

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240
Phone (575) 593-6161 Fax: (575) 593-0720

DISTRICT II
811 S. First St., Artesia, NM 88210
Phone (575) 748-1283 Fax: (575) 748-9720

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone (505) 334-6178 Fax: (505) 334-6170

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone (505) 476-3333 Fax: (505) 476-3482

State of New Mexico
Energy, Minerals and Natural Resources Department

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

Form C-102
Revised August 1, 2011

Submit one copy to appropriate
District Office

WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

API Number 30-025-	Pool Code 27810	Pool Name GLADIOLA;SAN ANDRES
Property Code	Property Name SARAH	Well Number 1H
OGRID No. 138008	Operator Name SPECIAL ENERGY CORPORATION	Elevation 3843'

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	SOUTH/South line	Feet from the	East/West line	County
A	32	12 S	38 E		480	NORTH	1120	EAST	LEA

Bottom Hole Location If Different From Surface

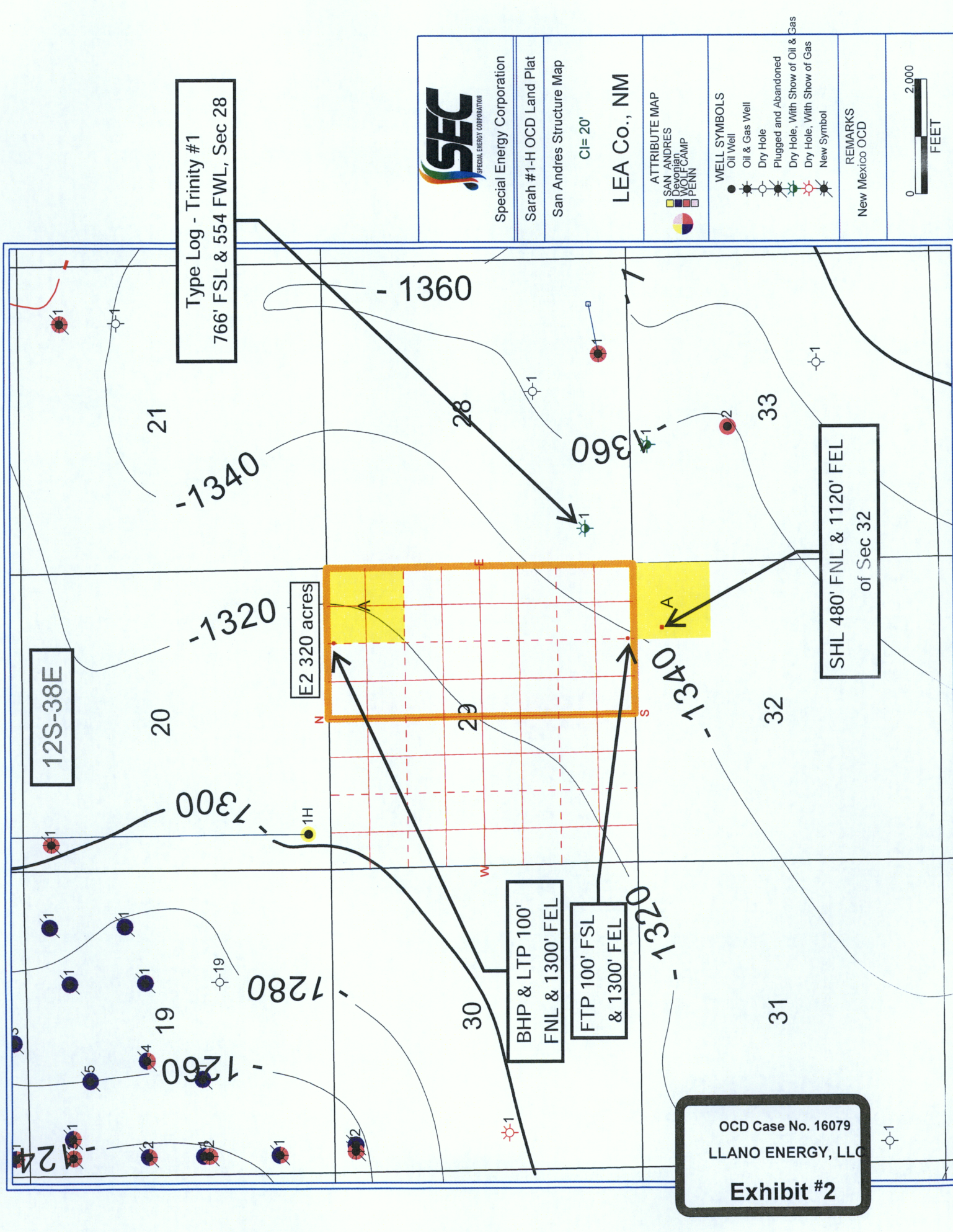
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	SOUTH/South line	Feet from the	East/West line	County
A	29	12 S	38 E		100	NORTH	1300	EAST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
320	N	F	Pending

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

	<p>TERMINUS POINT/ BOTTOM HOLE Lat - N 33.256530 Long - W 103.115040 NMSPC- N 823042.2 E 913764.2 (NAD-83)</p>	<p>OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. Signature Date 4-27-18 Gary Bond, Vice President Printed Name gary.bond@specialenergycorp.com Email Address</p>
	<p>FIRST TAKE POINT 100 FSL & 1300 FEL Lat - N 33.242740 Long - W 103.115062 NMSPC- N 818024.4 E 913816.0 (NAD-83)</p>	<p>SURFACE LOCATION Lat - N 33.241147 Long - W 103.114476 NMSPC- N 817446.7 E 914001.9 (NAD-83)</p>

OCD Case No. 16079
LLANO ENERGY, LLC
Exhibit #1



Type Log - Trinity #1
766' FSL & 554 FWL, Sec 28

12S-38E

E2 320 acres

BHP & LTP 100'
FNL & 1300' FEL

FTP 100' FSL
& 1300' FEL

SHL 480' FNL & 1120' FEL
of Sec 32



Special Energy Corporation

Sarah #1-H OCD Land Plat

San Andres Structure Map

CI= 20'

LEA Co., NM



ATTRIBUTE MAP

SAN ANDRES
PERMIAN
MONTICAMP
PENN

WELL SYMBOLS

- Oil Well
- Oil & Gas Well
- Dry Hole
- Plugged and Abandoned
- Dry Hole, With Show of Oil & Gas
- Dry Hole, With Show of Gas
- New Symbol

REMARKS

New Mexico OCD



OCD Case No. 16079
LLANO ENERGY, LLC

Exhibit #2



March 30, 2018

Unknown heirs, successors, devisees
and assigns of Eula Lee Cortez
c/o Gladys M Simpson
8221 N Russell Ave
Hobbs, NM 88240

RE: **WELL PROPOSAL – SARAH #1-H**
Proration Unit: E/2 Section 29-12S-38E, Lea County, NM

Dear Unleased Mineral Interest Owner:

As follow-up to leasing efforts and communications conducted by Special Energy Corporation (SEC) and RK Pinson & Associates (TX) LLC on behalf of Llano Energy LLC (Llano), SEC as Operator (and on behalf of Llano) does hereby propose the drilling of the Sarah #1-H well as a horizontal well covering the proration unit described above, or at a legal location as approved by the governing regulatory agency. SEC intends to test the San Andres formation at a true vertical depth (TVD) of approximately 5,250' and a measured depth (MD) of approximately 10,000'. As shown on the enclosed Authorization for Expenditure (AFE), total estimated well costs are \$3,494,819.78.

Please indicate your election to either lease, participate, or not participate in the space provided below, and return one copy of this letter to the undersigned at SEC's office address below. If you elect to participate, please also return an executed AFE along with your geological well requirements.

Thank you for your consideration, and contact me at 405-377-1177 with any questions.

Sincerely,


Charles Lumley, Landman

_____ I/we ELECT TO LEASE: Please contact SEC for terms
_____ I/we ELECT TO PARTICIPATE in the drilling of the Sarah #1-H
_____ I/we ELECT TO **NOT** PARTICIPATE in the drilling of the Sarah #1-H

SIGNED: _____
PRINT NAME & TITLE: _____
COMPANY NAME: _____
DATE: _____

Special Energy Corporation | PO Drawer 369 | Stillwater Ok, 74076 | 405.377.1177

OCD Case No. 16079
LLANO ENERGY, LLC

Exhibit #3

Special Energy Corporation
Project Area Pooling List
Sarah 1-H
E/2 29-12S-38E
Lea County, New Mexico

1. Ana Riddel Williamson, Trustee of the
Ana Riddel Trust, f/b/o Stephen and
Margaret Williamson
P.O. Box 190746
Dallas, TX 75219-0746

Also mailed to:
Ana Riddel Williamson, Trustee of the
Ana Riddel Trust, f/b/o Stephen and
Margaret Williamson
4702 16th St
Lubbock, TX 79416
2. Cody Joe Moore
c/o Raven Justine Lasso
2408 33rd Street, Apt. B
Lubbock, TX 79411
3. First Financial Trust and Asset
Management Company, NA, Trustee
of the Tamara Moore Testamentary
Trust
PO Box 701
Abilene, TX 79604
4. Keith Moore
9213 County Rd 7635
Wolfforth, TX 79382
5. Kirt Moore
9213 County Rd 7635
Wolfforth, TX 79382
6. Lisa Darlene Fisher
Address Unknown
7. Peggy Jo Gray
PO Box 875
Aspermont, TX 79502
8. Raechel Anastasia Moore
50 Ryder Road
Farmingdale, ME 04344
9. Ralonna Moore
717 N Ave O
Post, TX 79356
10. Ralph Riddel, Jr
658 County Rd 452
Rotan, TX 79546
11. Raven Justine Lasso
2408 33rd Street, Apt. B
Lubbock, TX 79411
12. Riddel Minerals Management, LLC
7911 Meadowbriar
Houston, TX 77063
13. The Estate of A. Darlene Fisher
c/o Sharon Darlene Jordan
18337 Hawthorne Ave
Bloomington, CA 92316
14. The Estate of Billie Ann Lowe
c/o Kay Calloway Newton
5004 Woodrow Road
Lubbock, TX 79424
15. The Estate of Charles D. Fisher
c/o Mary Jayne Fisher
403 South 3rd Street
Lovington, NM 88260
16. The Estate of Cleeta K. Sterling
c/o Karen McKinley
11035 Huron Street, Unit 807
Northglenn, CO 80234

Special Energy Corporation
Project Area Pooling List
Sarah 1-H
E/2 29-12S-38E
Lea County, New Mexico

- | | |
|---|--|
| 17. The Estate of Coy S. Lowe
c/o Kay Denise Lowe Atcheson
PO Box 64595
Lubbock, TX 79464 | 25. The Estate of Thomas J. Fisher, Jr.
c/o Dylan T. Fisher
34533 Sand Canyon Rd
Caliente, CA 93518 |
| 18. The Estate of Dallas Sumners
c/o Natalie Sumners
3067 Quail Ln
Longview, TX 75605 | 26. The Estate of Thomas J. Fisher, Sr.
c/o Sharon Darlene Jordan
18337 Hawthorne Ave
Bloomington, CA 92316 |
| 19. The Estate of Delores Brock
c/o Robert Lee Brock
1218 Hillside Drive
Gainesville, TX 76240 | 27. Estate of Woodie H Tudor
c/o Pam Carroll
1308 E Cardwell
Brownfield, TX 79316 |
| 20. The Estate of Eula Lee Cortez
c/o Gladys M. Simpson
8221 N Russell Ave
Hobbs, NM 88240 | |
| 21. The Estate of James Hoytt Fisher
a/k/a James Hoyt Fisher Sr.
c/o James H. Fisher, Jr.
6305 County Road 7450
Lubbock, TX 79424 | |
| 22. The Estate of Jimmy Joe Moore
c/o Raven Justine Lasso
2408 33 rd Street, Apt. B
Lubbock, TX 79411 | |
| 23. The Estate of Patricia Cortez Sumners
c/o Greg Sumners
PO Box 2075
Joplin, MO 64803 | |
| 24. The Estate of Tera Sumners Garza
c/o Tiffney Garza
1000 Warbler Cove
Hutto, TX 78634 | |

SENDER: COMPLETE THIS SECTION

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

Addressed to:

Dallas Summers
c/o Natalie Summers
3067 Quail Ln
Longview, TX 75605



9590 9402 3186 7166 1636 39

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4452

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Connie McElroy* ☒ Agent ☐ Addressee
B. Received by (Printed Name) C. Date of Delivery
Connie McElroy 4/3/16

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

3. Service Type

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Lisa Darlene Jordan
c/o Sharon Darlene Jordan
18337 Hawthorne Ave
Bloomington, CA 92316



9590 9402 3186 7166 1636 22

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4469

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Sharon & Jordan* ☐ Agent ☒ Addressee
B. Received by (Printed Name) C. Date of Delivery
4-4-16

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

3. Service Type

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Unknown heirs, successors, devisees & assigns of Eula Lee Cortez
c/o Gladys M Simpson
8221 N Russell Ave
Hobbs, NM 88240



9590 9402 3186 7166 1636 15

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4476

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Gladys Simpson* ☐ Agent ☒ Addressee
B. Received by (Printed Name) C. Date of Delivery
4-2-16

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

3. Service Type

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Unknown heirs, successors, devisees & assigns of Patricia Cortez Sumners

c/o Greg Sumners

PO Box 2075

Joplin, MO 64803



9590 9402 3186 7166 1636 08

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4483

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Greg Sumners

☐ Agent☒ Addressee

B. Received by (Printed Name)

X Greg Sumners

C. Date of Delivery

4-3-18

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Unknown heirs, successors, devisees & assigns of Tera Sumners Garza

c/o Tiffney Garza

502 Buckskin Drive

Round Rock, TX 78681



9590 9402 3186 7166 1635 92

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4490

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Tiffney Garza

☐ Agent☐ Addressee

B. Received by (Printed Name)

Tiffney Garza

C. Date of Delivery

4/5/18

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Unknown heirs, successors, devisees & assigns of Thomas J. Fisher

c/o Sharon Darlene Jordan

18337 Hawthorne Ave

Bloomington, CA 92316



9590 9402 3186 7166 1635 85

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4506

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Sharon Jordan

☐ Agent☒ Addressee

B. Received by (Printed Name)

Sharon Jordan

C. Date of Delivery

4-4-18

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt



April 9, 2018

BY CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Peggy Jo Gray
PO Box 875
Aspermont, TX 79502

RE: Llano Energy LLC NMOCD Application: Case No. 16079

Dear Sir or Madam:

Enclosed is a copy of an application for approval of (1) a 320-acre, non-standard spacing and proration unit, (2) compulsory pooling, and (3) an unorthodox well location that Llano Energy LLC ("Llano Energy") has filed with the New Mexico Oil Conservation Division ("the Division"). The proposed non-standard spacing and proration unit is comprised of the E/2 of Section 29, Township 12 South, Range 38 East, NMPM, Lea County, New Mexico. Additionally, the application requests the appointment of Special Energy Corporation as operator of the anticipated Sarah #1-H well.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, May 3, 2018 in Porter Hall at the Division's offices located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by Llano Energy's application, you may appear at the hearing and present testimony. If you do not appear at that time and become a party of record, you will be precluded from contesting the matter at a later date.

A party appearing in a Division case is required by the Division's Rules to file a Pre-Hearing Statement, which in this matter must be filed no later than Thursday, April 26, 2018. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: the name of the party and the party's attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate amount of time the party will need to present the party's case; and an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the attorney representing Llano in this Division case: Gary W. Larson, Partner, Hinkle Shanor, LLP, PO Box 0268, Santa Fe, NM 87504, glarson@hinklelawfirm.com.

Thank you, and contact me at 405-377-1177 with any questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Gary Bond', is written over a white rectangular area.

Gary Bond
Vice President of Special Energy Corporation

Enclosure

OCD Case No. 16079
LLANO ENERGY, LLC

Exhibit #4

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Cody Joe Moore
c/o Raven Justine Lasso
2408 33rd Street, Apt. B
Lubbock, TX 79411



9590 9402 3054 7124 1767 34

2. Article Number (Transfer from service label)

91 7199 9991 7031 6106 8529

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

First Financial Trust and Asset Management
Company, NA,
Trustee of the Tamara Moore Testamentary
Trust
PO Box 701
Abilene, TX 79604



9590 9402 3186 7166 1632 19

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4087

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Peggy Jo Gray
PO Box 875
Aspermoo, TX 79502



9590 9402 3206 7166 6585 65

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4124

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Raechel Moore
50 Rader Road
Farmdale, ME 04344



9590 9402 3054 7124 1767 65

2. Article Number (Transfer from service label)

91 7199 9991 7031 6106 8536

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Raechel Moore

C. Date of Delivery

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

3. Service Type

☒ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation

Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ralonna Moore
717 N Ave O
Post, TX 79356



9590 9402 3206 7166 6585 58

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4131

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Ralonna Moore

C. Date of Delivery

4-13-18

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation

Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ralph Riddel, Jr
658 County Rd 452
Rotan, TX 79546



9590 9402 3206 7166 6585 41

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4148

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent☐ Addressee

B. Received by (Printed Name)

Jodie Riddel

C. Date of Delivery

04/13/2013

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

3. Service Type


☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery


(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation


Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Raven Machine Lasso 2408 Street, Apt. B Lubbock, TX 79411</p>	
 9590 9402 3054 7124 1767 72	
<p>2. Article Number (Transfer from service label)</p> <p>91 7199 9991 7031 6106 8543</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>The Estate of A. Darlene Fisher c/o Sharon Darlene Jordan 18337 Hawthorne Ave Bloomington, CA 92316</p>	
 9590 9402 3206 7166 6585 27	
<p>2. Article Number (Transfer from service label)</p> <p>91 7199 9991 7031 6107 4162</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt	

<-Pooling & Offset

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>The Estate of Billie Ann Lowe c/o Kay Calloway Newton 5004 Woodrow Road Lubbock, TX 79424</p>	
 9590 9402 3186 7166 1634 31	
<p>2. Article Number (Transfer from service label)</p> <p>91 7199 9991 7031 6107 4179</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt	

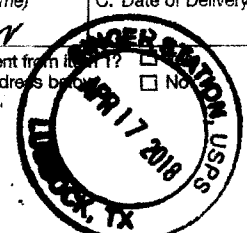
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <u>Mary Jayne Fisher</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>The Estate of Charles D. Fisher c/o Mary Jayne Fisher 403 South 3rd Street Lovington, NM 88260</p>	
<p>2. Article Number (Transfer from service label)</p> <p>91 7199 9991 7031 6107 4186</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

<-Pooling & Offset

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <u>Daniel L. McKinley</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>The Estate of Cleeta K. Sterling c/o Karen McKinley 11035 Huron Street, Unit 807 Northglenn, CO 80234</p>	
<p>2. Article Number (Transfer from service label)</p> <p>91 7199 9991 7031 6107 4193</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

<-Pooling & Offset

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <u>Kay Denise Lowe</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>The Estate of Coy S. Lowe c/o Kay Denise Lowe Atcherson PO Box 64595 Lubbock, TX 79464</p>	
<p>2. Article Number (Transfer from service label)</p> <p>91 7199 9991 7031 6107 4209</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p>	



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Estate of Belores Brock
c/o Robert Lee Brock
1218 Hillside Drive
Gainesville, TX 76240



9590 9402 3186 7166 1633 87

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4223

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Robert Brock

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

4/12/14

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

<-Pooling & Offset

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Estate of Eula Lee Cortez
c/o Gladys M. Simpson
8221 N Russell Ave
Hobbs, NM 88240



9590 9402 3186 7166 1633 70

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4230

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Gladys Simpson

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-13-14

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

<-Pooling & Offset

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Estate of Jimmy Joe Moore
c/o Raven Justine Lasso
2408 33rd Street, Apt. B
Lubbock, TX 79411



9590 9402 3054 7124 1767 58

2. Article Number (Transfer from service label)

91 7199 9991 7031 6106 8512

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Jimmy Joe Moore

- ☐ 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

- ☒ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Estate of Patricia Corbett Sumners
c/o Greg Sumners
PO Box 2075
Joplin, MO 64803



9590 9402 3186 7166 1633 56

2. Article Number (Transfer from service label)

41 7199 9991 7031 6107 4254

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent
☒ Addressee

B. Received by (Printed Name)

Greg Sumners

C. Date of Delivery

4/16/18

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

<-Pooling & Offset

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Estate of Thomas J. Fisher, Jr.
c/o Dylan T. Fisher
34533 Sand Canyon Rd
Caliente, CA 93518



9590 9402 3186 7166 1633 32

2. Article Number (Transfer from service label)

7199 9991 7031 6107 4278

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

Lester Tellison

C. Date of Delivery

4/17/18

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

<-Pooling & Offset

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Estate of Thomas J. Fisher, Sr.
c/o Sharon Darlene Jordan
18337 Hawthorne Ave
Bloomington, CA 92316



9590 9402 3186 7166 1633 25

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4285

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent
☒ Addressee

B. Received by (Printed Name)

Sharon Jordan

C. Date of Delivery

4-13-18

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

<-Pooling & Offset

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Estate of ~~_____~~ ~~_____~~ H Tudor, deceased
c/o Pam ~~_____~~
1308 E Caldwell
Brownfield, TX 79315



9590 9402 3186 7166 1635 23

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6483

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Kirt Moore
9213 County Rd 7635
Wolfforth, TX 79382



9590 9402 3186 7166 1631 89

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4117

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Kirt Moore

C. Date of Delivery

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Keith Moore
9213 County Rd 7635
Wolfforth, TX 79382



9590 9402 3186 7166 1631 96

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4100

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Kirt Moore

C. Date of Delivery

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt



April 9, 2018

BY CERTIFIED MAIL
RETURN RECEIPT REQUESTED

The Estate of Eula Lee Cortez
c/o Gladys M Simpson
8221 N Russell Ave
Hobbs, NM 88240

RE: Llano Energy LLC NMOCD Application: Case No. 16079

Dear Sir or Madam:

Enclosed is a copy of an application for approval of (1) a 320-acre, non-standard spacing and proration unit, (2) compulsory pooling, and (3) an unorthodox well location that Llano Energy LLC ("Llano Energy") has filed with the New Mexico Oil Conservation Division ("the Division"). The proposed non-standard spacing and proration unit is comprised of the E/2 of Section 29, Township 12 South, Range 38 East, NMPM, Lea County, New Mexico. Additionally, the application requests the appointment of Special Energy Corporation as operator of the anticipated Sarah #1-H well.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, May 3, 2018 in Porter Hall at the Division's offices located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of interests (within and offsetting the proposed unit) that may be affected by Llano Energy's application, you may appear at the hearing and present testimony. If you do not appear at that time and become a party of record, you will be precluded from contesting the matter at a later date.

A party appearing in a Division case is required by the Division's Rules to file a Pre-Hearing Statement, which in this matter must be filed no later than Thursday, April 26, 2018. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: the name of the party and the party's attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate amount of time the party will need to present the party's case; and an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the attorney representing Llano in this Division case: Gary W. Larson, Partner, Hinkle Shanor, LLP, PO Box 0268, Santa Fe, NM 87504, glarson@hinklelawfirm.com.

Thank you, and contact me at 405-377-1177 with any questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Gary Bond'.

Gary Bond
Vice President of Special Energy Corporation

Enclosure

OCD Case No. 16079
LLANO ENERGY, LLC
Exhibit #5

Special Energy Corporation
Offset Notice List
Sarah 1-H
E/2 29-12S-38E
Lea County, New Mexico

1. Amcon Resources, Inc
PO Box 3025
Oklahoma City, OK 73101
2. Black Stone Minerals Company, LP
1001 Fannin St, Ste 2020
Houston, TX 77002
3. Bryan Garza, a/k/a Brian Garza
22940 US Highway 281 South
San Antonio, TX 78264
4. Buckhead Energy, LLC
PO Box 471288
Fort Worth, TX 76147
5. Caprock Energy, LLC
PO Box 7172165
Stateline, NV 89449
6. Carloss Dean Alexander
2806 Alexander Rd
Lovington, NM 88260
7. Carolyn Cowden Strickland
PO Box 482
Midland, TX 79702

Also mailed to:
Carolyn Cowden Strickland
c/o Wright E Cowden, Jr
PO Box 2377
Midland, TX 79702
8. Carrie Ford
221 S 2nd
Lovington, NM 88260
9. Clyde Anthony
c/o Phillip Anthony
1703 S. Ohio
Sedalia, MO 65302
10. Darlene Houston
c/o John Houston
4709 Spiva Drive
Del City, OK 73115
11. Delbert Sumners
PO Box 2075
Joplin, MO 64803
12. Doug Brazil
PO Box 624
Fulshear, TX 77441
13. Gourley Royalty Company, LLC
PO Box 2215
Ardmore, OK 73402
14. Greg Sumners
PO Box 2075
Joplin, MO 64803
15. James Houston
514 Allcott St
Marshall, MI 49068
16. Janice Badker
5215 Walton Drive
Klamath Falls, OR 97603
17. John Houston
514 Allcott St
Marshall, MI 49068

Special Energy Corporation
Offset Notice List
Sarah 1-H
E/2 29-12S-38E
Lea County, New Mexico

- | | |
|---|---|
| 18. Joyce Burt
PO Box 7144
Klamath Falls, OR 97602 | 26. Robert Edward Alexander and Sandra
Ann Alexander, as joint tenants
718 Ashleigh Ln
Lantana , TX 76226 |
| 19. Lavaca Minerals Company
PO Box 476
Barker, TX 77413 | 27. Roy G Barton, Jr
1919 N Turner
Hobbs, NM 88240 |
| 20. Lazy S Minerals, LLC
PO Box 100493
Fort Worth, TX 76185 | 28. Roy G Barton, Jr, as Trustee of the Roy
G Barton, Sr and Opal Barton
Revocable Trust, under Trust
Agreement, dtd 1/20/1982
1919 N Turner
Hobbs, NM 88240 |
| 21. Legacy Reserves Operating, LP
PO Box 10848
Midland, TX 79702

Also mailed to:
Legacy Reserves Operating, LP
PO Box 100493
Fort Worth, TX 76185 | 29. Roy Wayne Warren, Betty Jo
Cummings, William Don Warren, Celia
Jane Cullen, and Mary Ann Jones, joint
tenants
c/o Mary Ann Jones
1109 E Carmen St
Phoenix, AZ 85283 |
| 22. Manzano Energy Partners II, LLC
PO Box 2107
Roswell, NM 88202 | 30. Ruby Alene Davis
22344 Victory Drive
Brooksville, FL 34601-2720

Also mailed to:
Ruby Alene Davis
823 N Washington St
Owosso, MI 48867 |
| 23. Mitchell Minerals, LLC
PO Box 448
Henryetta, OK 74437 | 31. Sultana Sumners Groce
2225 W Acres Rd
Joliet, IL 60435 |
| 24. Natalie Sumners, Guardian of Denton
Sumners, a minor
3067 Quail Ln
Longview, TX 75605 | 32. Tiffney Garza
1000 Warbler Cove
Hutto, TX 78634 |
| 25. Newelene Williams Pena
1301 W Clayton Ave
Lovington, NM 88260 | |

Special Energy Corporation
Offset Notice List
Sarah 1-H
E/2 29-12S-38E
Lea County, New Mexico

- | | |
|--|--|
| 33. Wishbone Texas Operating Company, LLC
10613 W Sam Houston Pkwy N,
Ste 400
Houston, TX 77064 | 40. The Estate of Cleeta K. Sterling
c/o Karen McKinley
11035 Huron Street, Unit 807
Northglenn, CO 80234 |
| 34. Wright E Cowden, Jr
PO Box 2377
Midland, TX 79702 | 41. Estate of Coy D Houston
c/o Jacqueline Houston
514 Allcott St
Marshall, MI 49068 |
| 35. The Estate of A. Darlene Fisher
c/o Sharon Darlene Jordan
18337 Hawthorne Ave
Bloomington, CA 92316 | 42. The Estate of Dallas Sumners
c/o Natalie Sumners
3067 Quail Ln
Longview, TX 75605 |
| 36. Estate of Albert S Dimsha
c/o Stanley Joe Dimsha
5012 Redland Dr
Las Cruces, NM 88011 | 43. Estate of Darwin Houston
c/o Jacqueline Houston
514 Allcott St
Marshall, MI 49068 |
| 37. Estate of B G Bradford
c/o Sherry Fleming
1902 LaSalle Ave
Lubbock, TX 79407 | 44. The Estate of Delores Brock
c/o Robert Lee Brock
1218 Hillside Drive
Gainesville, TX 76240 |
| 38. The Estate of
Charlene Alexander Marr
PO Box 1083
Tularosa, NM 88352 | 45. Estate of Ethel Dimsha
c/o Stanley Joe Dimsha
5012 Redland Dr
Las Cruces, NM 88011 |
| Also mailed to:
The Estate of
Charlene Alexander Marr
c/o Rhonda Rae Smith
1751 Bellamah Ave NW #2302
Albuquerque, NM 87104 | 46. The Estate of Eula Lee Cortez
c/o Gladys M Simpson
8221 N Russell Ave
Hobbs, NM 88240 |
| 39. The Estate of Charles D. Fisher
c/o Mary Jayne Fisher
403 South 3 rd Street
Lovington, NM 88260 | 47. The Estate of Frank Badker
c/o Joyce Burt
PO Box 7144
Klamath Falls, OR 97602 |

Special Energy Corporation
Offset Notice List
Sarah 1-H
E/2 29-12S-38E
Lea County, New Mexico

- | | |
|--|--|
| 48. The Estate of Frieda B. Williams
c/o Newelene Williams Pena
1301 W Clayton Ave
Lovington, NM 88260 | 55. Estate of Larry Jean Hodge
c/o Pamela Fitzgerald
PO Box 1147
Lovington, NM 88260 |
| 49. Estate of Gladys A Hodge
c/o Pamela Fitzgerald
PO Box 1147
Lovington, NM 88260 | 56. Estate of Osborne E Fisher
c/o Oscar C Fisher
PO Box 663
Sundown, TX 79372 |
| 50. Estate of Ira L Stone
c/o Sherry Fleming
1902 LaSalle Ave
Lubbock, TX 79407 | 57. The Estate of Patricia Cortez Sumners
c/o Greg Sumners
PO Box 2075
Joplin, MO 64803 |
| 51. The Estate of Irene Wallace
1310 E Municipal Drive
Lubbock, TX 79403 | 58. Estate of Paul D Davis
c/o Paula Stitt
3927 Sundial Ave
Hudsonville, MI 49426 |
| Also mailed to:
Estate of Irene Wallace
c/o Sherry Fleming
1902 LaSalle Ave
Lubbock, TX 79407 | 59. The Estate of Ruby C. Fisher
c/o Gladys M Simpson
8221 N Russell Ave
Hobbs, NM 88240 |
| 52. The Estate of James Hoytt Fisher
a/k/a James H Fisher, Jr
c/o James H Fisher, Jr
6305 County Rd 7450
Lubbock, TX 79424 | 60. Estate of Ruby E Houston Davis
c/o Paula Stitt
3927 Sundial Ave
Hudsonville, MI 49426 |
| 53. Estate of Jimmy P Hodge
c/o James Presley Hodge
PO Box 565
Lovington, NM 88260 | 61. Estate of Sherry Bradford
c/o Sherry Fleming
1902 LaSalle Ave
Lubbock, TX 79407 |
| 54. Estate of Joyce Hodge
c/o Pamela Fitzgerald
PO Box 1147
Lovington, NM 88260 | 62. The Estate of Tera Sumners Garza
c/o Tiffney Garza
1000 Warbler Cove
Hutto, TX 78634 |

Special Energy Corporation
Offset Notice List
Sarah 1-H
E/2 29-12S-38E
Lea County, New Mexico

63. The Estate of Thomas J. Fisher, Jr.
c/o Dylan T. Fisher
34533 Sand Canyon Rd
Caliente, CA 93518
64. The Estate of Thomas J Fisher, Sr
c/o Sharon Darlene Jordan
18337 Hawthorne Ave
Bloomington, CA 92316
65. The Estate of Willie A Dye
812 North 18th St
Lamesa, TX 79631
66. The Estate of Ida Elizabeth Oliver
Address Unknown
67. The Estate of Joy C James
Address Unknown
68. Lisa Darlene Fisher
Address Unknown
69. The Estate of Myrtle Louise Smith
Address Unknown
70. The Estate of Opal N Hopkins
Address Unknown
71. Williams, Johnson, Houston, and
Reagan, Attorneys-at-Law, as Trustee
for the Benefit of Pearl F Williams
Dawson for her life time
Address Unknown
72. The Estate of WK Williams
Address Unknown
73. The Estate of Zollie Tyrone
Address Unknown

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Amcon Resources, Inc
PO Box 3025
Oklahoma City, OK 73101



9590 9402 3186 7166 1642 16

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6018

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

APR 14 2018

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Black Stone Minerals Company, LP
1001 Fannin St, Ste 2020
Houston, TX 77002



9590 9402 3186 7166 1625 19

2. Article Number (Transfer from service label)

11 7199 9991 7032 9699 6025

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Bryan Garza, a/k/a Brian Garza
22940 US Highway 281 South
San Antonio, TX 78264



9590 9402 3186 7166 1632 26

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4070

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Buckhead Energy, LLC
PO Box 471288
Fort Worth, TX 76147



9590 9402 3186 7166 1625 33

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6049

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Caprock Energy, LLC
PO Box 22165
Stateline, NV 89449



9590 9402 3186 7166 1625 40

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6056

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Carlross Dean Alexander
2806 Alexander Rd
Lovington, NM 88260



9590 9402 3186 7166 1625 57

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6063

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Clyde Anthony
c/o Phillip Anthony
1703 S. Ohio
Sedalia, MO 65302



9590 9402 3186 7166 1625 88

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6094

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Beverly Anthony*☐ Agent☐ Addressee

B. Received by (Printed Name)

Beverly Anthony

C. Date of Delivery

*04-13*D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☒ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Darlene Houston
c/o John Houston
4709 Spiva Drive
Del City, OK 73115



9590 9402 3186 7166 1625 95

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6100

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *John Houston*☐ Agent☐ Addressee

B. Received by (Printed Name)

John Houston

C. Date of Delivery

*19 Apr 18*D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☒ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Delbert Sumners
PO Box 2075
Joplin, MO 64803



9590 9402 3186 7166 1626 01

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6117

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Delbert Sumners*☐ Agent☐ Addressee

B. Received by (Printed Name)

Delbert Sumners

C. Date of Delivery

*4/16/18*D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☒ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Gourley Royalty Company, LLC
PO Box 2215
Ardmore, OK 73402



9590 9402 3186 7166 1627 86

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6131

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Greg Summers
PO Box 2075
Joplin, MO 64803



9590 9402 3186 7166 1626 25

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6148

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Jamie Badker
PO Box 115
Joplin, MO 64803



9590 9402 3186 7166 1626 49

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6162

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Joyce Burt
PO Box 7144
Klamath Falls, OR 97602



9590 9402 3186 7166 1626 70

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6186

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Joyce Burt* ☐ 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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Lazy S Minerals Company
PO Box 476
Barker, TX 77413



9590 9402 3186 7166 1626 63

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6193

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Gayle M. Barker* ☐ 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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Lazy S Minerals, LLC
PO Box 100493
Fort Worth, TX 76185



9590 9402 3186 7166 1626 87

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6209

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Calvin M. Barker* ☐ 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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Legacy ~~Reserves~~ Operating, LP
PO Box 10848
Midland, TX 79702



9590 9402 3186 7166 1626 94

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6216

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *July Buell*☐ Agent☐ Addressee

B. Received by (Printed Name)

J. C. Buell

C. Date of Delivery

*4-22-18*D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Legacy Reserves Operating, LP
PO Box 100493
Fort Worth, TX 76185



9590 9402 3186 7166 1635 09

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6469

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Colleen Buell*☐ Agent☐ Addressee

B. Received by (Printed Name)

Colleen Buell

C. Date of Delivery

*7-16-18*D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Manzano Energy Partners II, LLC
PO Box 2107
Roswell, NM 88202



9590 9402 3186 7166 1627 00

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6223

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Debbie Lafferty*☐ Agent☐ Addressee

B. Received by (Printed Name)

Debbie Lafferty

C. Date of Delivery

*7/17/18*D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mitchell Michaels, LLC
PO Box 448
Henryetta, OK 74437



9590 9402 3186 7166 1627 17

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6230

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Matthew Mitchell ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Matthew Mitchell

C. Date of Delivery

*4-13*D. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☒ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☒ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery
☐ Insured Mail ☐ Signature Confirmation Restricted Delivery (\$500)
☐ Registered Mail Restricted Delivery (\$500)

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Roy G Barton, Jr
1919 N Turner
Hobbs, NM 88240



9590 9402 3186 7166 1627 55

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6278

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Debra Barton ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Debra Barton

C. Date of Delivery

*4-16-18*D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☒ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☒ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery
☐ Insured Mail ☐ Signature Confirmation Restricted Delivery (\$500)
☐ Registered Mail Restricted Delivery (\$500)

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Roy G Barton, Jr as Trustee of the Roy G
Barton, Sr & Roy G Barton Revocable Trust,
under Trust Agreement, dated 1/20/1982
1919 N Turner
Hobbs, NM 88240



9590 9402 3186 7166 1627 62

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6285

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Debra Barton ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Debra Barton

C. Date of Delivery

*4-16-18*D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☒ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☒ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery
☐ Insured Mail ☐ Signature Confirmation Restricted Delivery (\$500)
☐ Registered Mail Restricted Delivery (\$500)

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Sultana Sumners Groce
2225 W Acres Rd
Joliet, IL 60435



9590 9402 3186 7166 1642 09

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6315

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/14/15

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Wishbone Texas Operating Company, LLC
10613 West Houston Pkwy N,
Ste 400
Houston, TX 77064



9590 9402 3206 7166 6578 34

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6339

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

Teresa Cooke

C. Date of Delivery

4/12/15

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (\$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Estate of Darwin Houston
c/o [unclear] Houston
314 Alcott St
Marshall, MI 49068



9590 9402 3186 7166 1632 71

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4315

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

Reginald [unclear]

C. Date of Delivery

2/2/15

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Estate of Frank Backer
c/o Joyce Burt
PO Box 7144
Klamath Falls, 97602



9590 9402 3206 7166 6577 80

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6384

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

JOYCE BURT

C. Date of Delivery

4/13/18

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Estate of Frieda B Williams, deceased
c/o Newelene Williams Pena
1301 W Clayton Ave
Lovington, NM 88260



9590 9402 3186 7166 1631 34

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4421

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Estate of Mary A Hodge, deceased
c/o Pamela Fitzgerald
PO Box 1147
Lovington, NM 88260



9590 9402 3186 7166 1632 88

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4322

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Estate of ~~Joe~~ Hodge, deceased
c/o Pamela Fitzgerald
PO Box ~~1147~~
Lovington, NM 88260



9590 9402 3186 7166 1631 65

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6421

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *no. Hodge*☐ 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

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☒ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Estate of Larry Jean Hodge, deceased
c/o Pamela Fitzgerald
PO Box 1147
Lovington, NM 88260



9590 9402 3186 7166 1631 72

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6438

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *no. Hodge*☐ 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

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☒ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Estate of Osborn E Fisher, deceased
c/o Oscar C Fisher
PO Box 663
Sundown, TX 79372



9590 9402 3186 7166 1633 01

2. Article Number (Transfer from service label)

91 7199 9991 7031 6107 4346

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Oscar Fisher*☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

OSCAR FISHER

4-19-18

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®☒ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Estate of Paul D. Davis, deceased
c/o Paula Stitt
3927 Sundial Ave
Hudsonville, MI 49426



9590 9402 3186 7166 1634 86

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6445

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Paula Stitt ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Paula Stitt

C. Date of Delivery

4/16/18

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Estate of Ruby E. Fisher
c/o Gladys M. Simpson
8221 N. Russell Ave
Hobbs, NM 88240



9590 9402 3206 7166 6577 66

2. Article Number (Transfer from service label)

91 7199 9991 7031 6110 3992

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Gladys Simpson ☐ Agent
☒ Addressee

B. Received by (Printed Name)

Gladys Simpson

C. Date of Delivery

4/17/18

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Estate of Ruby E. Houston Davis,
deceased
c/o Paula Stitt
3927 Sundial Ave
Hudsonville, MI 49426



9590 9402 3186 7166 1634 93

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6452

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Paula Stitt ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Paula Stitt

C. Date of Delivery

4/16/18

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Carolyn Cowden Strickland
PO Box 482
Midland, TX 79702



9590 9402 3186 7166 1625 64

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6070

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Marilyn Mason

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

MARILYN MASON

C. Date of Delivery

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

3. Service Type

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Doug Brazil
PO Box 624
Fulshear, TX 77441



9590 9402 3186 7166 1626 18

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6124

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Doug Brazil

C. Date of Delivery

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Registered Mail☐ Registered Mail Restricted Delivery (\$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Newelene Williams Pena
1301 W Clayton Ave
Lovington, NM 88260



9590 9402 3186 7166 1627 31

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6254

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Newelene Williams Pena

C. Date of Delivery

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Registered Mail☐ Registered Mail Restricted Delivery (\$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Estate of Frieda B. Williams
c/o Newelene Williams Pena
1301 W Clayton Ave
Lovington, NM 88260



9590 9402 3206 7166 6577 73

2. Article Number (Transfer from service label)

91 7199 9991 7032 9699 6377

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Newelene Williams Pena

C. Date of Delivery

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

3. Service Type

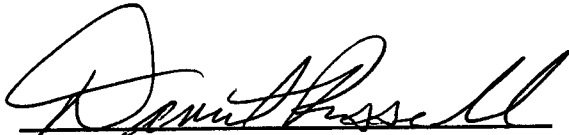
☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Registered Mail☐ Registered Mail Restricted Delivery (\$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☒ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Affidavit of Publication

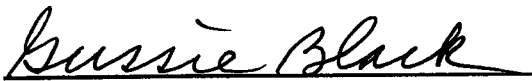
STATE OF NEW MEXICO
COUNTY OF LEA

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

Beginning with the issue dated
April 18, 2018
and ending with the issue dated
April 18, 2018.


Publisher

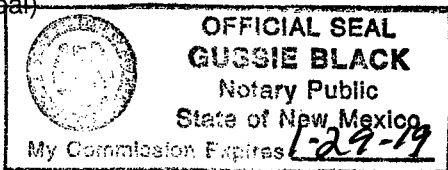
Sworn and subscribed to before me this
18th day of April 2018.


Business Manager

My commission expires

January 29, 2019

(Seal)



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

LEGAL NOTICE
April 18, 2018

PUBLICATION NOTICE

This is to notify all interested parties, including Ana Riddel Williamson, Trustee of the Ana Riddel Trust, f/b/o Stephen and Margaret Williamson, Cody Joe Moore, First Financial Trust and Asset Management Company, NA, Trustee of the Tamara Moore Testamentary Trust, Keith Moore, Kirt Moore, Lisa Darlene Fisher, Peggy Jo Gray, Raechee Anastasia Moore, Ralonna Moore, Ralph Riddel, Jr., Raven Justine Lasso, Riddel Minerals Management, LLC, the Estate of A. Darlene Fisher, the Estate of Billie Ann Lowe, the Estate of Charles D. Fisher, the Estate of Cleeta K. Sterling, the Estate of Coy S. Lowe, the Estate of Dallas Sumners, the Estate of Delores Brock, the Estate of Eula Lee Cortez, the Estate of James Hoytt Fisher, the Estate of Jimmy Joe Moore, the Estate of Patricia Cortez Sumners, the Estate of Tera Sumners Garza, the Estate of Thomas J. Fisher, Jr., the Estate of Thomas J. Fisher, Sr., the Estate of Woodie H. Tudor, Amicon Resources, Inc., Black Stone Minerals Company, LP, Bryan Garza, a/k/a/ Brian Garza, Buckhead Energy, LLC, Caprock Energy, LLC, Carlos Dean Alexander, Carolyn Cowden Strickland, Carrie Ford, Clyde Anthony, Darlene Houston, Delbert Sumners, Doug Brazil, Gourley Royalty Company, LLC, Greg Sumners, James Houston, Janice Badker, John Houston, Joyce Burt, Lavaca Minerals Company, Lazy S Minerals, LLC, Legacy Reserves Operating, LP, Manzano Energy Partners II, LLC, Mitchell Minerals, LLC, Natalie Sumners, Guardian of Denton Sumners, a minor, Newelene Williams Pena, Robert Edward Alexander and Sandra Ann Alexander, as joint tenants, Roy G. Barton, Jr., Roy Wayne Warren, Betty Jo Cummings, William Don Warren, Celia Jane Cullen and Mary Ann Jones, as joint tenants, Ruby Alene Davis, Sultana Sumners Groce, Tiffney Garza, Wishbone Texas Operating Company, LLC, Wright E. Cowden, Jr., the Estate of A. Darlene Fisher, the Estate of Albert S. Dimsha, the Estate of B. G. Bradford, the Estate of Charlene Alexander Marr, the Estate of Charles D. Fisher, the Estate of Cleeta K. Sterling, the Estate of Coy D. Houston, the Estate of Dallas Sumners, the Estate of Darwin Houston, the Estate of Delores Brock, the Estate of Ethel Dimsha, the Estate of Eula Lee Cortez, the Estate of Frank Badker, the Estate of Frieda B. Williams, the Estate of Gladys A. Hodge, the Estate of Ira L. Stone, the Estate of Irene Wallace, the Estate of James Hoytt Fisher, the Estate of Jimmy P. Hodge, the Estate of Joyce Hodge, the Estate of Larry Jean Hodge, the Estate of Osborne E. Fisher, the Estate of Patricia Cortez Sumners, the Estate of Paul D. Davis, the Estate of Ruby C. Fisher, the Estate of Ruby E. Houston Davis, the Estate of Sherry Bradford, the Estate of Tera Sumners Garza, the Estate of Thomas J. Fisher, Jr., the Estate of Thomas J. Fisher, Sr., the Estate of Willie A. Dye, the Estate of Ida Elizabeth Oliver, the Estate of Joy C. James, Lisa Darlene Fisher, the Estate of Myrtle Louise Smith, the Estate of Opal N. Hopkins, Williams, Johnson, Houston, and Reagan, as Trustee for the benefit of Pearl F. Williams, the Estate of W.K. Williams, the Estate of Zolzie Tyrone, and their successors and assigns, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Llano Energy, LLC (Case No. 16079) at 8:15 a.m. on May 3, 2018 in Porter Hall at 1220 South St. Francis Drive, Santa Fe, New Mexico. Llano Energy seeks an order (i) approving a 320-acre, non-standard spacing and proration unit (project area) in the E/2 of Section 29, Township 12 South, Range 38 East, in Lea County; (ii) pooling all uncommitted mineral interests in the San Andres formation underlying the proposed project area; and (iii) approving an unorthodox location for the Sarah #1-H horizontal well. The proposed project area is to be dedicated to the Sarah #1-H well, which will be horizontally drilled from a surface location in Unit A in Section 32 to a bottom hole location in Unit A in Section 29, Township 12 South, Range 38 East. The first take point for the well will be 100 feet from the South line and the last take point will be 100 feet from the North line of Section 29. Also to be considered will be the cost of drilling and completing the well and the allocation of the cost, the designation of Special Energy Corporation as the operator of the well, and a 200% charge for the risk involved in drilling and completing the well. The proposed project area is located approximately nine (9) miles east of Tatum, New Mexico. #32719

02107475

00210314

HINKLE, HENSLEY, SHANOR & MARTIN, LLP
PO BOX 2068
SANTA FE, NM 87504

OCD Case No. 16079
LLANO ENERGY, LLC

Exhibit #6



Authorization for Expenditure DEVELOPMENT WELL AFE

Operator: Special Energy Corporation
Prepared By: Special Energy Corporation
Location: E/2 Section 29-12S-38E
County: Lea County, New Mexico

Well Name: SARAH 1-H
Formation: San Andres
Est. Depth: MD-10,000'
TVD-5,250'
Date: 3/30/2018

Phase	Operation Description	Operation Cost	Cumulative Phase Total Well Cost
Drilling	Conductor/ MH/ RH	\$ 12,320.00	\$ 12,320.00
Drilling	Casing - Surface	\$ 36,880.00	\$ 49,200.00
Drilling	Casing - Production	\$ 174,250.00	\$ 223,450.00
Drilling	Wellhead (General)	\$ 19,820.00	\$ 243,270.00
Drilling	Location Construction, Roads & Reclamation	\$ 87,500.00	\$ 330,770.00
Drilling	Drilling Rig	\$ 191,700.00	\$ 522,470.00
Drilling	Rig Move	\$ 77,000.00	\$ 599,470.00
Drilling	Rig Materials & Supplies (Consumables)	\$ 400.00	\$ 599,870.00
Drilling	Fuel - Rig	\$ 15,836.10	\$ 615,706.10
Drilling	Information / Communication (Rigsite)	\$ 9,500.00	\$ 625,206.10
Drilling	Drilling Fluids (Materials)	\$ 12,127.70	\$ 637,333.80
Drilling	Directional Drilling & Motors	\$ 105,062.50	\$ 742,396.30
Drilling	Cementing Services	\$ 91,021.20	\$ 833,417.50
Drilling	Cementing / Casing Accessories	\$ 12,557.17	\$ 845,974.67
Drilling	Mud Logging Services	\$ 10,800.00	\$ 856,774.67
Drilling	Drilling Tools & Equip Rental w/o Oper	\$ 10,762.50	\$ 867,537.17
Drilling	Drilling / Compl Surface Equip Rental w/o Oper	\$ 7,242.20	\$ 874,779.37
Drilling	Bits & Mills	\$ 28,700.00	\$ 903,479.37
Drilling	Pipe Handling Services	\$ 21,598.65	\$ 925,078.02
Drilling	Other - Specialized Services (H2S)	\$ 1,200.00	\$ 926,278.02
Drilling	Welding	\$ 12,200.00	\$ 938,478.02
Drilling	Equipment Delivery	\$ 7,658.00	\$ 946,136.02
Drilling	MWD	\$ 5,924.50	\$ 952,060.52
Drilling	Other - Specialized Services Inspections	\$ 6,310.00	\$ 958,370.52
Drilling	Trucking & Ground Transport. Services Disposal	\$ 106,678.70	\$ 1,065,049.22
Drilling	BOP High Pressure Testing	\$ 2,900.00	\$ 1,067,949.22
Drilling	Wellsite Contract Labor	\$ 47,296.00	\$ 1,115,245.22
Drilling	Trailer Rentals, Sanitary, Trash Trailer	\$ 29,560.00	\$ 1,144,805.22
Drilling	Slickline Services	\$ 4,300.00	\$ 1,149,105.22
Drilling	Permits, Fees, Surface Damages, Road Bore	\$ 85,000.00	\$ 1,234,105.22
Completions	Toe Opening	\$ 6,400.00	\$ 1,240,505.22
Completions	Frac Stack	\$ 21,000.00	\$ 1,261,505.22
Completions	Stimulation	\$ 1,111,944.57	\$ 2,373,449.78
Completions	SCALEGUARD	\$ 54,660.00	\$ 2,428,109.78
Completions	LQ Scale Inhibitor	\$ 36,620.00	\$ 2,464,729.78
Completions	Water	\$ 80,000.00	\$ 2,544,729.78
Completions	Water Transfer	\$ 62,500.00	\$ 2,607,229.78
Completions	Chlorine Dioxide	\$ 7,800.00	\$ 2,615,029.78
Completions	Elime Services	\$ 92,000.00	\$ 2,707,029.78
Completions	Supervision	\$ 46,500.00	\$ 2,753,529.78
Completions	Frac tanks	\$ 9,050.00	\$ 2,762,579.78
Completions	Trash/Lights/Facilities	\$ 7,500.00	\$ 2,770,079.78
Completions	Forklift/Manlift	\$ 5,550.00	\$ 2,775,629.78
Completions	Pulling Unit	\$ 34,000.00	\$ 2,809,629.78
Completions	Anchors	\$ 1,200.00	\$ 2,810,829.78
Completions	Flowback	\$ 35,000.00	\$ 2,845,829.78
Completions	Reverse Unit	\$ 43,500.00	\$ 2,889,329.78
Completions	Racks PU/LD	\$ 18,000.00	\$ 2,907,329.78
Completions	Drill Out Workstring	\$ 12,000.00	\$ 2,919,329.78
Completions	Bit	\$ 6,500.00	\$ 2,925,829.78
Completions	BOP	\$ 6,000.00	\$ 2,931,829.78
Completions	TBG	\$ 28,600.00	\$ 2,960,429.78
Completions	ESP/VSD/ Install	\$ 110,000.00	\$ 3,070,429.78
Completions	TBG Hanger	\$ 2,500.00	\$ 3,072,929.78
Facilities	Oil Tanks (500)	\$ 20,000.00	\$ 3,092,929.78
Facilities	Tank Install	\$ 6,000.00	\$ 3,098,929.78
Facilities	Heater Treater/ FWKO	\$ 25,000.00	\$ 3,123,929.78
Facilities	Flare	\$ 6,400.00	\$ 3,130,329.78
Facilities	Gas Meter	\$ 2,000.00	\$ 3,132,329.78
Facilities	Water tank 500 BBL	\$ 10,000.00	\$ 3,142,329.78
Facilities	Transport Facility	\$ 10,000.00	\$ 3,152,329.78
Facilities	Poly Pipe	\$ 138,720.00	\$ 3,291,049.78
Facilities	Valves, connections, and piping in facility	\$ 37,500.00	\$ 3,328,549.78
Facilities	Birms/ Dirtwork/ Liner	\$ 16,500.00	\$ 3,345,049.78
Facilities	Routabout Fee	\$ 30,200.00	\$ 3,375,249.78
Facilities	SCADA/ Electric	\$ 105,000.00	\$ 3,480,249.78
Facilities	Transfer Pump	\$ 14,570.00	\$ 3,494,819.78

Total Estimated Drilling Cost \$ 1,234,105.22
Total Estimated Completions Cost \$ 1,838,824.57
Total Estimated Facilities Cost \$ 421,890.00
Total Estimated Well Cost \$ 3,494,819.78

Approvals:

Special Energy Corporation

By: 
Gary Bond

Title: Vice President

Date: MARCH 30 2018

Working Interest Owner

By:

WI Percentage:

Date:

OCD Case No. 16079

LLANO ENERGY, LLC

Exhibit #7

PLEASE NOTE: THE ABOVE COSTS ARE ESTIMATES AND THE ACTUAL COST MAY VARY.

BY EXECUTION ABOVE, PARTICIPANT COMMITS TO PAY ITS PROPORTIONATE SHARE OF ACTUAL COSTS INCURRED.

Type Log
 Trinity #1
 766' FSL & 554' FWL
 Sec 28 T12S R38E

T/San Andres

San Andres Target

