DATE IN	SUSPENSE	ENGINEER	LOGGED IN	TYPE	APP NO.
2/16/11	3/9/11	DKB	2.16.11	DHC	pKRV1104756620

(4353)

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

Four Star Oil & Gas
LM BARTON #1B

ADMINISTRATIVE APPLICATION CHECKLIST 30-045-30540

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

Four Star Oil & Gas C
LM Barton 1B
30-045-30540

Check One Only for [B] or [C]

[B] Commingling - Storage - Measurement
☒ DHC ☐ CTB ☐ PLC ☐ PC ☐ OLS ☐ OLM

[C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
☐ WFX ☐ PMX ☐ SWD ☐ IPI ☐ EOR ☐ PPR

[D] Other: Specify _____

[2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or ☐ Does Not Apply

[A] ☒ Working, Royalty or Overriding Royalty Interest Owners

[B] ☐ Offset Operators, Leaseholders or Surface Owner

[C] ☐ Application is One Which Requires Published Legal Notice

[D] ☐ Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office

[E] ☐ For all of the above, Proof of Notification or Publication is Attached, and/or,

[F] ☐ Waivers are Attached

[3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

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

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

Anthony Zenos	A.J. Zenos	Regulatory Specialist	18 February 2011
Print or Type Name	Signature	Title	Date

azenos@chevron.com
e-mail Address

PTGW 110475 6620

District I
1625 N. French Drive, Hobbs, NM 88240
District II
1301 W. Grand Avenue, 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

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, New Mexico 87505

RECEIVED OCD
2011 FEB 16 P 12:35

Form C-107A
Revised June 10, 2003

APPLICATION TYPE
__x_ Single Well
____ Establish Pre-Approved Pools
EXISTING WELLBORE
__x__ Yes ____ No

APPLICATION FOR DOWNHOLE COMMINGLING

DHC 4353

Four Star Oil & Gas Company (Attention: Anthony Zenos) PO Box 730 Aztec, NM 87410
Operator Address

LM Barton no. 1B | unit D, Sec 12, T30N, R12W | San Juan County, NM
Lease | Well No. | Unit Letter-Section-Township-Range | County

OGRID No. 131994 Property Code 27419 API No. 3004530540 Lease Type: ____Federal ____State __X_Fee

DATA ELEMENT	UPPER ZONE	INTERMEDIATE ZONE	LOWER ZONE
Pool Name	Basin Fruitland Coal		Blanco Mesaverde
Pool Code	71629		72319
Top and Bottom of Pay Section (Perforated or Open-Hole Interval)	Proposed (1994-2014)		Existing (4038-4578)
Method of Production (Flowing or Artificial Lift)	Artificial Lift (Rod Pump)		Artificial Lift (Rod Pump)
Bottomhole Pressure (Note: Pressure data will not be required if the bottom perforation in the lower zone is within 150% of the depth of the top perforation in the upper zone)	379# SEE ATTACHED EXPLANATION		220#
Oil Gravity or Gas BTU (Degree API or Gas BTU)	1160 BTU (Ideal) – from closest well Gilbreath 1 (see attached)		1289.8 BTU (ideal) 1267.4 (Saturated)
Producing, Shut-In or New Zone	New zone		Producing
Date and Oil/Gas/Water Rates of Last Production. (Note: For new zones with no production history, applicant shall be required to attach production estimates and supporting data.)	Date: N/A Rates: See attached rates	Date: Rates:	Date: 12/30/10 Rates: 100 mcfd .2 BWPD .15 BOPD
Fixed Allocation Percentage (Note: If allocation is based upon something other than current or past production, supporting data or explanation will be required.)	Oil 0 % Gas 28 % See attached Allocations	Oil % Gas %	Oil 100 % Gas 72 %

ADDITIONAL DATA

Are all working, royalty and overriding royalty interests identical in all commingled zones? Yes_____ No__x___
If not, have all working, royalty and overriding royalty interest owners been notified by certified mail? Yes___x____ No_____

Are all produced fluids from all commingled zones compatible with each other? Yes___x___ No_____

Will commingling decrease the value of production? Yes_____ No___x___

If this well is on, or communitized with, state or federal lands, has either the Commissioner of Public Lands or the United States Bureau of Land Management been notified in writing of this application? Yes__x___ No_____

NMOCD Reference Case No. applicable to this well: also see DHC 4496/4497

Attachments:
C-102 for each zone to be commingled showing its spacing unit and acreage dedication.
Production curve for each zone for at least one year. (If not available, attach explanation.)
For zones with no production history, estimated production rates and supporting data.
Data to support allocation method or formula.
Notification list of working, royalty and overriding royalty interests for uncommon interest cases.
Any additional statements, data or documents required to support commingling.

PRE-APPROVED POOLS

If application is to establish Pre-Approved Pools, the following additional information will be required:

List of other orders approving downhole commingling within the proposed Pre-Approved Pools
List of all operators within the proposed Pre-Approved Pools
Proof that all operators within the proposed Pre-Approved Pools were provided notice of this application.
Bottomhole pressure data.

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

SIGNATURE Anty Zenos TITLE Regulatory Specialist DATE 14 February 2011
TYPE OR PRINT NAME Anthony Zenos TELEPHONE NO. (505) 333-1919
E-MAIL ADDRESS azenos@chevron.com

LM Barton 1B

Expected Production Explanation:
Looking at several recent Fruitland Coal (FC) offset producers, determined an expected original FC production rate around 50 mcfd with an average dewatering stage of 2-1/2 years at a 7% /mo increase in gas. Afterwards, based on older FC offset production, an expected decline in gas rate of 20% a year was used.

Allocation Explanation:
Four Star Oil & Gas proposes to use an allocation calculated through the 'subtraction' method. Baseline production of the Mesaverde (MV) and decline will be established from existing production. The incremental production from the FC will be used to determine an appropriate allocation factor for the new zone. Please see the attached plot of the existing MV production.

Bottom Hole Pressure Explanation:
Currently, the LM Barton 1B is producing from the Point Lookout and Menefee portions of the Mesaverde with a bottom hole pressure of 220#. After completing in the Fruitland Coal, initial bottom hole pressure of 379#, based on a recent nearby offset FC producer, is expected. It should be noted, that the LM Barton 1B is on compression with expected suction pressure to be ~30# and will be on rod pump. This will allow the produced fluids to be pumped off and the gas to travel up through the casing-tubing annulus. Four Star Oil & Gas does not expect any crossflow between the two zones as the compressor will be the low pressure in which for the gas to flow up the casing/tubing annulus and the fluid to be pumped off.

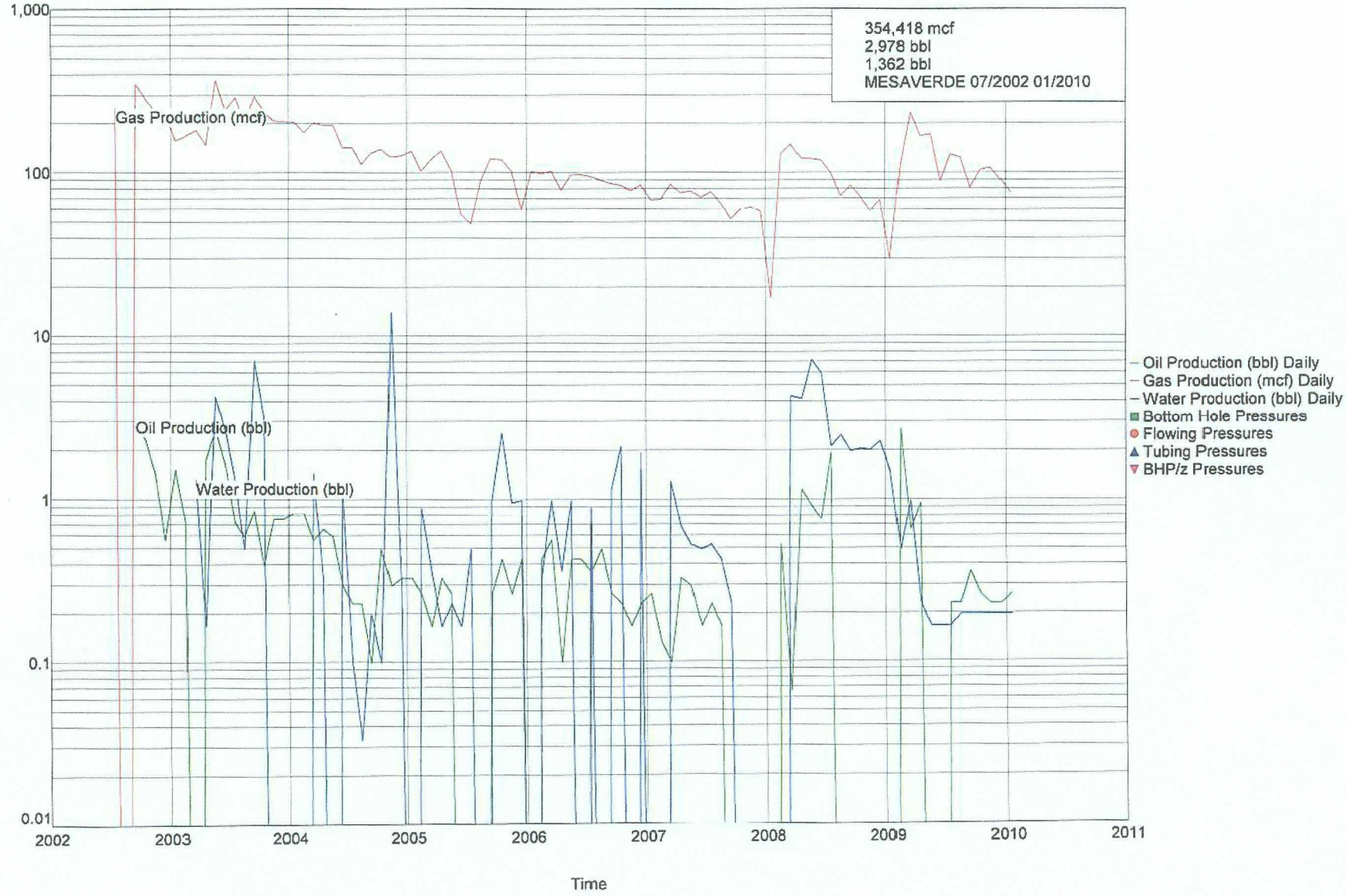
Allocations (Fruitland/Mesaverde) Estimated Fruitland Coal Production Rates

**Based on offset recent FC completions.									
LM Barton 1B					MV Production				
Month	Gas (mcfd)	Oil (BOPD)	Water (BWPD)		Gas (mcfd)	Oil (BOPD)	Water (BWPD)		FC% Allocation
1	50.0	0	25		126.0	0	0		0.28
2	53.5	0	23		123.4	0	0		0.30
3	57.2	0	20		120.8	0	0		0.32
4	61.3	0	18		118.3	0	0		0.34
5	65.5	0	16		115.8	0	0		0.36
6	70.1	0	15		113.4	0	0		0.38
7	75.0	0	13		111.1	0	0		0.40
8	80.3	0	12		108.8	0	0		0.42
9	85.9	0	11		106.5	0	0		0.45
10	91.9	0	10		104.3	0	0		0.47
11	98.4	0	9		102.1	0	0		0.49
12	105.2	0	8		100.0	0	0		0.51
13	112.6	0	7		97.9	0	0		0.53
14	120.5	0	6		95.9	0	0		0.56
15	128.9	0	6		93.9	0	0		0.58
16	138.0	0	5		91.9	0	0		0.60
17	147.6	0	5		90.0	0	0		0.62
18	157.9	0	4		88.1	0	0		0.64
19	169.0	0	4		86.3	0	0		0.66
20	180.8	0	3		84.5	0	0		0.68
21	193.5	0	3		82.8	0	0		0.70
22	207.0	0	3		81.0	0	0		0.72
23	221.5	0	2		79.3	0	0		0.74
24	237.0	0	2		77.7	0	0		0.75
25	253.6	0	2		76.1	0	0		0.77
26	271.4	0	2		74.5	0	0		0.78
27	290.4	0	2		73.0	0	0		0.80
28	310.7	0	1		71.4	0	0		0.81
29	332.4	0	1		69.9	0	0		0.83
30	355.7	0	1		68.5	0	0		0.84
31	349.8	0	1		67.3	0	0		0.84
32	343.9	0	1		66.2	0	0		0.84
33	338.2	0	1		65.1	0	0		0.84
34	332.5	0	1		64.0	0	0		0.84
35	327.0	0	1		63.0	0	0		0.84
36	321.5	0	1		61.9	0	0		0.84
37	316.2	0	1		60.9	0	0		0.84
38	310.9	0	1		59.9	0	0		0.84
39	305.7	0	0		58.9	0	0		0.84
40	300.6	0	0		57.9	0	0		0.84
41	295.6	0	0		56.9	0	0		0.84
42	290.6	0	0		56.0	0	0		0.84
43	285.8	0	0		55.0	0	0		0.84
44	281.0	0	0		54.1	0	0		0.84
45	276.3	0	0		53.2	0	0		0.84
46	271.7	0	0		52.3	0	0		0.84
47	267.2	0	0		51.4	0	0		0.84
48	262.7	0	0		50.6	0	0		0.84

LM Barton 1B Mesaverde Production

Lease Name: LM BARTON
County, State: SAN JUAN, NM
Operator: FOUR STAR OIL & GAS COMPANY
Field: BLANCO
Reservoir: MESAVERDE
Location: 12 30N 12W E2 NW NW

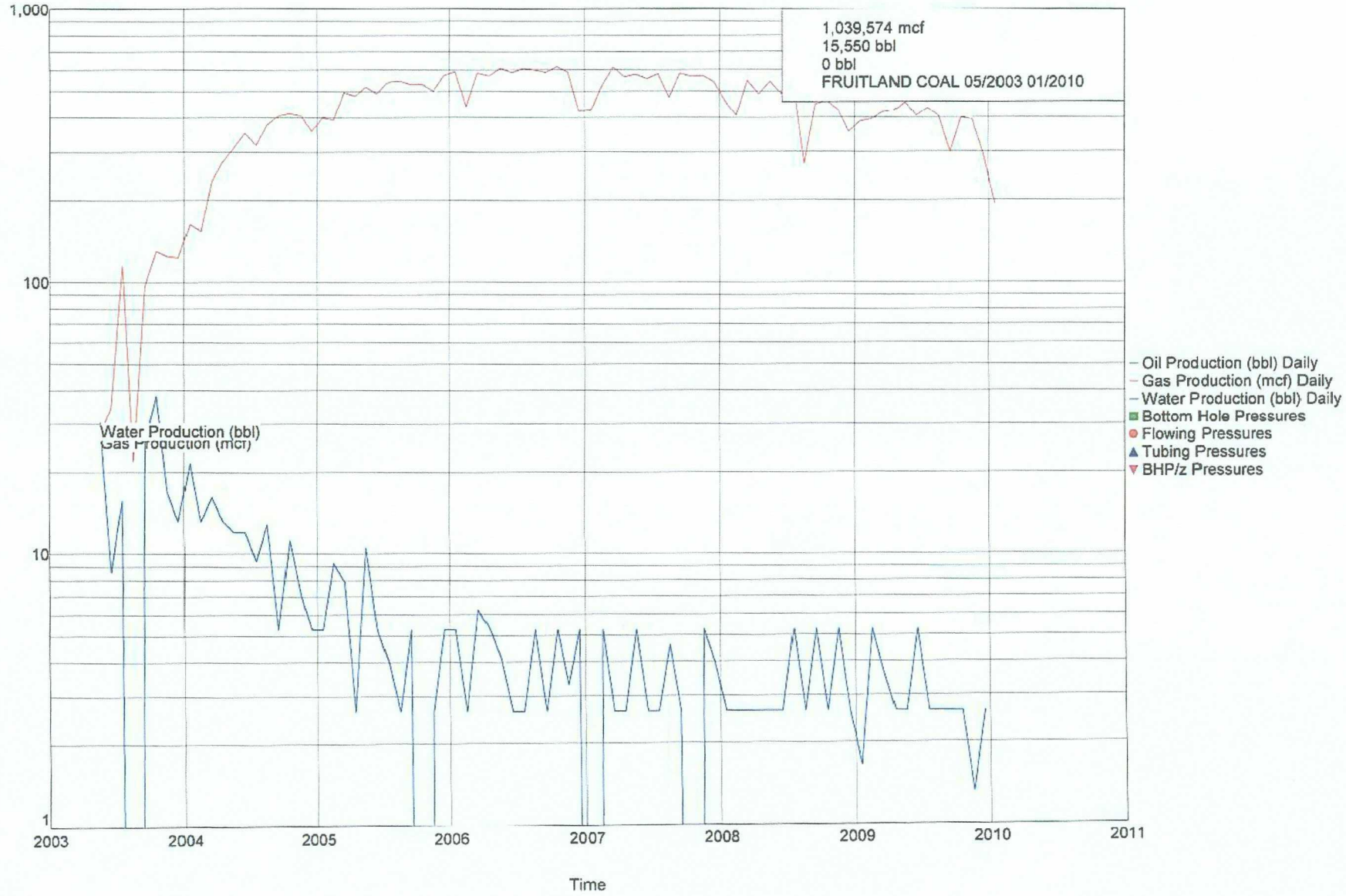
LM BARTON - 1B - BLANCO 30045305400000 12 30N 12W E2 NW NW



Lease Name: LITTLE STINKER
County, State: SAN JUAN, NM
Operator: XTO ENERGY INCORPORATED
Field: BASIN
Reservoir: FRUITLAND COAL
Location: 11 30N 12W SE NW NE

NEARBY FRUITLAND COAL PRODUCER

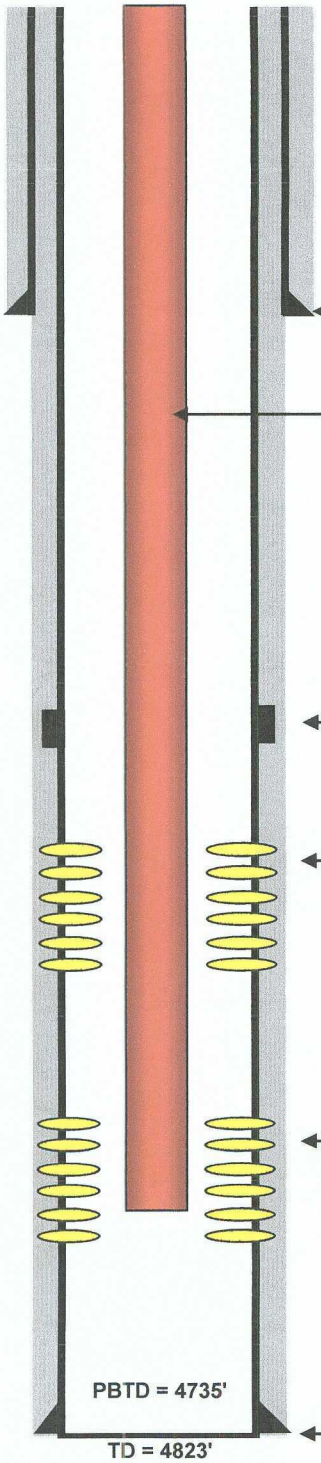
LITTLE STINKER - 2 - BASIN 30045315700000 11 30N 12W SE NW NE



L.M. Barton #1B

San Juan County, New Mexico

CURRENT Well Schematic as of 02-14-2008



API:	30-045-30540
Legals:	Sec 12 - T 30N - R 12W
	660' FNL & 960' FWL
Field:	Blanco Mesaverde
KB	13'
KB Elev	5683'
GR Elev	5670'

Geologic Tops:	
Ojo Alamo	451'
Kirtland	610'
Fruitland	1470'
Pictured Cliffs	2029'
Menefee	3778'
PLO	4368'

Comp date	7/11/2002
Status:	Flowing 86 mcfd

Surface Casing:
8-5/8", 24#, K-55, set @ 352'
Cmt'd. with 260 sks G - circ cement to pit

Tubing Details:
2-3/8", 4.7#, J-55 set at 4570.5

DV Tool @ 3325'

Added January 2008
Perforation Details:
Menefee (MV) 4038'-4040', 4090'-4092', 4096'-4114', 4157'-4162' (27')
54 holes, 2 SPF

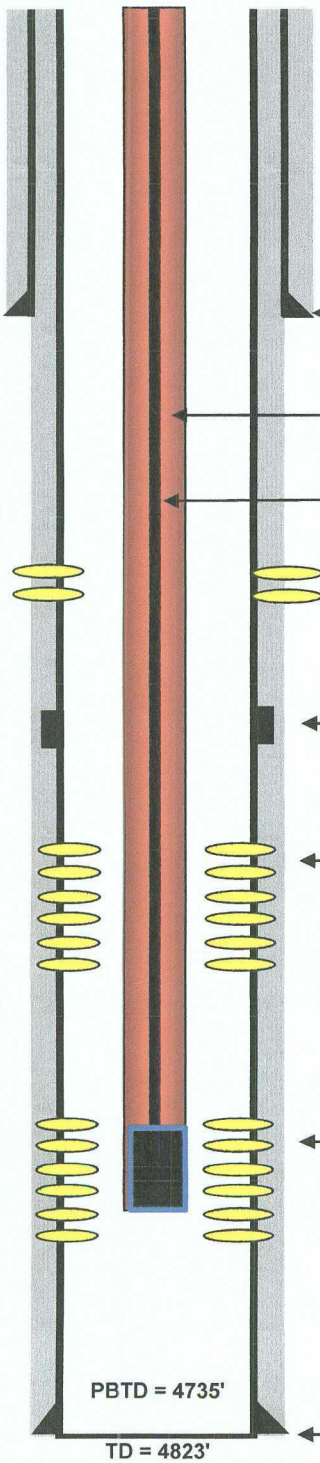
Frac:
Jan-08 101,225 lbs of 20/40 sand
64,236 gals of fluid

Perforation Details:
Point Lookout (MV) 4574-78', 4556-70'; 4546-50'; 4407-46'; 4370-4400' (91')
182 holes, 2 SPF
Frac w/ 2000 gals 15% HCL 133 Mgal slickwtr, 130 Mlbs 16/30 sand

Production Casing:
4-1/2", 11.6#, J-55 Csg set @ 4822'
Cmt'd Stage #1 w/ 237 sxs circ cement to pit
Cmt'd Stage #2 w/ 592 sxs circ cement to pit

L.M. Barton #1B

San Juan County, New Mexico
PROPOSED Well Schematic



API:	30-045-30540
Legals:	Sec 12 - T 30N - R 12W
	660' FNL & 960' FWL
Field:	Blanco Mesaverde
KB	13'
KB Elev	5683'
GR Elev	5670'

Geologic Tops:	
Ojo Alamo	451'
Kirtland	610'
Fruitland	1470'
Pictured Cliffs	2029'
Menefee	3778'
PLO	4368'

Comp date 7/11/2002
Status:

Surface Casing:
8-5/8", 24#, K-55, set @ 352'
Cmt'd. with 260 sks - circ cement

Tubing Details:
2 3/8" 4.7# J-55 set @4570.5'

Proposed artificial lift equipment (rods & pump)

PROPOSED Perforation Details:
FRUITLAND COAL - (1994-2014)

DV Tool @ 3325'

Added January 2008
Perforation Details:
Menefee (MV) 4038'-4040', 4090'-4092', 4096'-4114', 4157'-4162' (27')
54 holes total, 2 SPF

Perforation Details:
Point Lookout (MV) 4574-78', 4556-70'; 4546-50'; 4407-46'; 4370-4400' (91')
182 holes total, 2 SPF

Production Casing:
4-1/2", 11.6#, J-55 Csg set @ 4822' in 7-7/8" Hole
Cmt'd Stage #1 w/ 237 sxs circ cement to pit
Cmt'd Stage #2 w/ 592 sxs circ cement to pit

Note on Spacing Units for Four Star Oil & Gas Company
LM Barton 1B proposed downhole comingle
API 30-045-30540

Enclosed with this permit application is one C-102 form dated January 2001. It shows a stamped, certified plat of the surface location of this well and illustrates the Blanco Mesaverde spacing unit. I have written in "Fruitland Coal" in box 3 of the form because **the Fruitland Coal spacing unit in this location is identical to the Mesaverde spacing unit**. On telephone conversations with both NMOCD Aztec District Office and NMOCD Santa Fe, I was instructed to write this in by hand and sign my name adjacent to this entry.

Anthony Zenos
Regulatory Specialist
Four Star Oil & Gas Company
Aztec, NM

District I
PO Box 1980, Hobbs, NM 88241-1980

District II
PO Drawer DD, Artesia, NM 88211-0719

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

[1] API Number	[2] Pool Code	[3] Pool Name	
30-045-30540	72319	BLANCO MESAVERDE / Fruitland Coal	Aztec Ext

[4] Property Code	[5] Property Name	[6] Well Number
27419	L.M. BARTON	1B

[7] OGRID No.	[8] Operator Name	[9] Elevation
131994	FOUR STAR OIL & GAS COMPANY	5670'

[10] Surface Location

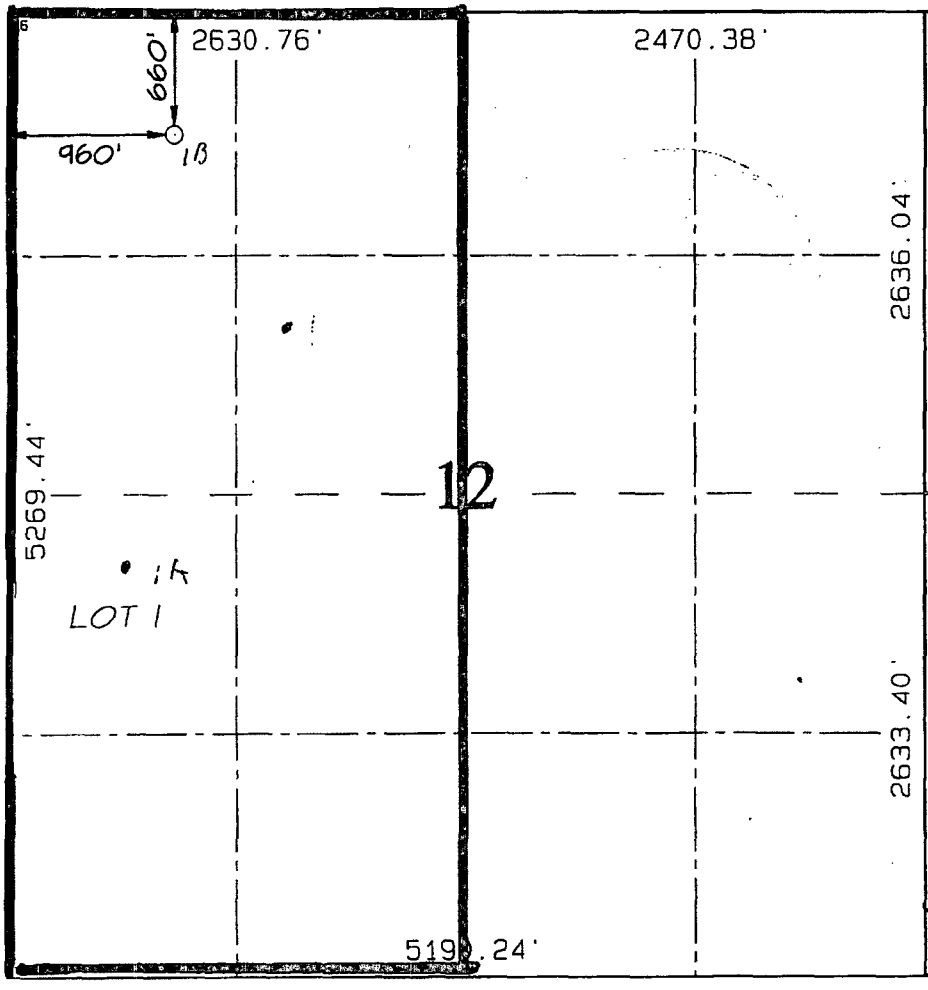
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	12	30N	12W		660	NORTH	960	WEST	SAN JUAN

[11] Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

[12] Dedicated Acres	[13] Joint or Infill	[14] Consolidation Code	[15] Order No.
319.45 W/2	I		

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



[17] OPERATOR CERTIFICATION

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

Arthur D. Archibeque
Signature

Arthur D. Archibeque
Printed Name

Engineer Assistant
Title

01/03/01
Date

[18] SURVEYOR CERTIFICATION

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

DECEMBER 26, 2000
Date of Survey

Signature and Seal of Professional Surveyor

NEALE C. EDWARDS
NEW MEXICO
6857
REGISTERED PROFESSIONAL SURVEYOR

Certificate No. 6857

Royalty Ownership Notification List: Four Star Oil & Gas Company LM Barton 1 B proposed DHC February 2011

OWNER NAME	OWNER NAME2	OWNER NAME3	ADDRESS LINE1	CITY	STATE	ZIP
SHRINERS HOSPITAL FOR CHILDREN	C/O THE NORTHERN TRUST BANK OF	TEXAS	PO BOX 226270	DALLAS	TX	752226270
LAURENCE B KELLY LIVING TRUST	DTD 5/24/96, LAURENCE B KELLY	TRUSTEE	839 SUMMIT RD	SANTA BARBARA	CA	931082321
DOUGLAS E MILLER 1999 TRUST	DOUGLAS E MILLER TTEE		2040 WATERFALL COURT	MODESTO	CA	953550000
CLARK SPENCER ESTATE	WATSON SPENCER ADMINISTR		PO BOX 361	FARMINGTON	NM	874990361
NANCY O. MABE TRUST	NANCY O. MABE, TRUSTEE		PO BOX 229	LIBERTY	MO	640690229
SALLY RODGERS			152 B ARROYO HONDO ROAD	SANTA FE	NM	875080000
MAX W. COLL, II			83 LA BARBERIA TRL	SANTA FE	NM	875059008
MARK J. WESTERVELT			P O BOX 685	CAMP VERDE	AZ	863220000
MARY S. ENRIGHT			2129 CAMPO ALEGRE	TEMPE	AZ	852810000
JANE W HERION			2126 E 30TH	SPOKANE	WA	992030000
ANN L SHERIDAN			447 E LILAC	TEMPE	AZ	852810000
NANCY HARTMAN			1002 TRAMWAY LANE N E	ALBUQUERQUE	NM	871220000
SAN JUAN COUNTY CT HOUSE			100 S OLIVER DR	AZTEC	NM	874100000
XTO ENERGY INC.			810 HOUSTON	DALLAS	TX	751020000
WELDON C JULANDER TRUST	ILA MAE WELDON AND	JOHN JULANDER TRUS	PO BOX 2773	LITTLETON	CO	801612773
NORMAN REID MILLER			1441 BRETT PLACE #130	SAN PEDRO	CA	907325007
SCOTT G ROGERS			210 SCENIC DR	ASHLAND	OR	975202622
ROSE M BLOUNT TRUST	MADONNA LEE, TRUSTEE		284 CYPRESS TRAIL DR	GRAND RAPIDS	MI	495460000
D J ELKINS			PO BOX 1326	AZTEC	NM	874101326
FREDERIC OWEN HAWKINS			205 AUSTIN AVE	ATHERTON	CA	940274005
F HAYNES LINDLEY JR LVNG TRUST	DTD 3/14/89 FRANCIS HAYNES	LINDLEY JR TRUSTEE	123 BUENA VISTA AVENUE	CORTE MADERA	CA	949250000
LAURENCE CORBETT KELLY TRUST	STEVE COLDWELL, SUCC TRUSTEE	COLDWELL, SCLEFANI	3239 N VERDUGO RD	GLENDALE	CA	912081633
GREGORY LOUIS KELLY			3526 BAYBERRY LN	MALIBU	CA	902654707
JOHN C STERGE			PO BOX 550	CENTERVILLE	MA	26320550
CYNTHIA CALVIN			747 NEWPORT STREET	DENVER	CO	802205507
EDWARD M CALVIN			2380 FOREST ST	DENVER	CO	802070000
MINERALS MANAGEMENT SERVICE	ROYALTY MANAGEMENT PROGRAM		PO BOX 581	DENVER	CO	80217-0000
NORTHWEST PRODUCTION CORPORATION			520 SIMMS BUILDING	ALBUQUERQUE	NM	87122
LAURENCE BEVER KELLY			839 SUMMIT RD	MONTECITO	CA	93108
LT. COL ROBERT LORENZO KELLY			1 WILSHIRE BLVD, #2000	LOS ANGELES	CA	90017
ROBERT DUNCAN MILLER AND RUTH V. MILLER, CO-TRUSTEES OF THE MILLER FAMILY TRUST DATED MAY 3, 1			40557 VISTA MURRIETA	MURRIETA	CA	92562
FRANCES R WITT			505 S PURECO	GALLUP	NM	87501
JAMES A BENDER AND CANDY BENDER, AS JOINT TENANTS			31 ROAD 5467	FARMINGTON	NM	87401
DANTE J VESCOVI AND SHEILA J VESCOVI, AS JOINT TENANTS			920 MOUNTAIN VIEW DR	AZTEC	NM	87410
BURLINGTON RESOURCES OIL & GAS COMPANY			PO BOX 7500	BARTLESVILLE	OK	74005

NDER: 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.

Article Addressed to:

WELDON C JULANDER TRUST
A MAE WELDON & JOHN JULIANDER
TRUSTEES
PO BOX 2773
LITTLETON, CO 80161-2773

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

CENTENNIAL BRANCH
JAN 25 2011
USPS

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete 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 G ROGERS
210 SCENIC DR
ASHLAND, OR 97520-2622

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.

NDER: 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.

Article Addressed to:

BERT DUNCAN MILLER AND RUTH
V. MILLER,
CO-TRUSTEES OF THE MILLER
AMILY TRUST DATED MAY 3, 1999
40557 VISTA MURRIETA
MURRIETA, CA 92562

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

Article Number (Transfer from service label) 7009 2250 0001 1285 4390

Form 3811, August 2001 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:

COMPLETE THIS SECTION ON DELIVERY

A. Signature — ☐ Agent ☐ Addressee

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

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

FEB 1 2011

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

NDER: 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.

Article Addressed to:

GREGORY LOUIS KELLY
3526 BAYBERRY LN
MAILBU, CA 90265-4707

COMPLETE THIS SECTION ON DELIVERY

A. Signature — X — ☒ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery 2/22/11

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

Article Number (Transfer from service label) 7010 1870 0001 2476 7098

Form 3811, August 2001 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:

MAX W. COLL, II
83 LA BARBERIA TRL
SANTA FE, NM 87505-9008

COMPLETE THIS SECTION ON DELIVERY

A. Signature — ☐ Agent ☐ Addressee

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

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

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

NDER: 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.

Article Addressed to:

JANE W HERION
2126 E 30TH
SPOKANE, WA 99203

COMPLETE THIS SECTION ON DELIVERY

A. Signature — X Jane W. Herion — ☐ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery 1/31

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

NDER: 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.

Article Addressed to:

LAURENCE BEVER KELLY
839 SUMMIT RD
MONTECITO, CA 93108

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Laurence Kelly ☐ 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

Article Number
(Transfer from service label) 7010 1870 0001 2476 7159

Form 3811, August 2001 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:

LAURENCE CORBETT KELLY TRUST
STEVE COLDWELL, SUCC TRUSTEE
COLDWELL, SCLEFANI & COMPANY
3239 N VERDUGO RD
GLENDALE, CA 91208-1633

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X J. Coldwell ☐ Agent ☐ Addressee

B. Received by (Printed Name) J. Coldwell C. Date of Delivery 1/24/11

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.

NDER: 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.

Article Addressed to:

AURENCE B KELLY LIVING TRUST
DTD 5/24/96, LAURENCE B KELLY
TRUSTEE
839 SUMMIT RD
SANTA BARBARA, CA 93108-2321

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Laurence Kelly ☐ 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

Article Number
(Tran

For

02595-02-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:

CYNTHIA CALVIN
747 NEWPORT STREET
DENVER, CO 80220-5507

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.

NDER: 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.

Article Addressed to:

FREDERIC OWEN HAWKINS
205 AUSTIN AVE
ATHERTON, CA 94027-4005

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X HAWKINS ☐ Agent ☐ Addressee

B. Received (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

Article Number
(Transfer from service label) 7009 2250 0001 1285 4635

Form 3811, August 2001 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:

MARY S. ENRIGHT
2129 CAMPO ALEGRE
TEMPE, AZ 85281

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
ENRIGHT, Mary S 1/28

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.

NDER: 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.

Article Addressed to:

EDWARD M CALVIN
2380 FOREST ST
DENVER, CO 80207

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Edward M. Calvin ☐ 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

JAN 21 2011 80207 USPS

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number (Transfer from service label) 7010 1870 0001 2476 7128

Form 3811, August 2001 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:

F HAYNES LINDLEY JR LVNG TRUST
DTD 3/14/89 FRANCIS HAYNES
LINDLEY JR. TRUSTEE
123 BUENA VISTA AVENUE
CORTE MADERA, CA 94925

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
Hans Lindley 1.27.11

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.

NDER: 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.

Article Addressed to:

MINERALS MANAGEMENT SERVICE
ROYALTY MANAGEMENT PROGRAM
PO BOX 581
DENVER, CO 80217

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Beau C. Conkel ☐ Agent
Agent for MMS ☐ Addressee

B. Received by (Printed Name) Date C. Date of Delivery
1-28-11

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

Article Number (Transfer from service label) 7010 1870 0001 2476 7111

Form 3811, August 2001 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:

LT. COL ROBERT LORENZO KELLY
1 WILSHIRE BLVD, #2000
LOS ANGELES, CA 90017

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
1-25-11

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.

NDER: 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.

Article Addressed to:

MARK J. WESTERVELT
P O BOX 685
CAMP VERDE, AZ 86322

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
MARK WESTERVELT 1-25-11

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

USPS

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number (Transfer from service label) 7009 2250 0001 1285 4512

Form 3811, August 2001 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:

NANCY O. MABE TRUST
NANCY O. MABE, TRUSTEE
PO BOX 229
LIBERTY, MO 64069-0229

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X James Mabe ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
JAMES MABE 1/24/11

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.

NDER: 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.

Article Addressed to:

NANCY HARTMAN
1002 TRAMWAY LANE N E
ALBUQUERQUE, NM 87122

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

Article Number (Transfer from service label) 7009 2250 0001 1285 4550

Form 3811, August 2001 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:

DOUGLAS E MILLER 1999 TRUST
DOUGLAS E MILLER TTEE
2040 WATERFALL COURT
MODESTO, CA 95355

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
[illegible] 1-22-11

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.

NDER: 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.

Article Addressed to:

JAMES A BENDER AND CANDY BENDER, AS JOINT TENANTS
31 ROAD 5467
FARMINGTON, NM 87401

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
JAMES BENDER 1-24-11

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

JAN 24 2011 FARMINGTON NM 87401

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number (Transfer from service label) 7009 2250 0001 1285 4413

Form 3811, August 2001 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:

DOUGLAS E MILLER 1999 TRUST
DOUGLAS E MILLER TTEE
2040 WATERFALL COURT
MODESTO, CA 95355

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
[illegible] 1-24-11

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.

NDER: 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.

Article Addressed to:

JOHN C STERGE
PO BOX 550
CENTERVILLE, MA 02632-0550

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
John Sterge 1-24-11

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

Article Number (Transfer from service label) 7010 1870 0001 2476 7081

Form 3811, August 2001 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:

ANN L SHERIDAN
447 E LILAC
TEMPE, AZ 82581

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
Ann L. Sheridan 1/27/11

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.

ENDER: 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.

Article Addressed to:

NORMAN REID MILLER
1441 BRETT PLACE #130
SAN PEDRO, CA 90732-5007

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
Norman R. Miller 1/24/11

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.

NDER: 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.

Article Addressed to:

'RLINGTON RESOURCES OIL & GAS COMPANY
PO BOX 7500
BARTLESVILLE, OK 74005

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

Article Number (Transfer from service label) 7009 2250 0001 1285 4437

Form 3811, August 2001 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:

D J ELKINS
PO BOX 1326
AZTEC, NM 87410-1326

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Gwen Elkins ☐ Agent ☐ Addressee

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

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.

NDER: 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.

Article Addressed to:

RINERS HOSPITAL FOR CHILDREN
) THE NORTHERN TRUST BANK OF TEXAS
PO BOX 226270
DALLAS , TX 75222-6270

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X R. Ballard ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
JAN 21 2011

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

Article Number (Transfer from service label) 7009 2250 0001 1285 4444

Form 3811, August 2001 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:

DANTE J VESCOVI AND SHEILA J VESCOVI, AS JOINT TENANTS
920 MOUNTAIN VIEW DR
AZTEC, NM 87410

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.

NDER: 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.

Article Addressed to:

ROSE M BLOUNT TRUST
MADONNA LEE, TRUSTEE
284 CYPRESS TRAIL DR
GRAND RAPIDS, MI 49546

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
HENRY Mountshiel 1-21

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

Article Number (Transfer from service label) 7009 2250 0001 1285 4598

Form 3811, August 2001 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:

SAN JUAN COUNTY CT HOUSE
100 S OLIVER DR
AZTEC, NM 87410

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sandi L. White ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
Sandi L. White 1-21-11

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.