E #10		O	07/91	(Continued)													
0252721	JAYE ELMER DECKER 280COUNTY ROAD 1332 LA PLATA			NM 87418							O	Y	Y	N		0	N
0252722	JOHN AUSTIN DECKER 6145 COUNTY ROAD SS COPE			CO 80812							O	Y	Y	N		0	N
0252723	KENNON DECKER 141 COUNTY ROAD 2300 AZTEC			NM 87410							O	Y	Y	N		0	N
0252725	MARGARET L DECKER 413 STATE HIGHWAY 140 HESPERUS			CO 81326-0000							O	Y	Y	Y		0	N
0256384	KIM R DOUGHERTY TRUST P O BOX 702 RANCHO SANTA FE			CA 92067							O	Y	Y	N		0	N
0412305	H D S GROUP INC P O BOX 5075 GEORGETOWN			TX 78627-5075							O	Y	Y	N		0	N
0495895	J K L CO 505 N BIG SPRING SUITE 403 MIDLAND			TX 79701							O	Y	Y	N		0	N
0535711	MORTIMER A KLINE JR 11777 SAN VICENTE BLVD SUITE 520 LOS ANGELES			CA 90049							O	Y	Y	Y		0	N
0591475	MARQUITA MOSELEY MAYTAG P O BOX 1024 SUN VALLEY			ID 83353-0000							O	Y	Y	Y		0	N
0594474	MILNER TRUST A J ARTHUR GREENFIELD & CO LLP ATTN: HELEN WU 924 WESTWOOD BLVE STE 1000 LOS ANGELES			CA 90024							R	Y	Y	N		0	N



REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A	
					DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F
02836 DECKER, J E #10		O	07/91	(Continued)													
0596525	BARBARA J MOSELEY 7412 RIO GRANDE BLVD ALBUQUERQUE		NM 87107-0000		0.00170280	O	Y	Y	N					0			N
0766320	MARY F ROBERTS P O BOX 2203 RUIDOSO		NM 88355-2203		0.00217915	O	Y	Y	N					0			N
0766541	ROYALTY CLEARINGHOUSE LTD 401 CONGRESS AVENUE SUITE 1510 AUSTIN		TX 78701		0.00009611	O	Y	Y	N					0			N
0766552	SANDRA ROYCE TRUST 1605 GASCONY ROAD LEUCADIA		CA 92024		0.00056760	O	Y	Y	N					0			N
0766553	STEPHEN M ROYCE TRUST 727 NORTH RIOS AVE SOLANA BEACH		CA 92075		0.00056760	O	Y	Y	N					0			N
0792345	PATRICIA PENROSE SCHIEFFER BANK OF AMERICA NA, AGENT P O BOX 840738 DALLAS		TX 75284-0738		0.01803880	O	Y	Y	N					0			N
0794125	J L SHARP OR K B SHARP TRUSTEE SHARP TRUSTEES OF THE JAMES L SHARP AND KATHRYN B SHARP REV LIVING TRUST 1020 FOXWOOD LANE WYLIE		TX 75098-0000		0.00009611	O	Y	Y	Y					0			N
0794390	SINGER BROTHERS BANK OF OKLAHOMA DEPT 1063 P O BOX 2300 TULSA		OK 74192-0000		0.00374813	O	Y	Y	N					0			N
0795965	H W SMITH FDIC ACCOUNT OF H W SMITH ATTN: WILLIAM E GREGG DEPARTMENT HEAD P O BOX 7549 NEWPORT BEACH		CA 92658-7549		0.00009611	O	S	Y	Y	Y				0			N



REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV EXMPT	TAX EXMPT	TAX FREE	CST CTR	SUB A LGR	F
02836 DECKER, J E #10		O	07/91	(Continued)												
0798519	DONNA MARIE SULLIVAN P O BOX 1020 IGNACIO		CO	81137-1020	0.00159408	O	Y	Y	N					0		N
0811171	TATUM LIVING TR DTD 12/10/96 ROBERT S TATUM TRUSTEE NATIONSBANK DBA BANK OF AMERIC LOCK BOX 840738 DALLAS		TX	75284-0738	0.01852270	O	Y	Y	N					0		N
0811180	LESLIE C TATUM P O BOX 7392 NORTH KANSAS CITY		MO	64116-0000	0.00326870	O	Y	Y	Y					0		N
0818558	FRED TURNER MINERALS LTD P O BOX 910 MIDLAND		TX	79702	0.04355650	O	Y	Y	N					0		N
0856120	ANADARKO E&P COMPANY LP RVENUE / ROYALTY P O BOX 730875 DALLAS		TX	75373-0277	0.01622170	O	Y	Y	Y					0		N
0856140	UNITED PIPE & SUPPLY CO, INC 3622 RANCH CREEK DRIVE AUSTIN		TX	78730-0000	0.00019221	O	Y	Y	Y					0		N
0902710	J BURTON VETETO 607 ABO HOBBS		NM	88240-0000	0.00009611	O	Y	Y	N					0		N
9999901	GREAT WESTERN DRILLING COMPANY P O BOX 1659 MIDLAND		TX	79702-1659	0.36739411	W	Y	Y	N					0		N
DECK TOTAL					1.00000000											
ROYALTY INTEREST TOTAL					0.03616610											
WORKING INTEREST TOTAL					0.77529930											
OVERRIDE INTEREST TOTAL					0.18853460											

EXHIBIT #1 DECKER #11

Great Western Drilling Co.
DJ078

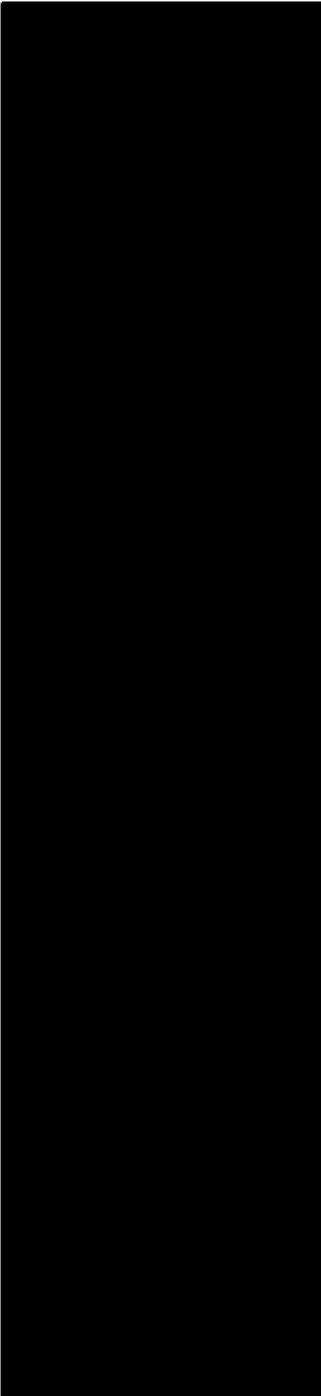
JIB DIVISION OF INTEREST LISTING
Latest Decks

PAGE 1
09/04/07

OWNER	OWNER NAME	PREPAY DDI	COST PROPERTY	SUBLDGR CTR	DATA NUMBER	EXPRT
02837	DECKER, J E #11					
0116000	B P AMERICA PRODUCTION COMPANY ATTN: OUTSIDE OP JOINT INTERES P O BOX 21868 TULSA	0.25029760	02837	0		N
		OK74121-1868	Tax-Id No: 73-0466080			
0236315	EL PASO PRODUCTION OIL & GAS C 1001 LOUISIANA STREET HOUSTON	0.13516070	02837	0		N
		TX 77002-5089	Tax-Id No: 74-1405013			
0251366	DAVOIL OIL & GAS LTD P O BOX 122269 FORT WORTH	0.17740856	02837	0		N
		TX 76121-2269	Tax-Id No: 75-2940571			
0924355	WILLIAMS PRODUCTION CO ATTN: DOUG BIRD ONE WILLIAMS CENTER P O BOX 3102 MS 37-4 TULSA	0.11513690	02837	0		N
		OK74101	Tax-Id No: 87-0480555			
9999901	GREAT WESTERN DRILLING COMPANY P O BOX 1659 MIDLAND	0.32199624	02837	0		N
		TX 79702-1659	Tax-Id No: 46-0487235			
*** DECK TOTAL 5 OWNERS		1.00000000				

REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A	
					DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F
02837	DECKER, J E #11	G	10/93	DECKER, J E #11													
0116000	B P AMERICA PRODUCTION COMPANY P O BOX 848103 DALLAS TX 75284-8103			0.00578185	O	Y	Y	N						0			N
0116000	B P AMERICA PRODUCTION COMPANY P O BOX 848103 DALLAS TX 75284-8103			0.21150172	W	Y	Y	N						0			N
0116200	JULIE ANN ANTWEIL TRUST 4408 CANYON COURT N.E. ALBUQUERQUE NM 87111-0000			0.00018820	R	Y	Y	N						0			N
0234135	SANDRA MOSELEY CHAPMAN WELLS FARGO BANK (COLORADO) NA TRUST NATIONAL RESOURCES P O BOX 5383 DENVER CO 80217-5383			0.00111137	R	Y	Y	Y						0			N
0236315	EL PASO PRODUCTION OIL & GAS C P O BOX 200861 HOUSTON TX 77216-0861			0.11421080	W	Y	Y	N						0			N
0251366	DAVOIL OIL & GAS LTD P O BOX 200292 DALLAS TX 75320-0292			0.13305645	W	Y	Y	Y						0			N
0252719	DENNIS EGAN DECKER 2012 COUNTY ROAD 214 DURANGO CO 81303			0.00104043	R	Y	Y	N						0			N
0252720	DECKER FAMILY LIVING TRUST JAMES W DECKER AND/OR LAVERNE DECKER TRUSTEES 712 LIGTH PLANT ROAD AZTEC NM 87410-0000			0.00520213	R	Y	Y	N						0			N
0252721	JAYE ELMER DECKER 280COUNTY ROAD 1332 LA PLATA NM 87418			0.00104042	R	Y	Y	N						0			N
0252722	JOHN AUSTIN DECKER 6145 COUNTY ROAD SS COPE CO 80812			0.00104043	R	Y	Y	N						0			N



REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A
					DDI	I	C	E	S	9	W	EXMPT	EXMPT	CTR	LGR	F
02837	DECKER, J E #11	G	10/93	(Continued)												
0252723	KENNON DECKER 141 COUNTY ROAD 2300 AZTEC NM 87410			0.00104042	R	Y	Y	N						0		N
0252725	MARGARET L DECKER 413 STATE HIGHWAY 140 HESPERUS CO 81326-0000			0.00520213	R	Y	Y	Y						0		N
0256384	KIM R DOUGHERTY TRUST P O BOX 702 RANCHO SANTA FE CA 92067			0.00037047	R	Y	Y	N						0		N
0275733	ELLIOTT-HALL COMPANY P O BOX 1231 OGDEN UT 84402-0000			0.00289092	O	Y	Y	N						0		N
0275737	ELLIOTT INDUSTRIES P O BOX 3300 ROSWELL NM 88202-3300			0.00289092	R	Y	Y	N						0		N
0412305	H D S GROUP INC P O BOX 5075 GEORGETOWN TX 78627-5075			0.01950799	R	Y	Y	N						0		N
0495895	J K L CO 505 N BIG SPRING SUITE 403 MIDLAND TX 79701			0.01950799	R	Y	Y	N						0		N
0535711	MORTIMER A KLINE JR 11777 SAN VINCENTE BLVD SUITE 520 LOS ANGELES CA 90049			0.00370455	O	Y	Y	Y						0		N
0591475	MARQUITA MOSELEY MAYTAG P O BOX 1024 SUN VALLEY ID 83353-0000			0.00111140	R	Y	Y	Y						0		N
0594474	MILNER TRUST A J ARTHUR GREENFIELD & CO LLP ATTN: HELEN WU 924 WESTWOOD BLVE STE 1000 LOS ANGELES CA 90024			0.00444547	R	Y	Y	N						0		N

REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV	TAX	TAX	CST	SUB	A	
					DDI	I	C	E	S	9	W	EXMPT	EXMPT	FREE	CTR	LGR	F
02837 DECKER, J E #11																	
		G	10/93	(Continued)													
0594490				DEPT OF THE INTERIOR-M M S ROYALTY MANAGEMENT PROGRAM P O BOX 5810 T A DENVER									P		0		N
				CO 80217-0000													
0596525				BARBARA J MOSELEY 7412 RIO GRANDE BLVD ALBUQUERQUE											0		N
				NM 87107-0000													
0766541				ROYALTY CLEARINGHOUSE LTD 401 CONGRESS AVENUE SUITE 1510 AUSTIN											0		N
				TX 78701													
0766552				SANDRA ROYCE TRUST 1605 GASCONY ROAD LEUCADIA											0		N
				CA 92024													
0766553				STEPHEN M ROYCE TRUST 727 NORTH RIOS AVE SOLANA BEACH											0		N
				CA 92075													
0792345				PATRICIA PENROSE SCHIEFFER BANK OF AMERICA NA, AGENT P O BOX 840738 DALLAS											0		N
				TX 75284-0738													
0794125				J L SHARP OR K B SHARP TRUSTEE SHARP TRUSTEES OF THE JAMES L SHARP AND KATHRYN B SHARP REV LIVING TRUST 1020 FOXWOOD LANE WYLIE											0		N
				TX 75098-0000													
0794390				SINGER BROTHERS BANK OF OKLAHOMA DEPT 1063 P O BOX 2300 TULSA											0		N
				OK 74192-0000													
0795965				H W SMITH FDIC ACCOUNT OF H W SMITH ATTN: WILLIAM E GREGG DEPARTMENT HEAD P O BOX 7549 NEWPORT BEACH											0		N
				CA 92658-7549													

REVENUE DIVISION OF INTEREST BY PROPERTY
LATEST DECKS

PROPERTY OWNER	SUB	DK	DATE	DESC	T	S	N	D	R	S	REV EXMPT	TAX EXMPT	TAX FREE	CST CTR	SUB A LGR
02837 DECKER, J E #11		G	10/93	(Continued)											
0798519	DONNA MARIE SULLIVAN P O BOX 1020 IGNACIO			CO 81137-1020										0	N
0811171	TATUM LIVING TR DTD 12/10/96 ROBERT S TATUM TRUSTEE NATIONSBANK DBA BANK OF AMERIC LOCK BOX 840738 DALLAS			TX 75284-0738										0	N
0811180	LESLIE C TATUM P O BOX 7392 NORTH KANSAS CITY			MO 64116-0000										0	N
0818558	FRED TURNER MINERALS LTD P O BOX 910 MIDLAND			TX 79702										0	N
0856140	UNITED PIPE & SUPPLY CO, INC 3622 RANCH CREEK DRIVE AUSTIN			TX 78730-0000										0	N
0902710	J BURTON VETETO 607 ABO HOBBS			NM 88240-0000										0	N
9999901	GREAT WESTERN DRILLING COMPANY P O BOX 1659 MIDLAND			TX 79702-1659										0	N
9999999	DELETED INTEREST													0	N
DECK TOTAL				1.00000000											
ROYALTY INTEREST TOTAL				0.11740486											
WORKING INTEREST TOTAL				0.70026612											
OVERRIDE INTEREST TOTAL				0.01901003											
FEDERAL INTEREST TOTAL				0.04818209											
DEL OTHER INTEREST TOTAL				0.11513690											



WALSH

ENGINEERING & PRODUCTION CORP.

Petroleum Engineering Consulting
Lease Management
Contract Pumping

7415 East Main
Farmington, New Mexico 87402
(505) 327-4892 • Fax: (505) 327-3834

CERTIFIED- RETURN RECEIPT

September 12, 2007

Davoil Oil & Gas Ltd
PO Box 122269
Fort Worth, TX 76121-2269

Re: Surface Commingling Application
Great Western Drilling Co.
Decker #9, #10 and #11
Sections 7, 8, and 12, T82N R12W
San Juan County, NM
Basin Fruitland Coal

To Whom It May Concern:

Great Western Drilling Co., has applied to the New Mexico Oil Conservation Division for administrative approval to surface commingle the gas production from the three referenced wells. Commingling will allow the use of a common flow line and a single Enterprise meter. As an interest owner in one or more of these wells, you are being notified of this application pursuant to NMOCD rules.

If you desire to submit remarks concerning the application, please send them to the New Mexico Oil Conservation Division, 1220 S. St. Francis Drive, Santa Fe, New Mexico, within 20 days from the receipt of this notice. If you have no objection to this proposal, no action is required on your part.

Thank you for your consideration in this matter and if you have any questions, please do not hesitate to call upon me.

Sincerely,

Paul C. Thompson, P.E.
Agent for
Great Western Drilling Co.

**WALSH**

ENGINEERING & PRODUCTION CORP.

Petroleum Engineering Consulting
Lease Management
Contract Pumping7415 East Main
Farmington, New Mexico 87402
(505) 327-4892 • Fax: (505) 327-9834CERTIFIED- RETURN RECEIPT

September 12, 2007

Alvin Dewey Baker JR
PO Box 12992
El Paso, TX 79913-0992Re: Surface Commingling Application
Great Western Drilling Co.
Decker #9, #10 and #11
Sections 7, 8, and 12, T32N R12W
San Juan County, NM
Basin Fruitland Coal*SAMPLE*

To Whom It May Concern:

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Thank you for your consideration in this matter and if you have any questions, please do not hesitate to call upon me.

Sincerely,

Paul C. Thompson, P.E.
Agent for
Great Western Drilling Co.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Patricia Penrose Schieffer
Bank of America NA, Agent
P.O.Box 840738
Dallas, TX 75284-0738

2. Article Number
(Transfer from service label)

7006 0100 0000 9744 4444

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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? YesIf YES, enter delivery address below: No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes**U.S. Postal Service
CERTIFIED MAIL RECEIPT**

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Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.10

Postmark
Here

SHIPPED SEP 19 2005

Sent To **Royalty Clearinghouse LTD.**
401 Congress Avenue
Suite 1510
Austin, TX 78701

PS Form 3800, J...

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Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark
Here

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Bank of America NA, Agent
P.O.Box 840738
Dallas, TX 75284-0738

PS Form 3800, J...

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1. Article Addressed to:

Royalty Clearinghouse LTD.
401 Congress Avenue
Suite 1510
Austin, TX 78701

2. Article Number
(Transfer from service label)

7006 0100 0000 9744 4437

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? YesIf YES, enter delivery address below: No

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Sharyn Perkins
9835 N. Smalley
Kansas City, MO 64157

2. Article Number
(Transfer from service label) **7006 2150 0004 0531 3768**

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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Certified Fee	2.40	
Return Receipt Fee (Endorsement Required)	1.85	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.66	

Sent To
Burlington Resources LP
Oil & Gas Company
22295 Network Place
Chicago, IL 60673-1222

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Return Receipt Fee (Endorsement Required)	1.85	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.66	

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9835 N. Smalley
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Burlington Resources LP
Oil & Gas Company
22295 Network Place
Chicago, IL 60673-1222

2. Article Number
(Transfer from service label) **7006 2150 0004 0531 3751**

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

102595-02-M-1540

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:		B. Received by (Printed Name)	C. Date of Delivery
Alvin Dewey Baker JR PO Box 12992 El Paso, TX 79913-0992		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	
7006 2150 0004 0531 3744		<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
PS Form 3811, February 2004		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
Domestic Return Receipt		102595-02-M-1540	

7006 0100 0000 9738 6775

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Postage \$	1.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	4.66
	Postmark Here 9.19.07
Sent To	JKL Co
Street, Apt. No., or PO Box No.	505 N Big Spring Suite 403
City, State, ZIP	Midland, TX 79701
PS Form 3800	

7006 2150 0004 0531 3744

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Postage \$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	4.66
	Postmark Here 9.19.07
Sent To	Alvin Dewey Baker JR
Street, Apt. No., or PO Box No.	PO Box 12992
City, State, ZIP	El Paso, TX 79913-0992
PS Form 3800	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:		B. Received by (Printed Name)	C. Date of Delivery
JKL Co 505 N Big Spring Suite 403 Midland, TX 79701		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	
7006 0100 0000 9738 6775		<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
PS Form 3811, February 2004		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
Domestic Return Receipt		102595-02-M-1540	

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1. Article Addressed to:

Tatum Living TR DTD 12/10/96
 Robert S. Tatum Trustee
 Nations Bank dba Bank of America
 Lock Box 840738
 Dallas, TX 75284-0738

2. Article Number
 (Transfer from service label) 7006 0100 0000 9744 4208

PS Form 3811, February 2004 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

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Postage	\$ 1.41	Postmark Here 9.19.07
Certified Fee	2.40	
Return Receipt Fee (Endorsement Required)	1.85	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.66	

Sent To
 UNITED PIPE & SUPPLY CO., INC.
 Street, Apt. No. or PO Box No. 3622 RANCH CREEK DRIVE
 City, State, ZIP+4[®] AUSTIN, TX 78730-0000

PS Form 3800

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

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Postage	\$ 6.41	Postmark Here 9.17.07
Certified Fee	2.40	
Return Receipt Fee (Endorsement Required)	1.85	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.66	

Sent To
 Tatum Living TR DTD 12/10/96
 Robert S. Tatum Trustee
 Nations Bank dba Bank of America
 Lock Box 840738
 Dallas, TX 75284-0738

PS Form 3800

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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1. Article Addressed to:

UNITED PIPE & SUPPLY CO., INC.
 3622 RANCH CREEK DRIVE
 AUSTIN, TX 78730-0000

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

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- 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:

Brian D Gibson
66 C Arroyo Hondo Trail
Santa Fe, NM 87508

2. Article Number

(Transfer from service label)

7006 0100 0000 9744 4154

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

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CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage

\$ 1.41

Certified Fee

2.40

Return Receipt Fee (Endorsement Required)

1.85

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees

\$ 4.66

Postmark Here

9-1-05

Sent To

Sandra Moseley Chapman
Wells Fargo Bank (Colorado) NA
Trust National Resources
PO Box 5383
Denver, CO 80217-5383

PS Form

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage

\$ 1.41

Certified Fee

2.40

Return Receipt Fee (Endorsement Required)

1.85

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees

\$ 4.66

Postmark Here

5-1-05

Sent To

Brian D Gibson
66 C Arroyo Hondo Trail
Santa Fe, NM 87508

Street, Apt. No.;
or PO Box No.
City, State, ZIP+

PS Form 3800

7006 2150 0004 0531 3775

7006 0100 0000 9744 4154

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Sandra Moseley Chapman
Wells Fargo Bank (Colorado) NA
Trust National Resources
PO Box 5383
Denver, CO 80217-5383

2. Article Number

(Transfer from service label)

7006 2150 0004 0531 3775

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

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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</p> <p>B. Received by (<i>Printed Name</i>)</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>W Thomas Beard, III PO Box 668 Alpine, TX 79830</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes</p>
<p>2. Article Number (<i>Transfer from service label</i>)</p> <p>7006 0100 0000 9744 4185</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

7006 0100 0000 9744 4185

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$ 1.41	Postmark Here 9.19.07
Certified Fee	2.40	
Return Receipt Fee (Endorsement Required)	1.85	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.66	

Sent To: Barbara J Moseley
7412 Rio Grande Blvd.
Albuquerque, NM 87107

PS Form 3800

7006 0100 0000 9744 4185

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41	Postmark Here
Certified Fee	2.40	
Return Receipt Fee (Endorsement Required)	1.85	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.66	

Sent To: W Thomas Beard, III
PO Box 668
Alpine, TX 79830

PS Form 3800

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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</p> <p>B. Received by (<i>Printed Name</i>)</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>Barabara J Moseley 7412 Rio Grande Blvd. Albuquerque, NM 87107</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes</p>
<p>2. Article Number (<i>Transfer from service label</i>)</p> <p>7006 0100 0000 9744 4130</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Speerex Limited Partnership
P.O.Box 1363
Mt.Pleasant, SC 29465-1363

2. Article Number (Transfer from service label) **7006 0100 0000 9738 6768**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To: Anadarko E&P Company LP
Revenue/Royalty
P.O.Box 730875
Dallas, TX 75373-0277

PS Form 3811

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To: Speerex Limited Partnership
P.O.Box 1363
Mt.Pleasant, SC 29465-1363

PS Form 3811

7006 0100 0000 9744 4178

7006 0100 0000 9738 6768

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE ADDRESS

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Anadarko E&P Company LP
Revenue/Royalty
P.O.Box 730875
Dallas, TX 75373-0277

2. Article Number

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Donaldson Brown AC 1
 Mercantile Safe Deposit & Trust
 PO Box 1183
 Abingdon, MD 21009

2. Article Number
 (Transfer from service label)

7006 0100 0000 9744 4123

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7006 0100 0000 9744 4147

**U.S. Postal Service
 CERTIFIED MAIL RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here
 9-19-07

Ser. Decker Family Living Trust
 Str. or P. James W Decker And/Or Laverne
 City Decker Trustees
 712 Light Plant Road
 PS Aztec, NM 87410

Instructions

7006 0100 0000 9744 4123

**U.S. Postal Service
 CERTIFIED MAIL RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$ 1.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here
 9-19-07

Sent To Donaldson Brown AC 1
 Street, Apt. No. or PO Box No. Mercantile Safe Deposit & Trust
 City, State, ZIP+4 PO Box 1183
 Abingdon, MD 21009

PS Form 3800, J

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Decker Family Living Trust
 James W Decker And/Or Laverne
 Decker Trustees
 712 Light Plant Road
 Aztec, NM 87410

2. Article Number

7006 0100 0000 9744 4147

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Dennis Egan Decker
2012 County Road 214
Durango, CO 81303

2. Article Number
(Transfer from service label)

7006 0100 0000 9744 4116

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

3. Service Type

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

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

OFFICIAL USE

7006 0100 0000 9744 4109

Postage \$.41
Certified Fee 2.40
Return Receipt Fee (Endorsement Required) 1.85
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 4.66

Postmark Here

9.19.07

Sent To Dept of the Interior-MMS
Royalty Management Program
Street, Apt. or PO Box P.O.Box 5810 T A
City, State Denver, CO 80217

PS Form

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

7006 0100 0000 9744 4116

Postage \$.41
Certified Fee 2.40
Return Receipt Fee (Endorsement Required) 1.85
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 4.66

Postmark Here

9.19.07

Sent To
Street, Apt. No. or PO Box No. Dennis Egan Decker
City, State, ZIP 2012 County Road 214
Durango, CO 81303

PS Form 3800

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Dept of the Interior-MMS
Royalty Management Program
P.O.Box 5810 T A
Denver, CO 80217

2. Article Number

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

3. Service Type

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Donna Goetting
9020 W 82nd Street
Overland Park, KS 66204

2. Article Number
(Transfer from service label)

7006 0100 0000 9744 4093

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

**U.S. Postal Service™
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OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark
Here

9.19.07

Sent To

Street, Apt. N
or PO Box Nt
City, State, Zi

Donna Marie Sullivan
P.O.Box 1020
Ignacio, CO 81137-1020

PS Form 3800

**U.S. Postal Service™
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(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$ 1.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark
Here

9.19.07

Sent To

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

Donna Goetting
9020 W 82nd Street
Overland Park, KS 66204

PS Form 3800

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Donna Marie Sullivan
P.O.Box 1020
Ignacio, CO 81137-1020

2. Article Number

7006 0100 0000 9744 4086

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

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

HDS Group Inc
PO Box 5075
Georgetown, TX 78627-5075

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7006 0100 0000 9744 4000

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here
9.19.07

Sent To
GURDON RANSOM MILLER III
704 Canyon Crest
Sierra Madre, CA 91024

PS Form 3800, Jul

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here
19 2007

Sent To
HDS Group Inc
PO Box 5075
Georgetown, TX 78627-5075

PS Form 3800, Jul

7006 0100 0000 9744 4024

7006 0100 0000 9744 4000

SHIPPED SEP 19 2007

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

GURDON RANSOM MILLER III
704 Canyon Crest
Sierra Madre, CA 91024

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: MILNER TRUST A J. ARTHUR GREENFIELD & CO LLP ATTN: Helen Wu 924 Westwood BLVE. STE. 1000 Los Angeles, CA 91024	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	
2. Article Number (Transfer from service label)	7006 0100 0000 9744 4451	
	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0000 9744 4499

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
<i>(Domestic Mail Only. No Insurance Coverage Provided)</i>	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ 1.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66
Sent To	Mabel Glenn Ham Revocable Trust
Street, Apt. No., or PO Box No.	Kathlyn Nora Black, Trustee PO Box 15040
City, State, ZIP	Santa Fe, NM 87506-5040

7006 0100 0000 9744 4451

7006 0100 0000 9744 4451

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
<i>(Domestic Mail Only. No Insurance Coverage Provided)</i>	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66
Sent To	MILNER TRUST A
Street, Apt. No., or PO Box	J. ARTHUR GREENFIELD & CO LLP
City, State,	ATTN: Helen Wu 924 Westwood BLVE. STE. 1000 Los Angeles, CA 91024

7006 0100 0000 9744 4499

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: Mabel Glenn Ham Revocable Trust Kathlyn Nora Black, Trustee PO Box 15040 Santa Fe, NM 87506-5040	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	
2. Article Number (Transfer from service label)	7006 0100 0000 9744 4499	
	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

MICHAEL SCOTT LEA
4251 S. Allison Street
Lakewood, CO 80235

2. Article Number (Transfer from service label) 7006 0100 0000 9744 4468

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:

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7006 0100 0000 9744 4475

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$ 0.41	Postmark Here
Certified Fee	2.40	
Return Receipt Fee (Endorsement Required)	1.85	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.66	

Sent To **MORTIMER A KLINE JR**
11777 SAN VICENTE BLVD
SUITE 520
LOS ANGELES, CA 90049

PS Form 3811

SHIPPED SEP 19 2007

7006 0100 0000 9744 4468

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$ 0.41	Postmark Here
Certified Fee	2.40	
Return Receipt Fee (Endorsement Required)	1.85	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.66	

Sent To **MICHAEL SCOTT LEA**
4251 S. Allison Street
Lakewood, CO 80235

PS Form 3800

SHIPPED SEP 19 2007

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

MORTIMER A KLINE JR
11777 SAN VICENTE BLVD
SUITE 520
LOS ANGELES, CA 90049

2. Article Number (Transfer from service label) 7006 0100 0000 9744 4475

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:

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

John Austin Decker
6145 County Road SS
Cope, CO 80812

2. Article Number
(Transfer from service label) 7006 0100 0000 9744 3904

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

102595-02-M-1540

U.S. Postal Service
CERTIFIED MAIL - RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To: Michael Allen Smith
19240 Cross Ridge Dr.
Germantown, Md 20874

PS Form 380

SHIPPED SEP 19 2004

U.S. Postal Service
CERTIFIED MAIL - RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To: John Austin Decker
6145 County Road SS
Cope, CO 80812

PS Form 380

SHIPPED SEP 19 2004

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Michael Allen Smith
19240 Cross Ridge Dr.
Germantown, Md 20874

2. Article Number
(Transfer from service label) 7006 0100 0000 9744 4482

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS FOR POSTAGE PAID MAIL

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Kristin Dawn Baker Ashton Sole And Separate Property 4 Middleloop Road Clancy, MT 59634</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label) <u>7006 0100 0000 9744 3874</u></p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To: Leslie C Tatum
P.O.Box 7392
North Kansas City, MO 64116

Postmark Here

7006 0100 0000 9744 4505

PS Form 3811

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To: Kristin Dawn Baker Ashton
Sole And Separate Property
4 Middleloop Road
Clancy, MT 59634

Postmark Here

7006 0100 0000 9744 3874

PS Form 3811

SHIPPED SEP 5 2004

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Leslie C Tatum P.O.Box 7392 North Kansas City, MO 64116</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label) <u>7006 0100 0000 9744 4505</u></p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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 type="checkbox"/> Agent <input type="checkbox"/> Addressee X	
1. Article Addressed to:		B. Received by (<i>Printed Name</i>)	C. Date of Delivery
Mary F. Roberts P.O.Box 2203 Ruidoso, NM 88355		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	
7006 0100 0000 9744 3881		<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
PS Form 3811, February 2004		4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes	
Domestic Return Receipt		102595-02-M-1540	

U.S. Postal Service™	
CERTIFIED MAIL RECEIPT (Domestic Mail Only. No Insurance Coverage Provided)	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66
Sent To	
MARQUITA MOSLEY MAYTAG	
P.O. Box 1024	
Sun Valley, ID 83353	
PS Form 3801	

U.S. Postal Service™	
CERTIFIED MAIL RECEIPT (Domestic Mail Only. No Insurance Coverage Provided)	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66
Sent To	
Mary F. Roberts	
P.O. Box 2203	
Ruidoso, NM 88355	
PS Form 3801	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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 type="checkbox"/> Agent <input type="checkbox"/> Addressee X	
1. Article Addressed to:		B. Received by (<i>Printed Name</i>)	C. Date of Delivery
MARQUITA MOSLEY MAYTAG P.O. Box 1024 Sun Valley, ID 83353		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	
7006 0100 0000 9744 3898		<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
PS Form 3811, February 2004		4. Restricted Delivery? (<i>Extra Fee</i>) <input type="checkbox"/> Yes	
Domestic Return Receipt		102595-02-M-1540	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Margaret L Decker
413 State Highway 140
Hesperus, CO 81326

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (*Extra Fee*) Yes

2. Article Number
(Transfer from service label) 7006 0100 0000 9744 3911

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service
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(Domestic Mail Only; No Insurance Coverage Provided)

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OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To
Kim R Dougherty Trust
PO Box 702
Rancho Santa Fe, CA 92067

PS Form 3800

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To
Margaret L Decker
413 State Highway 140
Hesperus, CO 81326

PS Form 3800

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Kim R Dougherty Trust
PO Box 702
Rancho Santa Fe, CA 92067

2. Article Number
(Transfer from service label) 7006 0100 0000 9744 3935

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (*Extra Fee*) Yes

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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 checked="" type="checkbox"/> Addressee	
1. Article Addressed to: Jaye Elmer Decker 280 County Road 1332 La Plata, NM 87418		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	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		<u>7006 0100 0000 9744 3942</u>	

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To
Jane K Beard
4104 Lovers Lane
Dallas, TX 75225

PS Form 3800

7006 0100 0000 9744 3928

SHIPPED 1035

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To
Jaye Elmer Decker
280 County Road 1332
La Plata, NM 87418

PS Form 3800

7006 0100 0000 9744 3942

SHIPPED 1035

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: Jane K Beard 4104 Lovers Lane Dallas, TX 75225		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	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		<u>7006 0100 0000 9744 3928</u>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Julie Ann Antweil Trust
4408 Canyon Court N.E.
Albuquerque, NM 87111-0000

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7006 0100 0000 9744 3966

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here

Sent To
Street, Apt. or PO Box No
City, State, Zi

Kennon Decker
141 County Road 2300
Aztec, NM 87410

PS Form 3811

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here

Sent To
Street, Apt. No or PO Box No
City, State, Zi

Julie Ann Antweil Trust
4408 Canyon Court N.E.
Albuquerque, NM 87111-0000

PS Form 3811

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Kennon Decker
141 County Road 2300
Aztec, NM 87410

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7006 0100 0000 9744 3959

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:		B. Received by (Printed Name)	C. Date of Delivery
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
J. BURTON VETETO 607 ABO HOBBS, NM 88240-0000		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes			
2. Article Number (Transfer from service label)		7006 0100 0000 9744 3980	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

7006 0100 0000 9744 3997

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66
Postmark Here	
Sent To HERBERT KOKERNOT LEA 300 East Brow Rd. Lookout Mountain, TN 37350	

7006 0100 0000 9744 3980

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66
Postmark Here	
Sent To J. BURTON VETETO 607 ABO HOBBS, NM 88240-0000	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:		B. Received by (Printed Name)	C. Date of Delivery
HERBERT KOKERNOT LEA 300 East Brow Rd. Lookout Mountain, TN 37350		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 <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes			
2. Article Number (Transfer from service label)		7006 0100 0000 9744 3997	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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"/> X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name)	C. Date of Delivery
Bonanza Creek Minerals LLC 2321 Candelaria NS Albuquerque, NM 87107		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 lab)		3. Service Type	
7006 0100 0000 9744 4161		<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

7006 0100 0000 9744 3973

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here

SHIPPED SEP 19 2007

Sent To
J L Sharp or K B Sharp Trustee
Sharp Trustees of the James L
Sharp and Kathryn B Sharp Rev
Living Trust
102 Foxwood Lane
Wylie, TX 75098

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

7006 0100 0000 9744 4161

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here

9-19-07

Sent To
Bonanza Creek Minerals LLC
2321 Candelaria NS
Albuquerque, NM 87107

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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"/> X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name)	C. Date of Delivery
J L Sharp or K B Sharp Trustee Sharp Trustees of the James L Sharp and Kathryn B Sharp Rev Living Trust 102 Foxwood Lane Wylie, TX 75098		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	
7006 0100 0000 9744 3973		<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>H W Smith FDIC Account Of H W Smith Attn: William E Gregg Department Head PO Box 7549 Newport Beach, CA 92658-7549</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) <u>7006 0100 0000 9744 4017</u></p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here
9.19.07

Sent To Elizabeth Beard Tanksley
P.O.Box 720
Alpine, TX 79830

PS Form 3811

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$ 1.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here
9-19-07

Sent To H W Smith FDIC Account
Of H W Smith
Attn: William E Gregg
Department Head
PO Box 7549
Newport Beach, CA 92658-7549

PS Form 3811

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Elizabeth Beard Tanksley P.O.Box 720 Alpine, TX 79830</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) <u>7006 0100 0000 9744 4079</u></p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

EST OF LOTTIE PLUMMER
WOOLLEY
C/O B. WYNNE WOLLEY, JR.
20936 NE CRYSTAL COURT
BEND, OR 97701-8309

2. Article Number
(Transfer from service label) 7006 0100 0000 9744 4055

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$ 1.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To: Gibson Family Trust
PO Box 546
Tesuque, NM 87574

PS Form 3811

CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$ 41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Sent To: EST OF LOTTIE PLUMMER
WOOLLEY
C/O B. WYNNE WOLLEY, JR.
20936 NE CRYSTAL COURT
BEND, OR 97701-8309

PS Form 3800

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Gibson Family Trust
PO Box 546
Tesuque, NM 87574

2. Article Number
(Transfer from service label) 7006 0100 0000 9744 4048

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: Singer Brothers Bank of Oklahoma Dept. 1063 PO Box 2300 Tulsa, OK 74192		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	
2. Article Number (Transfer from service label)		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
PS Form 3811, February 2004		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
		7006 0100 0003 2150 1240	
		Domestic Return Receipt	
		102595-02-M-1540	

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT <small>(Domestic Mail Only, No Insurance Coverage Provided)</small>	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Postage \$.41 Certified Fee 2.40 Return Receipt Fee (Endorsement Required) 1.85 Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$ 4.66	Postmark Here 9.19.07
Sent To Fred Turner Minerals Ltd. P.O.Box 910 Midland, TX 79702	
PS Form 3800	

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT <small>(Domestic Mail Only, No Insurance Coverage Provided)</small>	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Postage \$.41 Certified Fee 2.40 Return Receipt Fee (Endorsement Required) 1.85 Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$ 4.66	Postmark Here
Sent To Singer Brothers Bank of Oklahoma Dept. 1063 PO Box 2300 Tulsa, OK 74192	
PS Form 3800	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: Fred Turner Minerals Ltd. P.O.Box 910 Midland, TX 79702		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	
2. Article Number (Transfer from service label)		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
PS Form 3811, February 2004		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
		7006 0100 0000 9744 4031	
		Domestic Return Receipt	
		102595-02-M-1540	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>☑ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>☑ Print your name and address on the reverse so that we can return the card to you.</p> <p>☑ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X</p>	
<p>1. Article Addressed to:</p> <p>Singer Brothers Bank of Oklahoma Dept. 1063 PO Box 2300 Tulsa, OK 74192</p>		<p>B. Received by (Printed Name)</p>	<p>C. Date of Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>7006 0100 0003 2150 1240</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>			

7006 0100 0000 9744 4031

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only. No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66
Postmark Here 9.19.07	
Sent To	Fred Turner Minerals Ltd. P.O. Box 910 Midland, TX 79702
PS Form 3800	

0421 0512 E000 0010 9007

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only. No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66
Postmark Here	
Sent To	Singer Brothers Bank of Oklahoma Dept. 1063 PO Box 2300 Tulsa, OK 74192
PS Form 3800	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>☑ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>☑ Print your name and address on the reverse so that we can return the card to you.</p> <p>☑ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X</p>	
<p>1. Article Addressed to:</p> <p>Fred Turner Minerals Ltd. P.O. Box 910 Midland, TX 79702</p>		<p>B. Received by (Printed Name)</p>	<p>C. Date of Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>7006 0100 0000 9744 4031</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>			

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:		B. Received by (Printed Name)	C. Date of Delivery
Conoco Phillips Attn: Outside Operated JIB 22295 Network Place Chicago, IL 60673-1222		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)		7006 0100 0000 9744 3812	
3. Service Type		<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service		CERTIFIED MAIL RECEIPT	
(Domestic Mail Only. No Insurance Coverage Provided)			
For delivery information visit our website at www.usps.com			
OFFICIAL USE			
Postage	\$.41	Postmark Here	
Certified Fee	2.40		
Return Receipt Fee (Endorsement Required)	1.85		
Restricted Delivery Fee (Endorsement Required)			
Total Postage & Fees	\$ 4.66		
Sent To	Conoco Phillips		
Street, Apt. No.; or PO Box No.	Attn: Outside Operated JIB		
City, State, ZIP+	22295 Network Place		
	Chicago, IL 60673-1222		

7006 0100 0000 9744 3812

PS Form 3800

U.S. Postal Service		CERTIFIED MAIL RECEIPT	
(Domestic Mail Only. No Insurance Coverage Provided)			
For delivery information visit our website at www.usps.com			
OFFICIAL USE			
Postage	\$.41	Postmark Here	
Certified Fee	2.40		
Return Receipt Fee (Endorsement Required)	1.85		
Restricted Delivery Fee (Endorsement Required)			
Total Postage & Fees	\$ 4.66		
Sent To	ELIZABETH H. WHITE FAMILY TR		
Street, Apt. No. or PO Box No.	LINDA PAYNE, TRUSTEE		
City, State, ZIP+	PO BOX 780099		
	DALLAS, TX 75378-0099		

7006 0100 0000 9744 4062

PS Form 3800

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:		B. Received by (Printed Name)	C. Date of Delivery
ELIZABETH H. WHITE FAMILY TR LINDA PAYNE, TRUSTEE PO BOX 780099 DALLAS, TX 75378-0099		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)		7006 0100 0000 9744 4062	
3. Service Type		<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

PS Form 3811 February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Davoil Oil & Gas Ltd
PO Box 122269
Fort Worth, TX 76121-2269

2. Article Number
(Transfer from service label) 7006 0100 0000 9744 3836

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0003 2411 7974

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here

Sent To: Stephen M Royce Trust
727 North Rios Ave
Solana Beach, CA 92075

PS Form 3800

7006 0100 0000 9744 3836

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here

Sent To: Davoil Oil & Gas Ltd
PO Box 122269
Fort Worth, TX 76121-2269

PS Form 3800

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Stephen M Royce Trust
727 North Rios Ave
Solana Beach, CA 92075

2. Article Number
(Transfer from service label) 7006 0100 0003 2411 7974

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: Great Western Drilling Company PO Box 1659 Midland, TX 79702-1659		B. Received by (Printed Name) C. Date of Delivery	
2. Article Number (Transfer from service label) 7006 0100 0003 2411 7981		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004 Domestic Return Receipt			

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only. No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41	Postmark Here
Certified Fee	2.40	
Return Receipt Fee (Endorsement Required)	1.85	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.106	

Sent To Williams Production Co
 Attn: Doug Bird
 One Williams Center
 PO Box 3102 MS 37-4
 Tulsa, OK 74101

PS Form 3800

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only. No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41	Postmark Here
Certified Fee	2.40	
Return Receipt Fee (Endorsement Required)	1.85	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.66	

Sent To Great Western Drilling Company
 PO Box 1659
 Midland, TX 79702-1659

PS Form 3800

SHIPPED SEP 19 2006

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: Williams Production Co Attn: Doug Bird One Williams Center PO Box 3102 MS 37-4 Tulsa, OK 74101		B. Received by (Printed Name) C. Date of Delivery	
2. Article Number		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X	
		B. Received by (Printed Name)	C. Date of Delivery
1. Article Addressed to: El Paso Production Oil & Gas Co. 1001 Louisiana Street Houston, TX 77002-5089		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		7006 0100 0000 9744 3843	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

U.S. Postal Service	
CERTIFIED MAIL RECEIPT <small>(Domestic Mail Only. No Insurance Coverage Provided)</small>	
<small>For delivery information, visit our website at www.usps.com</small>	
OFFICIAL USE	
Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66
Postmark Here	
Sent To BP America Production Company Attn: Outside OP Joint Interest PO Box 21868 Tulsa, OK 74121-1868	
<small>PS Form 3800, June 2003</small>	

U.S. Postal Service	
CERTIFIED MAIL RECEIPT <small>(Domestic Mail Only. No Insurance Coverage Provided)</small>	
<small>For delivery information, visit our website at www.usps.com</small>	
OFFICIAL USE	
Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66
Postmark Here	
Sent To El Paso Production Oil & Gas Co. 1001 Louisiana Street Houston, TX 77002-5089	
<small>PS Form 3800, June 2003</small>	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X	
		B. Received by (Printed Name)	C. Date of Delivery
1. Article Addressed to: BP America Production Company Attn: Outside OP Joint Interest PO Box 21868 Tulsa, OK 74121-1868		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		7006 0100 0000 9744 4413	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Elliott Industries
PO Box 3300
Roswell, NM 88202-3300

2. Article Number
(Transfer from service label) 7006 0100 0000 9744 3850

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here

Sent To Elliott-Hall Company
PO Box 1231
Ogden, UT 84402-0000

PS Form 3800

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$.41
Certified Fee	2.40
Return Receipt Fee (Endorsement Required)	1.85
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.66

Postmark Here

Sent To Elliott Industries
PO Box 3300
Roswell, NM 88202-3300

PS Form 3800

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Elliott-Hall Company
PO Box 1231
Ogden, UT 84402-0000

2. Article Number
(Transfer from service label) 7006 0100 0000 9744 3867

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p><input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p><input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.</p> <p><input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Sandra Royce Trust 1605 Gascony Road Leucadia, CA 92024</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> <hr/> <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <hr/> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p style="text-align: center;">7006 0100 0000 9744 4420</p>

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service CERTIFIED MAIL RECEIPT <small>(Domestic Mail Only, No Insurance Coverage Provided)</small>	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ 1.41
Certified Fee	2.40
Return Receipt Fee <small>(Endorsement Required)</small>	1.85
Restricted Delivery Fee <small>(Endorsement Required)</small>	
Total Postage & Fees	\$ 4.66
Sent To Street, Apt. No. or PO Box No. City, State, Zip	Sandra Royce Trust 1605 Gascony Road Leucadia, CA 92024

7006 0100 0000 9744 4420

SHIPPED SEP 10 2004

PS Form 3800

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.
SF 078312

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
J.E. Decker #9

9. API Well No.
30-045-27426

10. Field and Pool, or Exploratory Area
Basin Fruitland Coal

11. County or Parish, State
San Juan County, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Great Western Drilling Co. c/o Walsh Engineering

3a. Address
7415 E. Main, Farmington, NM, 87402

3b. Phone No. (include area code)
505-327-4892

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1506' FSL and 938' FWL, Sec. 12, T32N, R12W

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Surface</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>Commingle</u>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operations (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Great Western Drilling has applied the the New Mexico Oil Conservation Division for approval to surface commingle the gas production from The JE Decker #9, JE Decker #10 (SW Sec. 7, T32N, R11W) and the JE Decker #11 (SW Sec.8, T32N, R11W). The wells are being commingled so they can use a common flow line and measurement facilities into a low pressure gathering system. The three wells are on different Federal leases and all three wells will have an allocation meter. Please see the attach application. The BLM is being notified of this application pursuant to NMOCD rules.

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed) Paul C. Thompson, P.E.	Title Agent
Signature <i>Paul C. Thompson</i>	Date September 12, 2007

THIS SPACE FOR FEDERAL OR STATE USE

Approved by	Title	Date
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	

Title 18 U.S.C. Section 1001, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Doc #11
File

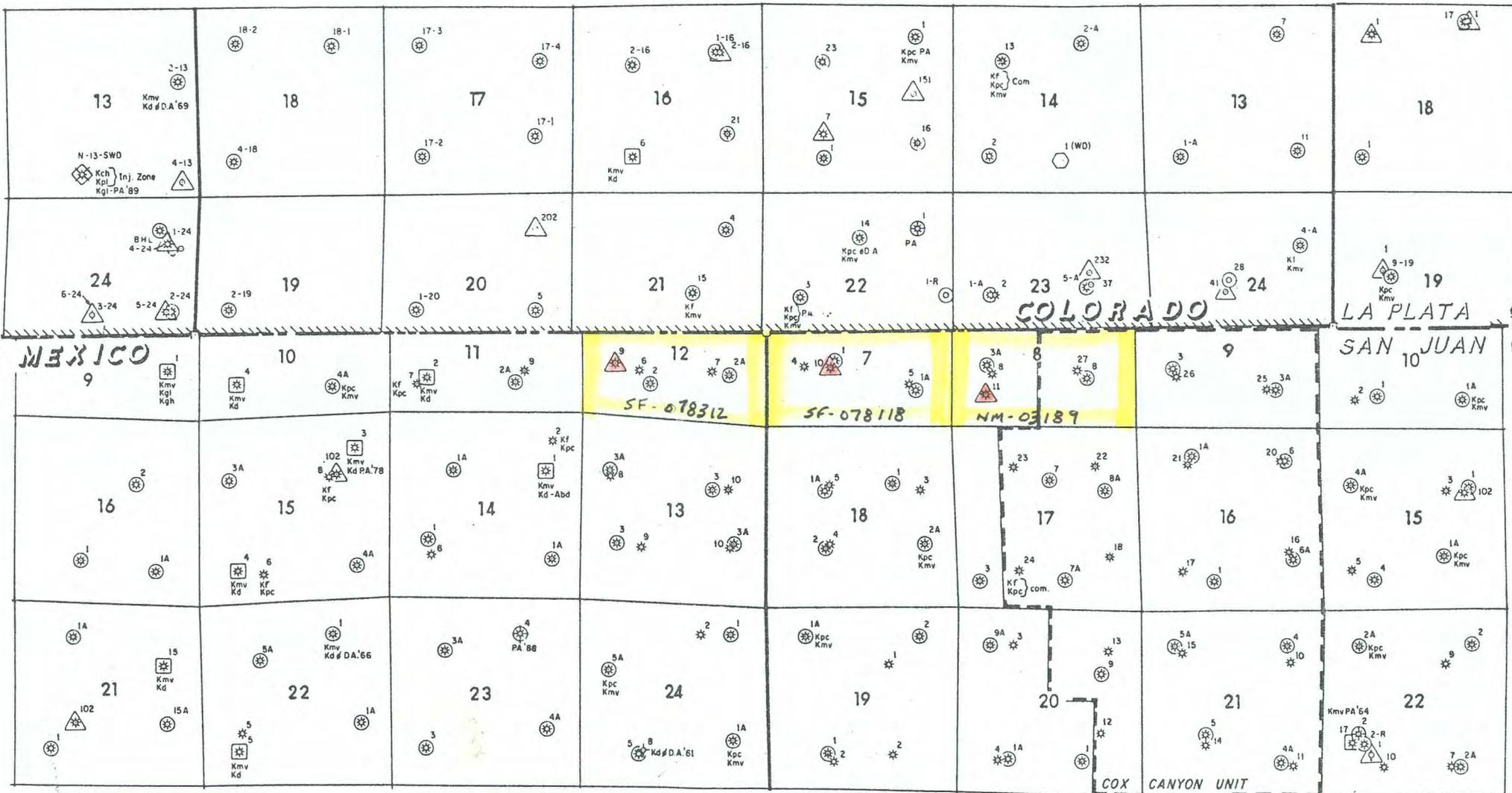
R-12-W

R-11-W

R-10-W

T
32
N

T
32
N



NEW MEXICO

COLORADO

LA PLATA CO.

SAN JUAN CO.

R-12-W

R-11-W

PRODUCING INTERVAL

WELL STATUS

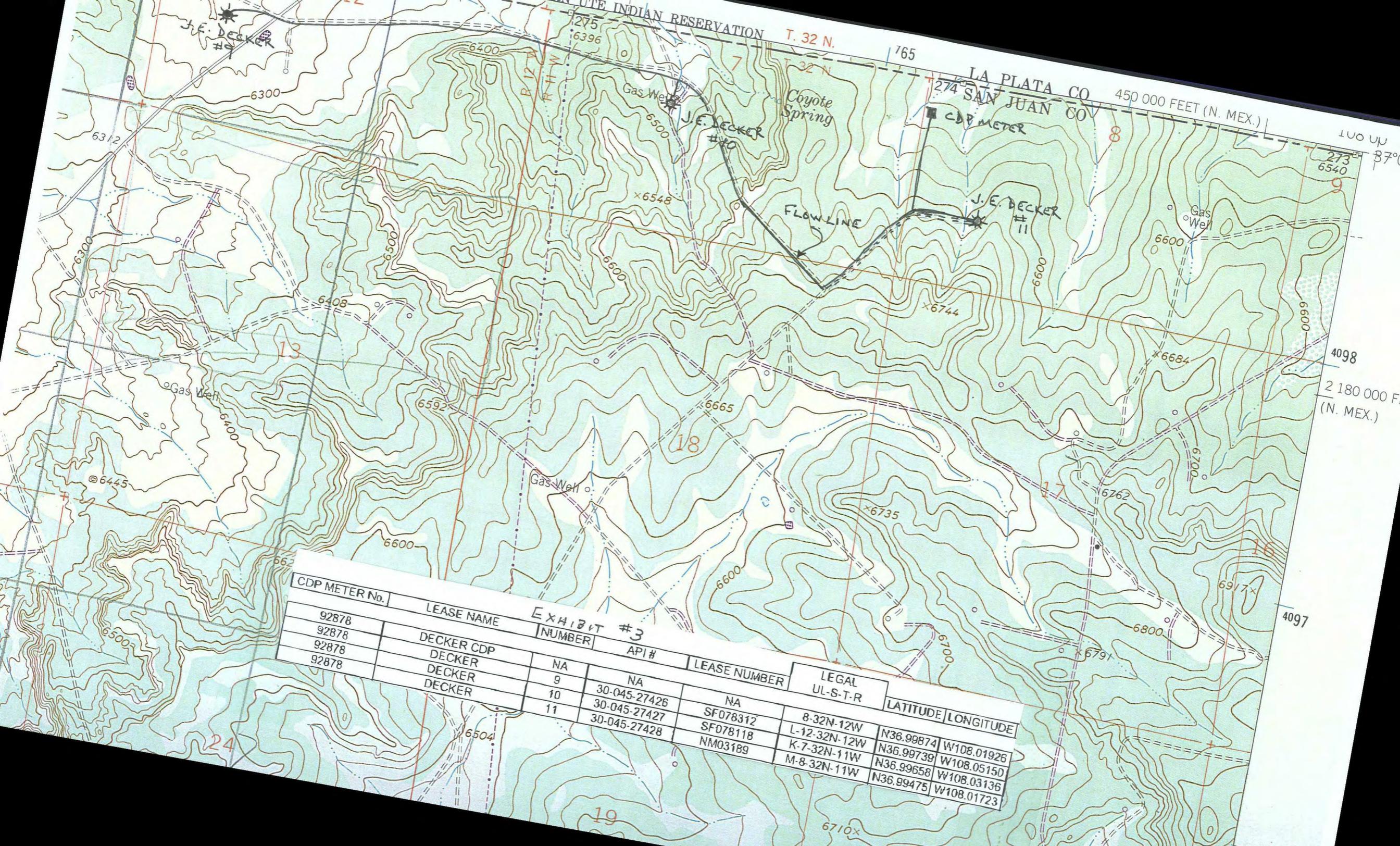
Kfm * FARMINGTON Kfm

* - GAS WELL

T - TEMPORARILY ABANDONED

• - OIL WELL

A - PERMANENTLY ABANDONED



CDP METER No.	LEASE NAME	EXHIBIT #	API #	LEASE NUMBER	LEGAL UL-S-T-R	LATITUDE	LONGITUDE
92878	DECKER CDP	3	NA	NA	8-32N-12W	N36.99874	W108.01926
92878	DECKER		9	30-045-27426	L-12-32N-12W	N36.99739	W108.05150
92878	DECKER		10	30-045-27427	K-7-32N-11W	N36.99658	W108.03136
92878	DECKER		11	30-045-27428	M-8-32N-11W	N36.99475	W108.01723

EXHIBIT 4

