

DATE IN <u>1-14-10</u>	SUSPENSE	ENGINEER <u>R.E.</u>	LOGGED IN <u>1-14</u>	TYPE <u>CTB</u>	PTG-W APP NO. <u>1001433481</u>
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ABOVE THIS LINE FOR DIVISION USE ONLY

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



Deon
RECEIVED OOD

2010 JAN 14 A 9:24

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]

[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

CTB-610

[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.

Stephanie A. Ysasaga
 Print or Type Name

Signature

Sr. Staff Engineering Technician
 Title

11/20/2009
 Date

Stephanie.Ysasaga@dnv.com
 e-mail Address



Devon Energy Production Company
Operations Engineering
20 North Broadway – CT 3.056
Oklahoma City, Oklahoma 73102-8260
Phone: (405)-552-7802
Fax (405)-552-8113
Stephanie.Ysasaga@devon.com

November 23rd, 2009

Mr. Richard Ezeanyim
State of New Mexico
Oil Conservation Division
1220 S. St. Francis Drive
Santa Fe, New Mexico 87505

**Re: Lease Commingling, Off Lease Measurement and Off Lease Sales Approval
Hackberry 6 Federal 1 & Strawberry 7 Federal Com 1
API # 30-015-31020 & 30-015-31876
Sec 6-T19S-R31E – Lease NM-66437 & Sec 7-T19S-31E – Lease NM-100561
Hackberry; Bone Spring, North - Pool Code: 97056
Eddy County, New Mexico**

Dear Mr. Ezeanyim:

Please find attached the OCD Form C-107B, OCD Form C-103 and BLM Form 3160-5 Sundry Notice of Intent to Lease Commingle the aforementioned wells. The working interest, royalty interest and overriding royalty interest owners in both leases are not uniform; parties have been notified via certified mail.

BLM sundry approval and BLM conditions of approval attached.

Should you require any additional information or assistance, please do not hesitate to contact me at (405)-552-7802.

Very truly yours,

DEVON ENERGY PRODUCTION COMPANY, L.P.

Stephanie A. Ysasaga
Sr. Staff Engineering Technician ☺

Enclosures

APPLICATION FOR LEASE COMMINGLING & OFF-LEASE MEASUREMENT AND OFF LEASE SALES APPROVAL

State of New Mexico – Santa Fe
 Oil Conservation Division
 1220 S. St Francis Drive
 Santa Fe, New Mexico 87505

Lease commingling proposal for Hackberry & Strawberry leases:

Devon Energy Production Company, LP is requesting approval for surface commingle, off-lease storage and off-lease measurement of hydrocarbon gas production from the Hackberry; Bone Springs, NW Pool (97056) from the following wells:

Federal Lease NM-66437

Well Name	Location	API #	Pool 97056	MCF	BTU
Hackberry 6 Federal 1	NWSE Sec 6-T19S-R31E	30-015-31020	Hackberry, Bone Spring, North	242	1375

Federal Lease NM-100561

Well Name	Location	API #	Pool 97056	MCF	BTU
Strawberry 7 Federal Com 1	NENW Sec 7-T19S-R31E	30-015-31876	Hackberry, Bone Spring, North	1257	1356

A map (Exhibit A) is enclosed showing the Federal leases and well locations in Section 6 and 7 of T19S R31E. The ownership in the Hackberry and Ranger leases are not identical; all affected working interest, royalty and overriding royalty owners have been notified of this proposal (Exhibit B).

Gas metering:

The gas hydrocarbon production from the Hackberry 6 Federal 1 and Strawberry 7 Federal Com 1 will be the only hydrocarbon being commingled, measured and sold off-lease. Each location has its' own facility located in the NWSE and NENW of Section 6 and 7 (respectively) in T19S, R31E on Federal Leases NM-66437 and NM-100561 in Eddy County, New Mexico (Exhibit C). A common gas sales meter associated with a Frontier central delivery point (CDP) is located in Sec 18-T19S-R31E approximately 1 mile south of the Strawberry 7 Federal 1.

The "Subtraction Method" will be used to allocate production back to the wells after commingling. A gas allocation meter is located at the Strawberry 7 Federal 1 location. After subtracting the Strawberry 7 Federal 1 gas volumes from the Frontier gas sales meter, gas volumes are given to the Hackberry 6 Federal 1. To save on costs, Devon proposes to use a chart recorder to measure and verify the gas rate on the Hackberry 6 Federal 1.

The BLM's interest in both wells are the same and the BTU's are equivalent. Waste is not induced and no correlative rights are impaired. These meters will be calibrated on a regular basis per API, NMOCD and BLM specifications. The BLM and OCD will be notified of any future changes in the facilities.

Process and Flow Descriptions:

Please see attached diagrams for the proposed Hackberry 6 Federal 1 and Strawberry 7 Federal Com 1 batteries. The flow of produced fluids is shown in detail on Exhibit D along with a description of each vessel.

The commingling of production is in the interest of conservation and waste and will result in the most effective, economic means of producing the reserves in place from the affected wells and will not result in reduced royalty or improper measurement of production. The proposed commingling will reduce operating expenses as well as reduce the surface facility footprint and overall emissions.

Devon Energy Production Company, LP understands the requested approval will not constitute the granting of any right-of-way or construction rights not granted by the lease instrument. Additionally, Devon Energy Production Co., LP will submit within 30 days, an application for right-of-way approval to the BLM and NMOCD section in your office, if we have not already done so.

District I
1625 N. French Drive, Hobbs, NM 88240
District II
1301 W. Grand Ave, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St Francis Dr, Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-107-B
Revised June 10, 2003

OIL CONSERVATION DIVISION

1220 S. St Francis Drive
Santa Fe, New Mexico 87505

Submit the original application to the Santa Fe office with one copy to the appropriate District Office.

APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)

OPERATOR NAME: Devon Energy Production Co., LP
OPERATOR ADDRESS: 20 North Broadway OKC, OK 73102
APPLICATION TYPE:

Pool Commingling Lease Commingling Pool and Lease Commingling Off-Lease Storage and Measurement (Only if not Surface Commingled)

LEASE TYPE: Fee State Federal

Is this an Amendment to existing Order? Yes No If "Yes", please include the appropriate Order No. _____
Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling
 Yes No

(A) POOL COMMINGLING
Please attach sheets with the following information

(1) Pool Names and Codes	Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production	Calculated Value of Commingled Production	Volumes

- (2) Are any wells producing at top allowables? Yes No
(3) Has all interest owners been notified by certified mail of the proposed commingling? Yes No.
(4) Measurement type: Metering Other (Specify)
(5) Will commingling decrease the value of production? Yes No If "yes", describe why commingling should be approved

(B) LEASE COMMINGLING
Please attach sheets with the following information

- (1) Pool Name and Code. Hackberry; Bone Spring, North (97056)
(2) Is all production from same source of supply? Yes No
(3) Has all interest owners been notified by certified mail of the proposed commingling? Yes No
(4) Measurement type: Metering Other (Specify) – Each location has its' own tank battery. One gas allocation meter on Strawberry location and use of Subtraction Method to allocate sales back to the Hackberry location after commingling at a Frontier central delivery point (CDP) located in Sec 18-T19S-R31E approximately 1 mile south of the Strawberry 7 Federal I. A chart recorder will be used on the Hackberry to measure and verify gas rate.

(C) POOL and LEASE COMMINGLING
Please attach sheets with the following information

- (1) Complete Sections A and E.

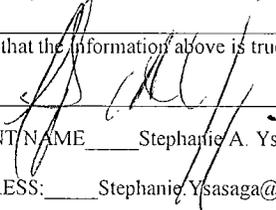
(D) OFF-LEASE STORAGE and MEASUREMENT
Please attached sheets with the following information

- (1) Is all production from same source of supply? Yes No
(2) Include proof of notice to all interest owners.

(E) ADDITIONAL INFORMATION (for all application types)
Please attach sheets with the following information

- (1) A schematic diagram of facility, including legal location.
(2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved.
(3) Lease Names, Lease and Well Numbers, and API Numbers.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE:  TITLE: Sr. Staff Engineering Technician DATE: 11/20/2009
TYPE OR PRINT NAME: Stephanie A. Ysasaga TELEPHONE NO.: (405)-552-7802
E-MAIL ADDRESS: Stephanie.Ysasaga@dvn.com

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-31020 & 30-015-31876
5. Indicate Type of Lease FED <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name See Below
8. Well Number
9. OGRID Number 6137
10. Pool name or Wildcat See Below

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
Devon Energy Production Company, LP

3. Address of Operator
20 North Broadway Oklahoma City, Oklahoma 73102-8260 (405) 552-7802

4. Well Location (See Below)
 Unit Letter _____ : _____ feet from the _____ line and _____ feet from the _____ line
 Section _____ Township _____ Range _____ NMPM Eddy County New Mexico

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
n/a

Pit or Below-grade Tank Application or Closure

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls: Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>OTHER: LEASE COMMINGLE, OFF-LEASE GAS SALES & MEASUREMENT <input checked="" type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>
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13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Devon Energy Production Co., LLP respectfully requests approval for lease commingle and off lease storage and measurement of gas hydrocarbon production from the following wells:

- * Hackberry 6 Federal I: API # 30-015-31020 Sec 6-T19S-R31E Lease NM-66437 Hackberry; Bone Spring, North (97056)
- * Strawberry 7 Federal Com 1: API # 30-015-31876 Sec 7-T19S-R31E Lease NM-100561 Hackberry; Bone Spring, North (97056)

Each location has its' own tank battery. The Subtraction Method will be used to allocate production back to the wells after commingling, instead of metering both locations, to save on costs. Gas allocation meter located at Strawberry 7 Federal I. A common gas sales meter associated with a Frontier central delivery point (CDP) is located in Sec 18-T19S-R31E approximately 1 mile south of the Strawberry 7 Federal Com 1. After subtracting Strawberry 7 Federal I gas volumes from the Frontier gas sales meter, gas volumes are given to the Hackberry 6 Federal I. A chart recorded will be used on the Hackberry 18 Federal I to measure and verify the gate rate on the Hackberry 6 Federal I. Waste is not induced and no correlative rights are impaired.

Working, royalty, and overriding interest owners have been notified via certified mail (see attached).

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE _____ TITLE Sr. Staff Engineering Technician DATE 11/20/2009

Type or print name Stephanie A. Ysasaga E-mail address: Stephanie.Ysasaga@dvn.com Telephone No. (405) 552-7802
 For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
 Conditions of Approval (if any): _____

UNITED STATES **OPERATOR'S COPY**
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.
NM-66437 & NM-100561

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Devon Energy Production Co., LP

3a. Address
20 North Broadway
OKC, OK 73102

3b. Phone No. (include area code)
(405)-552-7802

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
See below

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

8. Well Name and No.
Hackberry 6 Federal 1 / Strawberry 7 Federal 1

9. API Well No.
30-015-31020 & 30-015-31876

10. Field and Pool or Exploratory Area
Hackberry; Bone Springs, North (97056)

11. Country or Parish, State
Eddy County, NM



12. CHECK THE 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 Lease Commingle:
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Off-Lease Gas
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	Sales & Measurement

13. Describe Proposed or Completed Operation: 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 recompleat 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Devon Energy Production Co., LLP respectfully requests approval for lease commingle and off lease storage and measurement of gas hydrocarbon production from the following wells:

- * Hackberry 6 Federal 1: API # 30-015-31020 Sec 6-T19S-R31E Lease NM-66437 Hackberry; Bone Spring, North (97056)
- * Strawberry 7 Federal Com 1: API # 30-015-31876 Sec 7-T19S-R31E Lease NM-100561 Hackberry; Bone Spring, North (97056)

Each location has its' own tank battery. The Subtraction Method will be used to allocate production back to the wells after commingling, instead of metering both locations, to save on costs. Gas allocation meter located at Strawberry 7 Federal 1. A common gas sales meter associated with a Frontier central delivery point (CDP) is located in Sec 18-T19S-R31E approximately 1 mile south of the Strawberry 7 Federal Com 1. After subtracting Strawberry 7 Federal 1 gas volumes from the Frontier gas sales meter, gas volumes are given to the Hackberry 6 Federal 1. A chart recorded will be used on the Hackberry 18 Federal 1 to measure and verify the gate rate on the Hackberry 6 Federal 1. Waste is not induced and no correlative rights are impaired.

Working, royalty, and overriding interest owners have been notified via certified mail (see attached).

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**

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

Name (Printed/Typed)
Stephanie A. Ysasaga

Title Sr. Staff Engineering Technician

Signature *[Handwritten Signature]*

Date 11/20/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by *[Handwritten Signature]*

Title *LPE-7*

Date *11/5/2010*

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 *CFO*

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, 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.

**Bureau of Land Management
Carlsbad Field Office
620 East Greene Street
Carlsbad, New Mexico 88220
575-234-5972**

Off-Lease Measurement, Storage and Surface Commingling

Conditions of Approval

Approval of surface commingling and off-lease sales and/or measurement is subject to the following conditions of approval:

1. This agency shall be notified of any change in sales method or location of sales point.
2. This agency shall be notified of any spill or discharge as required by NTL-3A.
3. This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
4. This approval is subject to like approval by the New Mexico Oil Conservation Division.
5. Additional wells and/or leases require additional commingling approvals.
6. This approval does not constitute right-of-way approval for any off-lease activities. Within 30 days, an application for right-of-way approval must be submitted to the Realty Section if not already done.
7. Approval for combining production from various sources is a privilege which is granted to lessees for the purpose of aiding conservation and extending the economic life of leases. Applicants should be cognizant that failure to operate in accordance with the provisions outlined in the Authorized Officer's conditions of approval and/or subsequent stipulations or modifications will subject such approval to revocation.
8. All above-ground structures not subject to safety requirements shall be painted by the holder to blend with the natural color of the landscape. The paint used shall be color which simulates "standard Environmental Colors" – Shale Green, Munsell Soil Color No. 5Y 4/2.
9. If any additional wells are added to this CDP, a gas meter will have to be installed on the Hackberry 6 Federal # 1, after commingling approval has been submitted for additional wells.

Blaine Hess
P.O. Box 326
Roswell, NM 88202-0326
7008-1830-0003-1986-2680

Yates Petroleum Corporation
Kathy H Porter AIF
105 South 4th Street Artesia, NM 88210
7008-1830-0002-7421-8690

Chi Energy Inc.
P.O. Box 1799
Midland, TX 79702
7008-1830-0003-1986-2703

Featherstone Development Corp
P.O. Box 429
Roswell, NM 88202
7008-1830-0003-1986-2710

Minerals Management Service Royalty Mgmt Prgrm
P.O. Box 5810
Denver, CO 80217-5810
7008-1830-0003-1986-2727

Western Oil Producers Inc.
P.O. Box 2800
Midland, TX 79702-2800
7008-1830-0003-1986-2734

Harle Inc.
22230 SW Taylors Dr
Tualatin, OR 97062
7008-1830-0003-1986-2741

J T Jackson & Associates
2302 Sierra Vista
Artesia, NM 88210-9409
7008-1830-0003-1986-2758

James E Guy & Peggy Guy Trustec of the P J Guy
Trustees of the Family Trust
604 S 17th Street Artesia, NM 88210
7008-1830-0003-1986-2765

Dillard Fisher & Dillard Pship
415 West Wall STE 703
Midland, TX 79701
7008-1830-0003-1986-2772

Gary W Darmon & Lynne Darmon
P.O. Box 10
Capitan, NM 88316
7008-1830-0003-1986-2789

Richard J Forrest Jr
208 Dickson Lane
Carlsbad, NM 88220
7008-1830-0003-1986-2796

J Brad & Debbi L Jeffers
P.O. Box 2188
Roswell, NM 88202
7008-1830-0003-1986-2802

Steve W & Stacy D Lewis
1807 Don Lewis Road
Artesia, NM 88210-9340
7008-1830-0003-1986-2819

Rance C Miles
P.O. Box 713
Artesia, NM 88211-0713
7008-1830-0003-1986-2826

Thomas D Ramage
RT 1, 2904 Ave De Amigos
Roswell, NM 88201
7008-1830-0003-1986-2833

SSS Enterprises LLC
P.O. Box 5422
Hobbs, NM 88241
7008-1830-0003-1986-2840

J E Cieszinski
22 Riverside Drive
Roswell, NM 88201
7008-1830-0003-1986-2857

Gerald E & Emma Harrington Tr
P.O. Box 3716
Roswell, NM 88202
7008-1830-0003-1986-2864

W J Ball & Carrol Ball Trust
3106 N Montana Ave
Roswell, NM 88201
7008-1830-0003-1986-2871

James K & Martha Lusk Trust
1310 E 131 St Drive
Thornton, CO 80241
7008-1830-0003-1986-2888

Donald W Gardener
3620 W Turkey Lane
Tucson, AZ 85741
7008-1830-0003-1986-2895

Larry Arnold
P.O. Box 2253
Hobbs, NM 88241-2253
7008-1830-0003-1986-2901

Maurice Mordka
1800 North Grady
Tucson, AZ 85715
7008-1830-0003-1986-2918

Necco Inc.
P.O. Box 10847
Midland, TX 79702
7008-1830-0003-1986-2925

Lantana Oil Company
P.O. Box 1837
Roswell, NM 88202-1837
7008-1830-0003-1986-2932

Parrot Head Properties LLC
Angela L Naranjo Registered
P.O. Box 429 Roswell, NM 88202
7008-1830-0003-1986-2949

Norman L Stevens Jr Rev Trust
P.O. Box 3087
Roswell, NM 88202-3087
7008-1830-0003-1986-2956

Free Ride LLC
P.O. Box 429
Roswell, NM 88202
7008-1830-0003-1986-2963

Lobos Energy Partners LLC
3817 NW Expressway STE 950
OKC, OK 73112
7008-1830-0003-1896-2970

McCombs Energy Ltd
5599 San Felipe, Ste 1200
Houston, TX 77056
7008-1830-0003-1986-2987

Big Three Energy Group LLC
P.O. Box 429
Roswell, NM 88202
7008-1830-0003-1986-2994

Termac Oil & Gas LLC
P.O. Box 2212
Roswell, NM 88202
7008-1830-0003-1986-3007

David R Gannaway
P.O. Box 2791
Roswell, NM 88202
7008-1830-0003-1986-3014

Tom P Stephens Trust BOK NA Trustee
P.O. Box 840738
Dallas, TX 75284-0738
7008-1830-0003-1986-3021

Sun Valley Energy Corporation
P.O. Box 1000
Roswell, NM 88202-1000
7008-1830-0003-1986-3038

Centennial
Post Office Box 1837
Roswell, NM 88202-1837
7008-1830-0003-1986-3045

Cannon Exploration Company
3608 S County Road 1184
Midland, TX 79706-6468
7008-1830-0003-1986-3052

Permian Hunter Corporation
275 East South Temple STE 250
Salt Lake City, UT 84111
7008-1830-0003-1986-3069

Roger T & Holly L Elliott Family Lmted Ptshp LP
4105 Baybrook Drive
Midland, TX 79707
7008-1830-0003-1986-3076

Barbe Development LLC
P.O. Box 2107
Roswell, NM 88202-2107
7008-1830-0003-1986-3083

Joan M Voigt
7 Sherborne Wood
San Antonio, TX 78218
7008-1830-0003-1986-3090

Marbob Energy Corporation
P.O. Box 227
Artesia, NM 88211
7008-1830-0003-1986-3106

Todd M Wilson
3608 S County Rd 1184
Midland, TX 79706-6468
7008-1830-0003-1986-3113

Stanford University c/o Bank of America
P.O. Box 840738
Dallas, TX 75284-0738
7008-1830-0003-1986-3120

Pitch Energy Corporation
P.O. Box 227
Artesia, NM 88211-0227
7008-1830-0003-1986-3137

PBR Properties Joint Venture
P.O. Box 2802
Midland, TX 79702
7008-1830-0003-1986-3144

Wallfam Limited Partnership
1811 Heritage Blvd, Ste 200
Midland, TX 79707
7008-1830-0003-1986-3151

Hanson Operating Co. Inc.
P.O. Box 1515
Roswell, NM 88202
7008-1830-0003-1986-3168

Constance B Cartwright Trustee
2444 Wilshire Blvd, Ste 508
Santa Monica, CA 90403-5808
7008-1830-0003-1986-3175

Willis R Hartsock c/o Bank of America
P.O. Box 620020
Dallas, TX 75262
7008-1830-0003-1986-3182

Ward C Hartsock c/o Bank of America
P.O. Box 620020
Dallas, TX 75262
7008-1830-0003-1986-3199

Jeanne (Jean) Edna Hunt
P.O. Box 251406
Plano, TX 75025-1406
7008-1830-0003-1986-3205

Franklin Thompson Family Agcy Trust #4012
P.O. Box 840738
Dallas, TX 75284-0738
7008-1830-0003-1986-3212

Jane Landreth Russell Agency
Lock Box 3480
Omaha, NE 68103-0480
7008-1830-0003-1986-3229

Lynda L Shrop Trust #1
P.O. Box 3480
Roswell, NM 88202-1837
7008-1830-0003-1986-3236

Robert H Tennant
9563 Doliver
Houston, TX 77063
7008-1830-0003-1986-3243

Robert H Tennant Jr Testament Trustee
Robert H Tennant Trustee
9563 Doliver Houston, TX 77063
7008-1830-0003-1986-3250

Borden Hamilton Tennant Trust
Robert H Tennant Trustee
9563 Doliver Houston, TX 77063
7008-1830-0003-1986-3267

Mary Elizabeth Tennant Trust
Robert H Tennant Trustee
9563 Doliver Houston, TX 77063
7008-1830-0003-1986-3274

Joseph A Tennant
P.O. Box 382
Marathon, TX 78942
7008-1830-0003-1986-3281

Carol J Christensen
19026 N 2nd Avenue
Phoenix, AZ 85027
7008-1830-0003-1986-3298

David Donnelly Trust
P.O. Box 1150
Lebanon, MO 65536
7008-1830-0003-1986-3304

David F Stout
1645 W Baseline Rd Unit 2146
Mesa, AZ 85202
7008-1140-0004-6108-8772

William T Henderson & Dorothy Hend Fam Trust
1906 E Battlefield Rd
Springfield, MO 65804
7008-1140-0004-6108-8789

Dillard Fisher & Dillard Pshp
415 West Wall, Ste 703
Midland, TX 79701
7008-1140-0004-6108-8796

Sue Hanson McBride
P.O. Box 1515
Roswell, NM 88202-1515
7008-1140-0004-6108-8802

Julie Scott McBride
P.O. Box 1515
Roswell, NM 88202-1515
7008-1140-0004-6108-8819

David G & Jean A Willis 1998 Trust
98 Reservoir Road
Atherton, CA 94027
7008-1140-0004-6108-8826

The THW & ADW Living Trust
1763 Royal Oaks Dr N, #E305
Bradbury, CA 91040-1999
7008-1140-0004-6108-8833

Anne W Briggs Rancho Del OSO
3610 Pacific Coast Highway
Davenport, CA 95017
7008-1140-0004-6108-8840

Thomas F McKenna Sr Credit
281 Genenvieve Dr
Tijeras, NM 87059
7008-1140-0004-6108-8857

W A Landreth Jr.
3207 W 4th Street
Ft Worth, TX 76102
7008-1140-0004-6108-8864

Mary Lindsey Kesterson Agency
Lock Box 3480
Omaha, NE 68103-0480
7008-1140-0004-6108-8871

Mary Adele Landreth Smith c/o Edward Smith
1675 Highway 591
Dublin, TX 76446
7008-1140-0004-6108-8888

Wright NM Partners LP
P.O. Box 752
Stanton, TX 79782
7008-1140-0004-6108-8895

William Locke Allison III
2641 Fines Creek Drive
Statesville, NC 28625
7008-1140-0004-6108-8918

W B Kindelsparger Estate
P.O. Box 1148
Odessa, TX 79760-1148
7008-1140-0004-6108-8925

John T Landreth
P.O. Box 180
Engle, CO 81631-0180
7008-1140-0004-6108-8932

Mary Adele Landreth Trust
504 Fort Worth Club Bldg
306 West 7th Street Fort Worth, TX 76102-4905
7008-1140-0004-6108-8949

R D Mellard Estate
P.O. Box 1506
Hope, NM 88250
7008-1140-0004-6108-8956

Thomas Ausley Allison
1122 Dogwood Rd
Statesville, NC 28677-3463
7008-1140-0004-6108-8963

Trust UWO Bettie, William, William Jr Rand & Allison Guess
Trustee
P.O. Box 4325 Rocky Mount, NC 27803
7008-1140-0004-6108-8970

Clarence G Neal Jr
3451 School Street
Fortuna, CA 95540-3623
7008-1140-0004-6108-8987

Phyllis M Wolfe
P.O. Box 14432
Phoenix, AZ 85063-4432
7008-1140-0004-6108-8994

Hazel N Collins Family Trust - Texas Bank: Attn Ed Fritz
2525 Ridgemar Blvd, Ste 100
Fort Worth, TX 76116
7008-1140-0004-6108-9007

John Michael Esses
10 Via Slano
Rancho Santa Monica, CA 92688-1330
7008-1140-0004-6108-9014

Ella Joan Neal Living Trust
6235 E Sea Breeze Drive
Long Beach, CA 90803
7008-1140-0004-6108-9021

Florence B Clark Hall c/o Minerals Service Agent
P.O. Box 244
St. Jacob, IL 62281-0244
7008-1140-0004-6108-9038

Barbara C Larimore c/o Minerals Service Agent
P.O. Box 244
St. Jacob, IL 62281-0244
7008-1140-0004-6108-9045

Harold G Hartsock Living Trust – Harold G, Mary
Louise Hartsock Trustees
P.O. Box 1449 Sanford, FL 32772-1449
7008-1140-0004-6108-9052

Helen Joy Smith c/o Adam B. Smith, CPA
5410 26th Street West
Bradenton, FL 34207
7008-1140-0004-6108-9069

Billie J David, Life Tenant
P.O. Box 7706
Midland, TX 79708
7008-1140-0004-6108-9076

Edith A Shelton Marital Trust – Bill Shelton Trustee
218 W Glen Eagles Road
Statesville, NC 28625 Mesa, AZ 85202
7008-1140-0004-6108-9083

Nedina S Clark Dupont c/o Horseshoe Investments
P.O. Box 190811-6811
St. Louis, MO 63119
7008-1140-0004-6108-9090

Babe Development LLC
P.O. Box 758
Roswell, NM 88202-0758
7008-1830-0003-1986-3342

Riall S Moore
124 Kelton Ave
San Carlos, CA 94070
7008-1830-0003-1986-3359

Shannon Moore
124 Merrydale #136
San Rafael, CA 94901
7008-1830-0003-1986-3366

McBride Oil & Gas Corporation
P.O. Box 1515
Roswell, NM 88202-1515
7008-1830-0003-1986-3373

Lobos Energy Partners LLC
3817 NW Expressway, Ste 950
OKC, OK 73112
7008-1830-0003-1986-3380

Stephanie P. Troth
5714 E Acoma Drive
Scottsdale, AZ 85254
7008-1140-6108-8604

Robin Fredrick Hill
1836 Shaded Wood
Walnut, CA 971789
7008-1830-0003-1986-2543

McCombs Energy Ltd.
5599 San Felipe, Ste 1200
Houston, TX 77056
7008-1140-6108-8901

Steven P. Thompson
P.O. Box 14596
Odessa, TX 79768
7008-1830-0003-1986-2536

Martha Watson Linnell
3950 Copperfield Ridge CT
Winston-Salem, NC 27106
7008-1830-0003-1986-2529

Fred A Watson Jr.
5404 Crown Ridge Rd NW
Albuquerque, NM 87114-5790
7008-1830-0003-1986-2512

Patti Watson Leake
7824 Osuna NE
Albuquerque, NM 87109-3042
7008-1140-0004-6107-8988

John N Eddy Trust – Jean C Eddy &
Thomas B Catron III Trustees
645 Camino Rancheros Santa Fe, NM 87505
7008-1140-0004-6107-9138

Anne H Deal
7044 50th Ave NE
Seattle, WA 98115
7008-1140-0004-6107-9145

Mary Virginia H Baer
1101 Arlington Ridge Rd – Unit 402
Arlington, VA 22202
7008-1140-0004-6107-9152

Richard K Barr
P.O. Box 847
Boerne, TX 78006
7008-1140-0004-6107-9169

Scott E Wilson
4601 Mirador Drive
Austin, TX 78735-1554
7008-1140-0004-6107-9176

Cannon Exploration Company
3608 S County Road 1184
Midland, TX 79706-6468
7008-1140-0004-6107-9244

Kathleen Irwin Schuster Separate Property
3213 Pepperwood Ln
Fort Collins, CO 80525-2944
7008-1830-0003-1986-3335

Dan W Irwin Separate Property
118 N Grant Street
Hinsdale, IL 60521
7008-1830-0003-1986-3328

Melinda Ann Benagh His Separate Property
2007 Big Horn Drive
Austin, TX 79734
7008-1830-0003-1986-3311

John Eric Thickstun His Separate Property
6672 Michael John Drive
La Jolla, CA 92037
7008-1140-0004-6108-8673

Mary Susan Thickstun Her Separate Property
5690 Arbor Grove CT
San Diego, CA 92121
7008-1140-0004-6108-8666

Thomas Lusk Thickstun His Separate Property
312 Foxglove
Kyle, TX 78640
7008-1140-0004-6108-8659

Patricia Benaugh White Her Separate Property
806 Lari Dawn
San Antonio, TX 78258
7008-1140-0004-6108-8642

Jennifer Thickstun Fessler
2557 Roscomare Road
Los Angeles, CA 90077
7008-1140-0004-6108-8635

Kathryn Ann Thickstun Leff
3131 Xenophone Street
San Diego, CA 92106-1537
7008-1140-0004-6108-8628

Edward Landreth Smith
1675 Hwy 591
Dublin, TX 76446
7008-1140-0004-6108-8611

Roger T & Holly L Elliot Family Lmted Prtnshp LP
4105 Baybrook Drive
Midland, TX 79707
7008-1140-0004-6108-8567

Occidental Permian LP
P.O. Box 4294
Houston, TX 77210-4294
7008-1140-0004-6108-8574

Joyco Investments LLC - Hanson Operation Co Inc
P.O. Box 2104
Roswell, NM 88202-2104
7008-1140-0004-6108-8581

Estate of Lonye Marie Williams Deceased
William T McGee Personal Rep
1701 River Run Rd, Ste 501 Ft. Worth, TX 76107-6548
7008-1140-0004-6108-8598

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:

Norman L Stevens Jr Rev Trust
 P.O. Box 3087
 Roswell, NM 88202-3087

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2956

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Bobby Carroll

Agent

Addressee

B. Received by (Printed Name)

Bobby CARROLL

C. Date of Delivery

11-24-09

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:

Clarence G Neal Jr
 3451 School Street
 Fortuna, CA 95546

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8987

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Lillian Neal

Agent

Addressee

B. Received by (Printed Name)

Lillian Neal

C. Date of Delivery

11-23-09

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:

Parrot Head Properties LLC
 Angela L Naranjo Registered
 P.O. Box 429 Roswell, NM 88202

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2949

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Angela Naranjo

Agent

Addressee

B. Received by (Printed Name)

ANGELA NARANJO

C. Date of Delivery

11-24-09

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:

Big Three Energy Group LLC
 P.O. Box 429
 Roswell, NM 88202

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2994

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

Agent

Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

11-24-09

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:

Thomas D Ramage
 RT 1, 2904 Ave De Amigos
 Roswell, NM 88201

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2833

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

Agent

Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

11-24-09

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:

Julie Scott McBride
 P.O. Box 1515
 Roswell, NM 88202-1515

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8819

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

Agent

Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

11-24-09

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:

J Brad & Debbi L Jeffers
 P.O. Box 2188
 Roswell, NM 88202

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2802

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

J. Brad Jeffers

Agent

Addressee

B. Received by (Printed Name)

J. Brad Jeffers

C. Date of Delivery

11-24-09

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:

Gerald E & Emma Harrington Tr.
 P.O. Box 3716
 Roswell, NM 88202

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2864

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

J. Brad Jeffers

Agent

Addressee

B. Received by (Printed Name)

J. Brad Jeffers

C. Date of Delivery

11-24-09

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:

SSS Enterprises LLC
 P.O. Box 5422
 Hobbs, NM 88241

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2840

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Samuel S. Spencer

Agent

Addressee

B. Received by (Printed Name)

Samuel S. Spencer

C. Date of Delivery

11-24-09

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

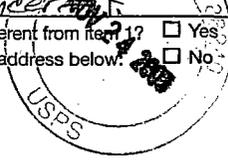
3. Service Type

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:

John Michael Esses
 10 Via Slano
 Rancho Santa Monica, CA 92688-1330

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 9014

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *John Michael Esses*

- Agent
- Addressee

B. Received by (Printed Name)

G. ESSER

C. Date of Delivery

1/1/24

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:

Billie J David, Life Tenant
 P.O. Box 7706
 Midland, TX 79708

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 9076

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Billie J David*

- Agent
- Addressee

B. Received by (Printed Name)

Billie J David

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:

Dillard Fisher & Dillard Pshp
 415 West Wall, Ste 703
 Midland, TX 79701

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8796

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *John Michael Esses*

- Agent
- Addressee

B. Received by (Printed Name)

John Michael Esses

C. Date of Delivery

1/1/24

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:

Joseph A Tennant
 P.O. Box 382
 Marathon, TX 78942

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3281

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Thomas P. Lehi* Agent Addressee

B. Received by (Printed Name)
 Thomas P. Lehi

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:

Constance B Cartwright Trustee
 2444 Wilshire Blvd, Ste 508
 Santa Monica, CA 90403-5808

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3175

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Robert C. Webb* Agent Addressee

B. Received by (Printed Name)
 Robert C. Webb

C. Date of Delivery
 11-23-09

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:

Richard J Forrest Jr
 208 Dickson Lane
 Carlsbad, NM 88220

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2796

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Richard J Forrest Jr* Agent Addressee

B. Received by (Printed Name)
 Richard J Forrest Jr

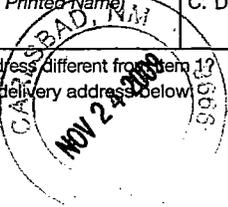
C. Date of Delivery

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:

W J Ball & Carrol Ball Trust
3106 N Montana Ave
Roswell, NM 88201

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2871

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Alice B. Smith

88201 Agent

 Addressee

B. Received by (Printed Name)

Alice Smith

Date of Delivery

NOV 24 2009

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**

- 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:

Blaine Hess
P.O. Box 326
Roswell, NM 88202-0326

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2680

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature]

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

11-24-09

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**

- 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:

McBride Oil & Gas Corporation
P.O. Box 1515
Roswell, NM 88202-1515

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3373

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Jan Starnes

 Agent Addressee

B. Received by (Printed Name)

Jan Starnes

C. Date of Delivery

11-24-09

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

- 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:

Featherstone Development Corp
 P.O. Box 429
 Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) *GINA YERGEN* C. Date of Delivery *11-24-09*

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) **7008 1830 0003 1986 2710**

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:

Free Ride LLC
 P.O. Box 429
 Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) *GINA YERGEN* C. Date of Delivery *11-24-09*

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) **7008 1830 0003 1986 2963**

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:

Dillard Fisher & Dillard Pship
 415 West Wall STE 703
 Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *11-24*

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) **7008 1830 0003 1986 2772**

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:

Robin Fredrick Hill
1836 Shaded Wood
Walnut, CA 971789

2. Article Number
(Transfer from service label)

7008 1830 0003 1986 2543

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

Agent

Addressee

B. Received by (Printed Name)

Moham Fredrick

C. Date of Delivery

11/23/09

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)

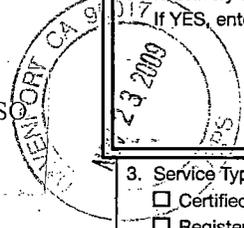
Yes

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:

Anne W Briggs Rancho Del OSO
3610 Pacific Coast Highway
Davenport, CA 95017



2. Article Number
(Transfer from service label)

7008 1140 0004 6108 8840

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

Agent

Addressee

B. Received by (Printed Name)

ANNE W. BRIGGS

C. Date of Delivery

11/23/09

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:

Maurice Mordka
1800 North Grady
Tucson, AZ 85715

2. Article Number
(Transfer from service label)

7008 1830 0003 1986 2918

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

11/23/09

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:

Mary Virginia H Baer
 1101 Arlington Ridge Rd - Unit 402
 Arlington, VA 22202

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 9152

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

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:

William Locke Allison III
 2641 Fines Creek Drive
 Statesville, NC 28625

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

William L. Allison III 11-24-09

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:

Thomas Ausley Allison
 1122 Dogwood Rd
 Statesville, NC 28677-3463

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8963

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

11-24-09

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

5668-3019-100-071-8001

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:

Anne H Deal
7044 50th Ave NE
Seattle, WA 98115

2. Article Number

(Transfer from service label)

7008 1140 8004 6107 9145

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Anne H Deal

- Agent
 Addressee

B. Received by (Printed Name)

ANNE H DEAL

C. Date of Delivery

11/23/04

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:

Dan W Irwin Separate Property
118 N Grant Street
Hinsdale, IL 60521

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3328

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Dan W Irwin

- Agent
 Addressee

B. Received by (Printed Name)

DAN W IRWIN

C. Date of Delivery

11/23/04

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:

Stephanie P. Troth
5714 E Acoma Drive
Scottsdale, AZ 85254

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8604

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Stephanie Troth

- Agent
 Addressee

B. Received by (Printed Name)

STEPHANIE TROTH

C. Date of Delivery

11-23

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:

R D Mellard Estate
 P.O. Box 1506
 Hope, NM 88250

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8956

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *Baylor E Smith*

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:

David R Gannaway
 P.O. Box 2791
 Roswell, NM 88202

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3014

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *Melissa Menally*

B. Received by (Printed Name) C. Date of Delivery
 Melissa Menally 11-24-09

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:

Larry Arnold
 P.O. Box 2253
 Hobbs, NM 88241-2253

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2901

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *Larry Arnold*

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

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:

Hanson Operating Co. Inc.
 P.O. Box 1515
 Roswell, NM 88202

2. Article Number

(Transfer from service label)

7008 1140 0003 1986 3168

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jan Starnes Agent
 Addressee

B. Received by (Printed Name)

Jan Starnes

C. Date of Delivery

11-24-09

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:

Thomas F McKenna Sr Credit
 281 Genenvieve Dr
 Tijeras, NM 87059

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8857

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Thomas McKenna Agent
 Addressee

B. Received by (Printed Name)

THOMAS MCKENNA

C. Date of Delivery

NOV 27 2009

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:

Carol J Christensen
 19026 N 2nd Avenue
 Phoenix, AZ 85027

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3298

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Carol Christensen Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

11/23/09

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 <i>David Willis</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: David G & Jean A Willis 1998 Trust 98 Reservoir Road Atherton, CA 94027	B. Received by (Printed Name) <i>J Willis</i>	C. Date of Delivery <i>11/23/09</i>
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input 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) <i>7008 1140 0004 6108 8826</i>		
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 <i>Galeen Harle</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: Harle Inc. 22230 SW Taylors Dr Tualatin, OR 97062	B. Received by (Printed Name) <i>GALEEN HARLE</i>	C. Date of Delivery <i>11/24/09</i>
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input 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) <i>7008 1830 0003 1986 2741</i>		
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 <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: Harold G Hartsock Living Trust - Harold G. Mary Louise Hartsock Trustees P.O. Box 1449 Sanford, FL 32772-1449	B. Received by (Printed Name)	C. Date of Delivery <i>11-23-09</i>
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input 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) <i>7008 1140 0004 6108 9052</i>		
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:

Sue Hanson McBride
 P.O. Box 1515
 Roswell, NM 88202-1515

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8802

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature: Jan Starne]

- Agent
 Addressee

B. Received by (Printed Name)

[Printed Name: Jan Starne]

C. Date of Delivery

[Date: 11-24-09]

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 or on the front if space permits.

1. Article Addressed to:

Estate of Lonye Marie Williams Deceased
 William T McGee Personal Rep
 1701 River Run Rd. Ste 501 Ft. Worth, TX 76107-6548

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8598

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature: S Moore]

- Agent
 Addressee

B. Received by (Printed Name)

[Printed Name: S Moore]

C. Date of Delivery

[Date: 11-23]

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:

Sun Valley Energy Corporation
 P.O. Box 1000
 Roswell, NM 88202-1000

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 3038

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature: Mrcy James]

- Agent
 Addressee

B. Received by (Printed Name)

[Printed Name: Mrcy James]

C. Date of Delivery

[Date: 11-24-09]

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:

Barbe Development LLC
P.O. Box 2107
Roswell, NM 88202-2107

2. Article Number
(Transfer from service label) **7008 1830 0003 1986 3083**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Debbi Jeffers* Agent Addressee

B. Received by (Printed Name) *Debbi Jeffers* C. Date of Delivery *11/24/09*

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:

Patti Watson Leake
7824 Osuna NE
Albuquerque, NM 87109-3042

2. Article Number
(Transfer from service label) **7008 1140 0004 6107 8988**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Patti Leake* Agent Addressee

B. Received by (Printed Name) *Patrick Leake* C. Date of Delivery *11-21-09*

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:

Marbob Energy Corporation
P.O. Box 227
Artesia, NM 88211

2. Article Number
(Transfer from service label) **7008 1830 0003 1986 3106**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Marissa Villa* Agent Addressee

B. Received by (Printed Name) *Marissa Villa* C. Date of Delivery *11-23-09*

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 mail or on the front if space permits.

1. Article Addressed to:

Minerals Management Service Royalty Mgmt Prgm
 P.O. Box 5810
 Denver, CO 80217-5810

Article Number

(Transfer from service label)

7008 1830 0003 1986 2727

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

MINERALS MANAGEMENT SERVICE
 RECEIVED
 NOV 23 2009
 LAKEWOOD, COLORADO

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:

Helen Joy Smith c/o Adam B. Smith, CPA
 5410 26th Street West
 Bradenton, FL 34207

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 9069

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent
 Addressee
 11-23-09

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:

Babe Development LLC
 P.O. Box 758
 Roswell, NM 88202-0758

2. Article Number

(Transfer from service label)

7008 1830 0005 1986 3342

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent
 Addressee
 11-24-09

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:

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jan Starnes Agent Addressee

B. Received by (Printed Name)

Jan Starnes

C. Date of Delivery

11-24-09

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

7008 1400 0004 6108 8581

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:

Stanford University c/o Bank of America
P.O. Box 840738
Dallas, TX 75284-0738

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] Agent Addressee

B. Received by (Printed Name)

[Signature]

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

7008 1830 0003 1986 3120

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:

Fred A Watson Jr.
5404 Crown Ridge Rd NW
Albuquerque, NM 87114-5790

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] Agent Addressee

B. Received by (Printed Name)

[Signature]

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

7008 1830 0003 1986 2512

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:

Martha Watson Linnell
3950 Copperfield Ridge CT
Winston-Salem, NC 27106

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Martha Watson Linnell Agent
 Addressee

B. Received by (Printed Name) *Martha Watson Linnell* C. Date of Delivery *4/2/04*

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) 7008 1830 0003 1986 2529

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:

W A Landreth Jr.
3207 W 4th Street
Ft Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Cherrie Phillips Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery *11-5-03*

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) 7008 1140 0004 6108 8864

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:

William T Henderson & Dorothy Hend Fam Trust
1906 E Battlefield Rd
Springfield, MO 65804

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Rose Bradley Agent
 Addressee

B. Received by (Printed Name) *Rose Bradley* C. Date of Delivery *11-23-09*

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) 7008 1140 0004 6108 8789

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:

Lantana Oil Company
 P.O. Box 1837
 Roswell, NM 88202-1837

2. Article Number
 (Transfer from service label) **7008 1830 0003 1986 2932**

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) C. Date of Delivery
 B. Received by (Printed Name) C. Date of Delivery
 11-23-09

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:

David Donnelly Trust
 P.O. Box 1150
 Lebanon, MO 65536

2. Article Number
 (Transfer from service label) **7008 1830 0003 1986 3304**

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) C. Date of Delivery
 B. Received by (Printed Name) C. Date of Delivery
 David Donnelly 11/23/09

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:

Permian Hunter Corporation
 275 East South Temple STE 250
 Salt Lake City, UT 84111

2. Article Number
 (Transfer from service label) **7008 1830 0003 1986 3069**

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) C. Date of Delivery
 B. Received by (Printed Name) C. Date of Delivery
 L. WASSICK 11/23/09

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:

John N Eddy Trust - Jean C Eddy &
 Thomas B Catron III Trustees
 645 Camino Rancheros Santa Fe, NM 87505

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) _____ 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) **7008 1140 0004 6107 9138**

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:

Hazel N Collins Family Trust - Texas Bank: Attn Ed Fritz
 2525 Ridgeman Blvd, Ste 100
 Fort Worth, TX 76116

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) _____ 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) **7008 1140 0004 6108 9007**

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:

Patricia Benaugh White Her Separate Property
 806 Lari Dawn
 San Antonio, TX 78258

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) _____ 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) **7008 1140 0004 6108 8642**

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:

McCombs Energy Ltd.
5599 San Felipe, Ste 1200
Houston, TX 77056

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
S McDonald

B. Received by (Printed Name) *S McDonald* C. Date of Delivery *11-23-09*

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) **7008 1140 0004 6108 8901**

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:

McCombs Energy Ltd
5599 San Felipe, Ste 1200
Houston, TX 77056

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
S McDonald

B. Received by (Printed Name) *S McDonald* C. Date of Delivery *11-23-09*

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) **7008 1830 0003 1986 2987**

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:

Gary W Darmon & Lynne Darmon
P.O. Box 10
Capitan, NM 88316

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Lynne Darmon

B. Received by (Printed Name) *Lynne Darmon* C. Date of Delivery *11/23/09*

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) **7008 1830 0003 1986 2789**

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 Eric Thickstun His Separat
 6672 Michael John Drive
 La Jolla, CA 92037

2. Article Number
(Transfer from service label)

7008 1140 0004 6108 8673

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]*

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:

Mary Susan Thickston Her Separate Property
 5690 Arbor Grove CT
 San Diego, CA 92121

2. Article Number
(Transfer from service label)

7008 1140 0004 6108 8666

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]*

B. Received by (Printed Name) C. Date of Delivery
 11/23/09

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:

Wallfam Limited Partnership
 1811 Heritage Blvd, Ste 200
 Midland, TX 79707

2. Article Number
(Transfer from service label)

7008 1830 0003 1986 3151

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]*

B. Received by (Printed Name) C. Date of Delivery
 CIARUVE SCHAEFER 11/23

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:

The THW & ADW Living Trust
1763 Royal Oaks Dr N, #E305
Bradbury, CA 91040-1999

2. Article Number
(Transfer from service label)

7008 1140 0004 6108 8833

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**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:

Barbara C Larimore c/o Minerals Service Agent
P.O. Box 244
St. Jacob, IL 62281-0244

2. Article Number
(Transfer from service label)

7008 1140 0004 6108 9045

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

11-23-09

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:

Joan M Voigt
7 Sherborne Wood
San Antonio, TX 78218

2. Article Number
(Transfer from service label)

7008 1830 0003 1986 3090

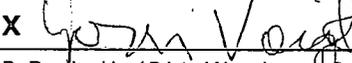
PS Form 3811, February 2004

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

Joan Voigt

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:

Centennial
Post Office Box 1837
Roswell, NM 88202-1837

2. Article Number
(Transfer from service label)

7008 1830 0003 1986 3045

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

11-23-09

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:

Jane Landreth Russell Agency
Lock Box 3480
Omaha, NE 68103-0480

2. Article Number
(Transfer from service label)

7008 1830 0003 1986 3229

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[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:

David F Stout
1645 W Baseline Rd Unit 2146
Mesa, AZ 85202

2. Article Number
(Transfer from service label)

7008 1140 0004 6108 8772

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

11-23-09

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:

J E Cieszinski
 22 Riverside Drive
 Roswell, NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
J. E. Cieszinski

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) 7008 1830 0003 1986 2857

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:

J T Jackson & Associates
 2302 Sierra Vista
 Artesia, NM 88210-9409

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
J. T. Jackson

B. Received by (Printed Name) C. Date of Delivery
J. T. Jackson 11-23-09

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) 7008 1830 0003 1986 2758

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:

Steve W & Stacy D Lewis
 1807 Don Lewis Road
 Artesia, NM 88210-9340

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Nancy Holder

B. Received by (Printed Name) C. Date of Delivery
Nancy Holder 11-23-09

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) 7008 1830 0003 1986 2819

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:

Pitch Energy Corporation
 P.O. Box 227
 Artesia, NM 88211-0227

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3137

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Maria Villa*

Agent

Addressee

B. Received by (Printed Name)

Maria Villa

C. Date of Delivery

11-23-09

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:

Florence B Clark Hall c/o Minerals Service Agent
 P.O. Box 244
 St. Jacob, IL 62281-0244

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 9038

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *F. Schultz*

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

11-23-09

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:

Cannon Exploration Company
 3608 S County Road 1184
 Midland, TX 79706-6468

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3052

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Dorothy Izard*

Agent

Addressee

B. Received by (Printed Name)

Dorothy IZARD

C. Date of Delivery

11/21/09

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:

Todd M Wilson
3608 S County Rd 1184
Midland, TX 79706-6468

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3113

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Dorothy Izard* Agent Addressee

B. Received by (Printed Name)

Dorothy IZARD

C. Date of Delivery

11/21/09

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**

- 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:

Cannon Exploration Company
3608 S County Road 1184
Midland, TX 79706-6468

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 9244

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Dorothy Izard* Agent Addressee

B. Received by (Printed Name)

Dorothy IZARD

C. Date of Delivery

11/21/09

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**

- 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:

Lobos Energy Partners LLC
3817 NW Expressway, Ste 950
OKC, OK 73112

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3380

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *E. Olsen* Agent Addressee

B. Received by (Printed Name)

E. OLSEN

C. Date of Delivery

11/21/09

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

- 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:

Lobos Energy Partners LLC
3817 NW Expressway STE 950
OKC, OK 73112

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee
E. Olsen

B. Received by (Printed Name)
E. OLSEN

C. Date of Delivery
1/21/07

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) **7008 1830 0003 1986 2970**

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:

Scott E Wilson
4601 Mirador Drive
Austin, TX 78735-1554

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee
[Signature]

B. Received by (Printed Name)
T. Stacy

C. Date of Delivery
1/22/07

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) **7008 1140 0004 6107 9176**

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:

Roger T & Holly L Elliot Family Lmted Prtnshp LP
4105 Baybrook Drive
Midland, TX 79707

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee
Holly E. Elliot

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) **7008 1140 0004 6108 8567**

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:

Roger T & Holly L Elliott Family Lmtd Ptshp LP
 4105 Baybrook Drive
 Midland, TX 79707

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3076

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Holly Elliott* 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:

Neco Inc.
 P.O. Box 10847
 Midland, TX 79702

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2925

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Fred Schwering* 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:

Western Oil Producers Inc.
 P.O. Box 2800
 Midland, TX 79702-2800

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2734

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Fred Schwering* 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:

John T Landreth
P.O. Box 180
Engle, CO 81631-0180

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8932

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**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:

Phyliss M Wolfe
P.O. Box 14432
Phoenix, AZ 85063-4432

Article Number

(Transfer from service label)

7008 1140 0004 6108 8994

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**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:

Wright NM Partners Lr
P.O. Box 752
Stanton, TX 79782

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8895

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

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 mail or on the front if space permits.

1. Article Addressed to:

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 9083

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Edith A Shelton Marital Trust - Bill Shelton Trustee
 218 W Glen Eagles Road
 Statesville, NC 28625

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Wm. B. Shelton*

- Agent
- Addressee

B. Received by (Printed Name)

William Shelton

C. Date of Delivery

11/30/09

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:

Steven P. Thompson
 P.O. Box 14596
 Odessa, TX 79768

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2536

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Steve Thompson*

- Agent
- Addressee

B. Received by (Printed Name)

STEVE THOMPSON

C. Date of Delivery

11-30-09

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:

PBR Properties Joint Venture
 P.O. Box 2802
 Midland, TX 79702

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3144

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Jeanine Coley*

- Agent
- Addressee

B. Received by (Printed Name)

Jeanine Coley

C. Date of Delivery

12-1-09

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:

Termac Oil & Gas LLC
P.O. Box 2212
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
X Ted Deatherstone

B. Received by (Printed Name) Yes No
 TERRY FEATHERSTONE

C. Date of Delivery
 11/30/09

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

2009
8201
USPS

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) **7008 1830 0003 1986 3007**

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:

Chi Energy Inc.
P.O. Box 1799
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
X B. Makoa

B. Received by (Printed Name) Yes No
 B. Makoa

C. Date of Delivery
 12/09

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

2. Article Number (Transfer from service label) **7008 1830 0003 1986 2703**

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:

W B Kindelsparger Estate
P.O. Box 1148
Odessa, TX 79760-1148

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
X W B Kindelsparger

B. Received by (Printed Name) Yes No
 W B KINDLESPARGER

C. Date of Delivery
 DEC-9-2009

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

60026-330
ODESSA TX

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) **7008 1140 0004 6108 8925**

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:

Rance C Miles
 P.O. Box 713
 Artesia, NM 88211-0713

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2826

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Rance Miles* Agent
 Addressee

B. Received by (Printed Name)

Diana Miles

C. Date of Delivery

12-4-09

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Beverly Barr* Agent
 Addressee

B. Received by (Printed Name)

Beverly Barr

C. Date of Delivery

12-4-09

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:

Richard K Barr
 P.O. Box 847
 Boerne, TX 78006

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 9169

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Ineta Russell* Agent
 Addressee

B. Received by (Printed Name)

Ineta Russell

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:

James E Guy & Peggy Guy Trustee of the P J Guy
 Trustees of the Family Trust
 604 S 17th Street Artesia, NM 88210

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2765

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:

Kathryn Ann Thickett Leff
3131 Xenophone Street
San Diego, CA 92106-1537

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Kathryn Leff* Agent Addressee

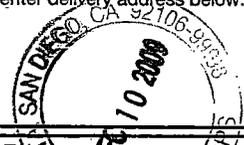
B. Received by (Printed Name)
Kathryn Leff

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



7008 1140 0004 6108 8628

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:

Trust UWO Bettie, William, William Jr Rand &
Allison Guess Trustee
P.O. Box 4325 Rocky Mount, NC 27803

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Valerie Sand* Agent Addressee

B. Received by (Printed Name)
Valerie Sand

C. Date of Delivery
12-10-04

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

7008 1140 0004 6108 8970

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:

Jeanne (Jean) Edna Hunt
P.O. Box 251406
Plano, TX 75025-1406

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *J. P. Hachtel* Agent Addressee

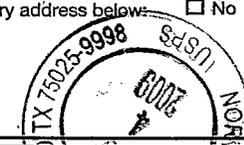
B. Received by (Printed Name)
J. P. Hachtel

C. Date of Delivery
12-9-04

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



7008 1830 0003 1986 3205



EXHIBIT C

HACKBERRY STRAWBERRY LEASE COMMINGLE

HACKBERRY 6 FEDERAL 1

**EDDY
COUNTY**

STRAWBERRY 7 FEDERAL COM 1

FRONTIER CDP



Strawberry 7 Federal #1
 Sec 7, T19S, R31E
 710FNL & 1090FWL
 Eddy, N.M
 API# 30-015-31876

Production System: Open

- 1) Oil sales by tank gauge to tank truck.
- 2) Seal requirements:

A. Production Phase: On all Tanks.

- (1) All valves 5 sealed closed.

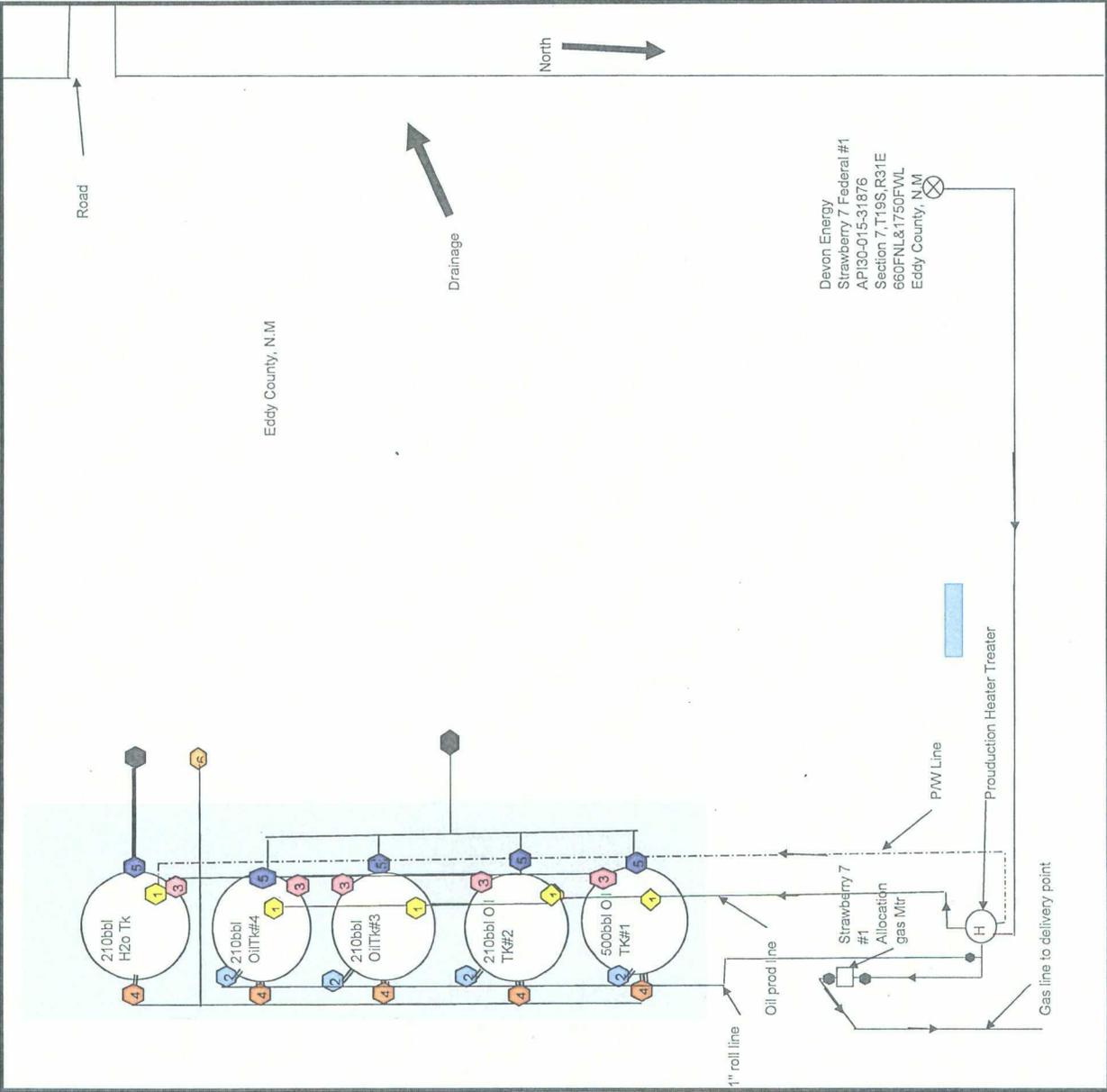
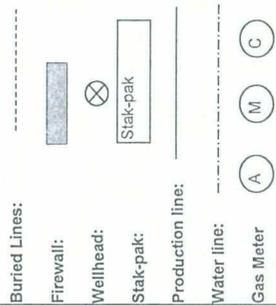
Sales Phase: On Tank being hauled.

- (1) Valve 1 sealed closed.
- (2) Valve 3 sealed closed.
- (3) Valve 4 sealed closed.
- (4) Valve 5 sealed closed.

{5} Misc. Valves: Plugged or otherwise unaccessible.
 NOTE: Valve 2 is either a test or roll line if there is a valve 2 it will be sealed closed.

Ledger for Site Diagram

- Valve #1: Production Line
- Valve #2: Test or Roll line
- Valve #3: Equalizer Line
- Valve #4: Circ./Drain Line
- Valve #5: Sales Line
- Valve #6: BS&W Load Line



Devon Energy
 Strawberry 7, Federal #1
 API30-015-31876
 Section 7, T19S, R31E
 660FNL & 1750FWL
 Eddy County, N.M

Hackberry 6 Federal #1
 Section 6, T19S,R31E
 1980FSL&1980FEL
 Eddy County, N.M
 API# 30-015-31020

Production System: Open

- 1) Oil sales by tank gauge to tank truck.
- 2) Seal requirements:

A. Production Phase: On all Tanks.

- (1) All valves 5 sealed closed.

Sales Phase: On Tank being hauled.

- (1) Valve 1 sealed closed. 
- (2) Valve 3 sealed closed. 
- (3) Valve 4 sealed closed. 
- (4) Valve 5 sealed closed. 

{5} Misc. Valves: Plugged or otherwise inaccessible.

NOTE: Valve 2 is either a test or roll line if there is a valve 2 it will be sealed closed. 

Ledger for Site Diagram

- Valve #1: Production Line 
- Valve #2: Test or Roll Line 
- Valve #3: Equalizer Line 
- Valve #4: Circ./Drain Line 
- Valve #5: Sles Line 
- Valve #6: BS&W Load Line 

Buried Lines: - - - - -

Firewall: 

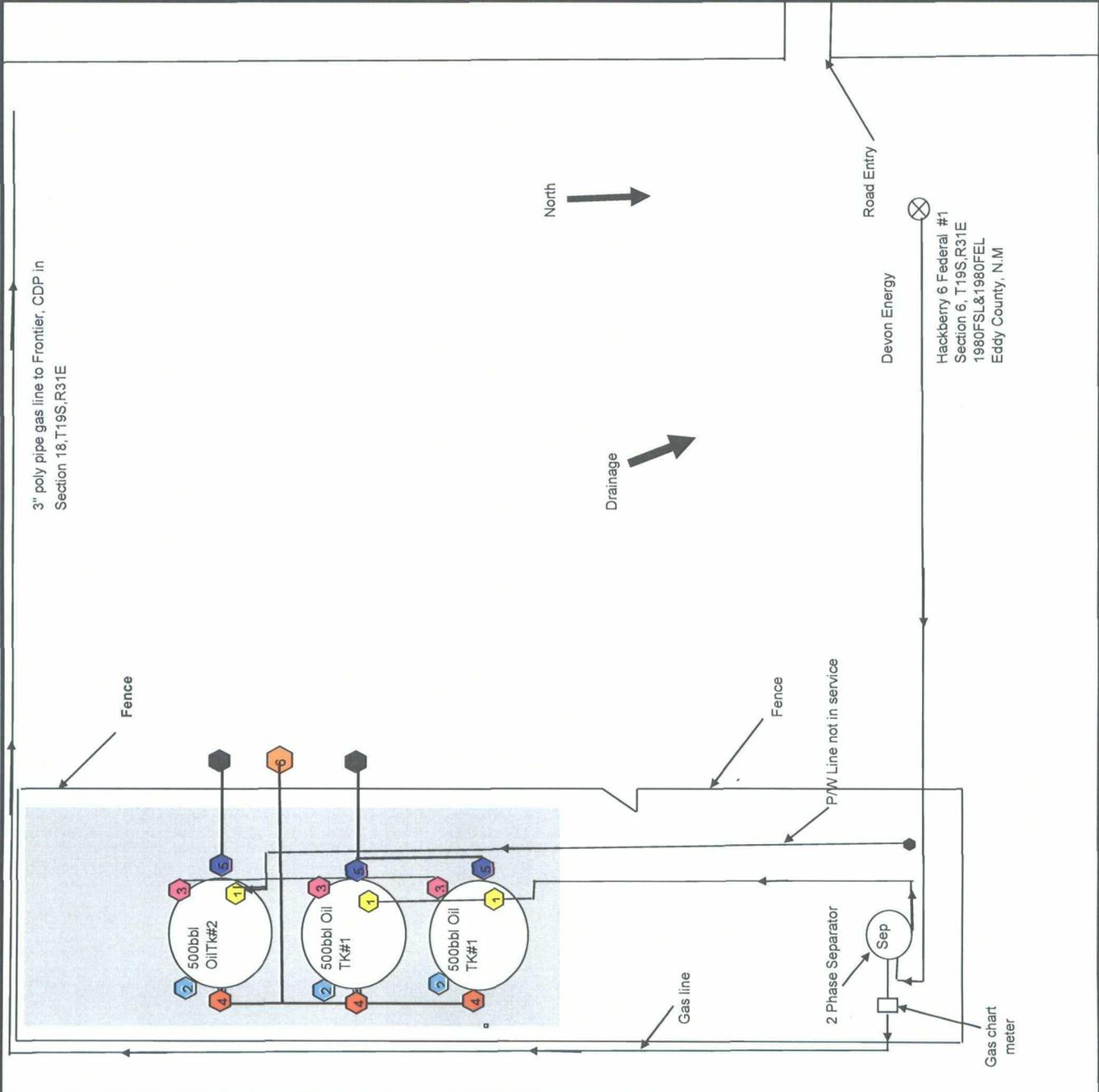
Wellhead: 

Stak-pak: 

Production line: _____

Water line: - - - - -

Gas Meter   



#

Natural Gas
Analysis Report

Run File	C:\STAR\DATA\DEVON13_9;19;37 AM_2-16-09_.RUN	Analysis Date	2/16/09
Method	C:\Star\BTUC6+.mth	Company	DEVON ENERGY
Operator	Precision Gas Meas	Pulled Data	2/13/09 PRESS 46 TEMP 29
Station #	06065001	Water (lbs)	
Lease	HACKBERRY 6-1		
Producer	DEVON ENERGY		

<u>Component</u>	<u>Mole %</u>	<u>BTU</u>	<u>GPM</u>
H2S	0.0020	0.01	0.0000
nitrogen	2.6924	0.00	0.0000
methane	69.8548	707.17	0.0000
propane	7.4048	186.74	2.0404
i-butane	0.9298	30.31	0.3042
n-butane	2.5092	82.04	0.7911
carbon dioxide	0.3468	0.00	0.0000
i-pentane	0.6611	26.51	0.2420
n-pentane	0.7294	29.31	0.2642
ethane	13.5728	240.74	3.6301
hexane+	1.2969	65.85	0.5572
Totals	100.0000	1,368.68	7.8292

Relative Density from Composition	0.8202
BTUs @ 14.65 Saturated	1,351
BTUs @ 14.65 Dry	1,375
Compressibility	0.99543



Laboratory Services, Inc.
 2609 West Marland
 Hobbs, New Mexico 88240
 Telephone: (575) 397-3713

H

FOR: Devon Energy
 P.O. Box 250
 Artesia, New Mexico 88211-0250

SAMPLE: Sta. # 677-33-066
 IDENTIFICATION Strawberry 7 Fed. Com. #1
 COMPANY: Devon Energy
 LEASE:
 PLANT:

SAMPLE DATA: DATE SAMPLED: 11/17/08 12:00 pm
 ANALYSIS DATE: 11/20/08
 PRESSURE - PSIA 68
 SAMPLE TEMP. °F 90
 ATMOS. TEMP. °F

GAS (XX) LIQUID ()
 SAMPLED BY: Jared Pittman/AFM
 ANALYSIS BY: Vickie Sullivan

REMARKS: H2S = 0

COMPONENT ANALYSIS

COMPONENT	MOL PERCENT	GPM
Hydrogen Sulfide (H2S)	0.000	
Nitrogen (N2)	2.606	
Carbon Dioxide (CO2)	0.092	
Methane (C1)	70.382	
Ethane (C2)	13.425	3.582
Propane (C3)	7.658	2.105
I-Butane (IC4)	0.951	0.310
N-Butane (NC4)	2.585	0.813
I-Pentane (IC5)	0.642	0.234
N-Pentane (NC5)	0.663	0.240
Hexane Plus (C6+)	0.996	0.432
	100.000	7.716
BTU/CU.FT. - DRY	1356	MOLECULAR WT. 23.3917
AT 14.650 DRY	1352	
AT 14.650 WET	1328	
AT 14.73 DRY	1359	
AT 14.73 WET	1336	
SPECIFIC GRAVITY -		
CALCULATED	0.806	
MEASURED		

OFF LEASE PRODUCTION - EDDY COUNTY

Well Name	01/01/09		02/01/09		03/01/09		04/01/09		05/01/09		06/01/09		07/01/09		08/01/09		09/01/09	
	Sum Est	Gas																
HACKBERRY 6 FED 1	212		248		91		90		168		173		167		231		242	
STRAWBERRY 7 FED 1	1,131		1,031		1,099		1,282		1,287		1,136		1,158		1,613		1,257	