

# **OIL CONSERVATION DIVISION**

**THURSDAY, AUGUST 5, 2021**

**Colgate Operating, LLC**

**OCD Cases 22085-22086**

**Cases are being presented by Affidavit**

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**Exhibit B Affidavit of Segerio Ojeda with attached exhibits**

**Exhibit C Affidavit of Ernest L. Padilla with attached exhibits**

**Compulsory pooling checklist for OCD Case 22085**

**Compulsory pooling checklist for OCD Case 22086**

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## **Exhibit A**

Affidavit of  
Mark Hadjik

OCD Case 22085  
(Klondike wells)  
Colgate Operating, LLC

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

**APPLICATION OF COLGATE OPERATING, LLC  
FOR COMPULSORY POOLING IN  
EDDY COUNTY, NEW MEXICO**

**CASE NO. 22085**

**APPLICATION OF COLGATE OPERATING, LLC  
FOR COMPULSORY POOLING IN  
EDDY COUNTY, NEW MEXICO**

**CASE NO. 22086**

**AFFIDAVIT**

**STATE OF TEXAS            )**  
  **) ss.**  
**COUNTY OF MIDLAND    )**

Mark Hajdik, being duly sworn, deposes and states:

1. I am over the age of 18, I am a Petroleum Landman for Colgate Operating. LLC, and have personal knowledge of the matters stated herein. I have previously testified before the Oil Conservation Division ("Division") and my credentials as an expert petroleum landman are a matter of record with the Division.

2. My area of responsibility of Colgate Operating. LLC includes the area of Eddy County in New Mexico.

3. I am familiar with the applications filed with by Colgate Operating. LLC.

4. I am familiar with the status of the lands that are subject to these applications.

5. I submit the following information pursuant to NMAC 19.15.4.12.A(1) in support of the above referenced compulsory pooling applications.

6. In Case 22085 Applicant seeks an order pooling all mineral interests within the West Winchester Bone Spring (Pool Code 97569), underlying the S/2 of Section 9, Township 19 South, Range 28 East, NMPM, Eddy County, New Mexico, on the following wells listed below.

**Klondike 9 State Com 123H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Klondike 9 State Com 124H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit M of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Klondike 9 State Com 133H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

**Klondike 9 State Com 134H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit M of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

Attached hereto as **Exhibits 1, 2, 3, and 4** are copies of the C-102s for the foregoing wells, together with associated mapping.

7. In **Case 22086** Applicant seeks an order pooling all mineral interests within the West Winchester Bone Spring (Pool Code 97569), underlying the N/2 of Section 9, Township 19 South, Range 28 East, NMPM, Eddy County, New Mexico, on the following wells listed below.

**Madera 9 State Com 121H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit D of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Madera 9 State Com 122H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit D of

Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Madera 9 State Com 131H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L1 of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

**Madera 9 State Com 132H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit E Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

Attached hereto as **Exhibits 5, 6, 7, and 8** are copies of the C-102s for the foregoing wells, together with associated mapping.

7. The parties being pooled and the percent of their interests are shown in **Exhibits 9 and 10** for the respective cases. The owners of overriding royalty interests are also identified in Exhibits 9 and 10.

8. Colgate Operating LLC have conducted a diligent search of the public records in the county where the wells are located and conducted phone directory and computer searches to locate contact information for parties entitled to notification, and mailed all parties well proposals. A copy of Communication Timeline is attached hereto as **Exhibit 12** for both cases.

9. In my opinion, Colgate Operating. LLC has made a good faith effort to obtain voluntary joinder of the working interest owners in the proposed wells.

10. **Exhibits 13 and 14** are copies of proposal letters sent to working interest owners, which were sent in March 2021, for the proposed wells in both cases together with AFEs.

11. The proposal letters identified the proposed first and last take points and approximate TVD.

12. **Exhibit 15** contains updated and reduced Authorizations for Expenditure for the proposed wells. The estimated cost of the wells set forth therein is fair and reasonable and is comparable to the costs of other wells of similar depths and length drilled in this area of New Mexico. Colgate Operating, LLC requests overhead and administrative rates of \$8,000.00/month for drilling a well and \$800.00/month for a producing well. These rates are fair, and comparable to the rates charged by other operators for wells of this type in this area of Southeastern, New Mexico. Colgate Operating, LLC requests that these rates be adjusted periodically as provided in the COPAS Accounting Procedure.

13. Colgate Operating, LLC requests the maximum cost plus 200% risk charge be assessed against non-consenting working interest owners.

14. Colgate Operating, LLC requests that it be designated operator of the wells.

15. The granting of this application is in the interests of conservation and the prevention of waste.

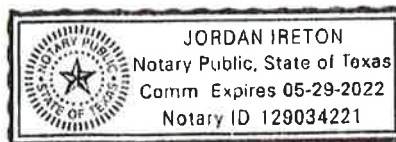
  
\_\_\_\_\_  
MARK HADJIK

SUBSCRIBED AND SWORN to before me this 2nd day of August, 2021,  
by MARK HADJIK on behalf of Colgate Operating, LLC.

  
\_\_\_\_\_  
Notary Public

My Commission Expires:

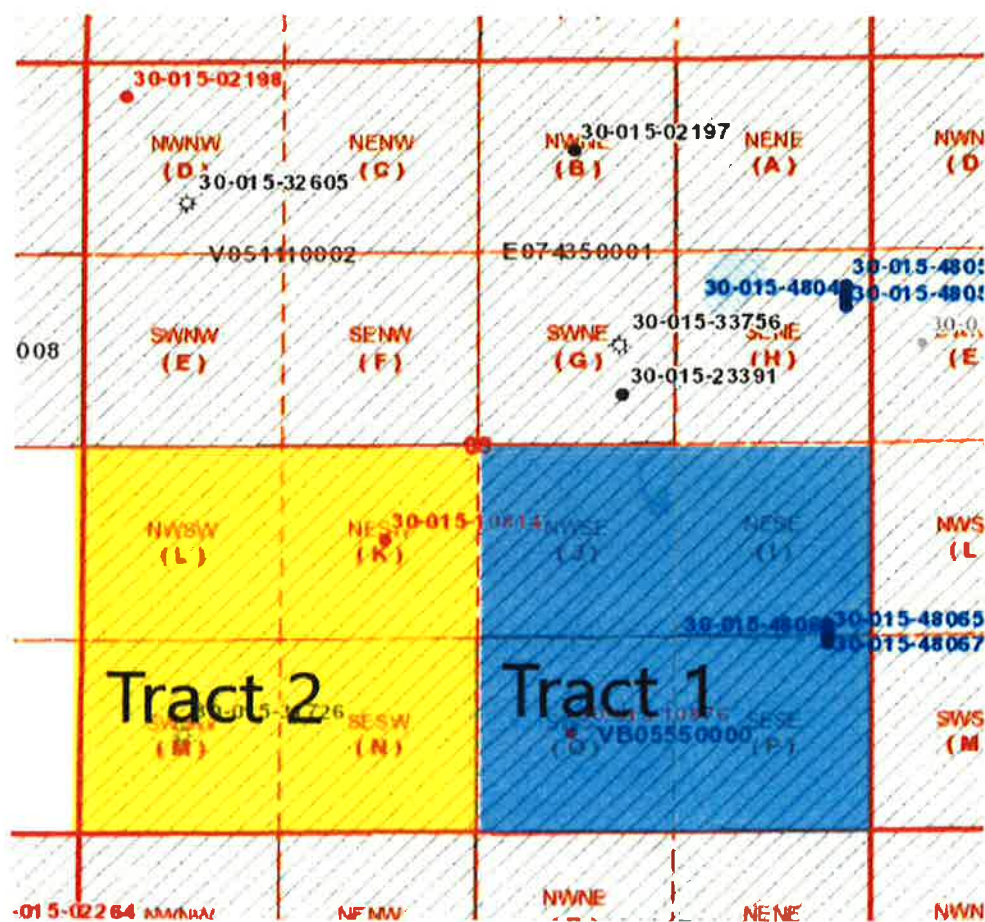
5/29/2022



W/OWNER	TRACT	NET	WI	FORCE POOL INTEREST
Colgate Production, LLC	1, 2	130.799	40.87%	Operator
CM Resources, LLC (Northern Oil and Gas)	2	49.4028	15.44%	Executed JOA
Oxy USA WTP, LP	1, 2	86.5901	27.06%	Yes
Slash Exploration, LP	1	2.5	0.78%	Yes
Harvard Petroleum Company, LLC	1	2.5	0.78%	Yes
Read & Stevens, Inc.	1	0.62496	0.20%	Yes
Anne S. Johnson	1	0.20832	0.07%	Yes
Roy G. Barton, Jr., Trustee of the Roy G. Barton, Sr., and Opal Barton Trust u/t/a dated 1/28/1982	1	0.62496	0.20%	Yes
COG Operating	2	19.2778	6.02%	Yes
ZPZ Delaware I LLC	2	15	4.69%	Yes
D2 Resources, LLC	2	3.43889	1.07%	Yes
Solis Energy, LLC	2	3.43889	1.07%	Yes
WPX Energy Permian, LLC	2	3.19444	1.00%	Yes
Penroc Oil Corp	2	2.4	0.75%	Yes

NMSLO Record Title
MRC DELAWARE RESOURCES, LLC
WPX ENERGY PERMIAN, LLC.





Ex.9-006



### Communication Timeline

**March, 2021** – Revised proposals sent for Klondike 9 State Com wells

**January - Present, 2021** – Ongoing discussions of trade proposals and other deal structures to acquire Oxy's interest and Concho's interest in separate discussions

**Various Dates** – Discussed offers to acquire small interest owners in section, most did not respond to offers

**August - Present, 2020** – Finalizing plans to acquire Devon's interest

**March, June, July, 2021** – Kept Slash Energy apprised of revised plans and potential participation from them

**June 2021** – CM Resources, LLC executed JOA covering these wells

**August 3, 2021** – As of this date a number of the parties have not reached final resolution with participation nor have the deals to acquire finalized



Via Certified Mail

March 5, 2021

Oxy USA WTP, LP  
5 Greenway Plaza  
Suite 110  
Houston, Texas 77046

RE: Klondike 9 State Com Well Proposals  
S/2 of Sec. 9, T19S-28E, Bone Spring Formation  
Eddy County, New Mexico

To whom it may concern:

Colgate Production, LLC ("Colgate"), hereby proposes the drilling of four (4) wells, the Klondike 9 State Com 123H, 124H, 133H, and 134H at the following approximate locations:

Klondike 9 State Com 123H

SHL: To be located at a legal location in Units I/P of Section 9-19S-28E

BHL: To be located at a legal location in Unit L Section 9-19S-28E

TVD: 7,000'

TMD: Approximately 12,080'

Targeted Interval: 2<sup>nd</sup> Bone Spring

Total Cost: See attached AFE

Klondike 9 State Com 124H

SHL: To be located at a legal location in Units I/P of Section 9-19S-28E

BHL: To be located at a legal location in Unit M of Section 9-19S-28E

TVD: 7,000'

TMD: Approximately 12,080'

Targeted Interval: 2<sup>nd</sup> Bone Spring

Total Cost: See attached AFE

Klondike 9 State Com 133H

SHL: To be located at a legal location in Units I/P of Section 9-19S-28E

BHL: To be located at a legal location in Unit L of Section 9-19S-28E

TVD: 8,150'

TMD: Approximately 13,230'

Targeted Interval: 3<sup>rd</sup> Bone Spring

Total Cost: See attached AFE

Klondike 9 State Com 134H

SHL: To be located at a legal location in Units I/P of Section 9-19S-28E

BHL: To be located at a legal location in Unit M of Section 9-19S-28E

TVD: 8,150'

TMD: Approximately 13,230'

Targeted Interval: 3<sup>rd</sup> Bone Spring

Total Cost: See attached AFE

Ex.13-008

The locations, TVD's, and targets are approximate and subject to change depending on surface or subsurface issues encountered. Colgate is proposing to drill these wells under the modified terms of the 1989 AAPL Operating Agreement and a form of said Operating Agreement will be forwarded to you following your receipt of your election to participate. The Operating Agreement will have the following general provisions:

- 100%/200%/200% non-consent provisions
- \$8,000/\$800 drilling and producing rates
- Colgate Operating, LLC named as Operator

Please indicate your election to participate in the drilling and completion of the proposed wells in the space provided below. Please sign and return one copy of this letter, a signed copy of the previously proposed AFE, and your geologic well requirements.

Colgate will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well, should we not reach an agreement within 30 days of the date of this letter. If you do not wish to participate Colgate would be interested in acquiring your interest in the subject lands.

If you have any questions regarding this matter, please give me a call at 432-257-3886 or via email at [mhajdik@colgateenergy.com](mailto:mhajdik@colgateenergy.com).

Sincerely,



Mark Hajdik  
Senior Landman

Colgate Energy  
300 N. Marienfeld St.  
Suite 1000  
Midland, TX 79701

Enclosures

Ex.13-009

Well Elections

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\_\_\_\_\_ I/We hereby elect to participate in the Klondike 9 State Com 123H.  
\_\_\_\_\_ I/We hereby elect NOT to participate in the Klondike 9 State Com 123H.

\_\_\_\_\_ I/We hereby elect to participate in the Klondike 9 State Com 124H.  
\_\_\_\_\_ I/We hereby elect NOT to participate in the Klondike 9 State Com 124H.

\_\_\_\_\_ I/We hereby elect to participate in the Klondike 9 State Com 133H.  
\_\_\_\_\_ I/We hereby elect NOT to participate in the Klondike 9 State Com 133H.

\_\_\_\_\_ I/We hereby elect to participate in the Klondike 9 State Com 134H.  
\_\_\_\_\_ I/We hereby elect NOT to participate in the Klondike 9 State Com 134H.

Working Interest Owner: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Ex.13-010

## Colgate Energy

303 W. Wall St., Midland TX 79701

Phone (432) 695-4257 • Fax (432) 695-4063

## ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

DATE:	3/5/2021	AFE NO.:	0
WELL NAME:	Klondike State 9 Com 123H	FIELD:	Palmito; Bone Spring
LOCATION:	Parkway	MD/TVD:	12080 / 7000
COUNTY/STATE:	Eddy	LATERAL LENGTH:	5,080
Colgate WI:	0.00%	DRILLING DAYS:	17.25
GEOLOGIC TARGET:	2nd Bone Spring	COMPLETION DAYS:	11

REMARKS: Drill and Complete 30 stages in the 2nd Bone Spring formation. AFE includes D&amp;C, flowback &amp; initial ESP install.

INTANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
1 Land / Legal / Regulatory	\$ 35,000	\$	\$	\$ 35,000
2 Location, Surveys & Damages	150,000	15,000	10,000	175,000
4 Freight / Transportation	55,500	33,250		88,750
5 Rental - Surface Equipment	17,511	111,100	4,600	163,254
6 Rental - Downhole Equipment	68,799	10,000		108,799
7 Rental - Living Quarters	31,707	10,100	3,000	77,007
10 Directional Drilling, Surveys	161,900			161,900
11 Drilling	217,959			217,959
12 Drill Bits	81,000			81,000
13 Fuel & Power	56,149	185,000		161,149
14 Cementing & Float Equip	155,000			155,000
16 Perforating, Wireline, Slickline		133,250	8,000	141,250
17 High Pressure Pump Truck		10,000		10,000
18 Completion Unit, Swab, CTU		60,000	12,000	72,000
20 Mud Circulation System	72,290			72,290
21 Mud Logging	16,685			16,685
22 Logging / Formation Evaluation	1,216	8,000		12,216
23 Mud & Chemicals	74,996	152,000		226,996
24 Water	27,898	261,296		289,194
25 Simulation		360,000		360,000
26 Simulation Flowback & Disposal		81,000		81,000
28 Mud / Wastewater Disposal	96,938	68,000		164,938
30 Rig Supervision / Engineering	80,768	57,200	9,800	147,768
32 Drig & Completion Overhead	6,469			6,469
35 Labor	108,500	23,000	10,000	141,500
34 Proppant		213,868		213,868
36 Insurance	23,128			23,128
37 Contingency	88,721	81,018	5,968	178,707
39 Plugging & Abandonment				
TOTAL INTANGIBLES >	1,863,135	1,857,382	65,648	3,786,166
TANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
30 Surface Casing	\$ 9,590	\$	\$	\$ 9,590
61 Intermediate Casing	69,726			69,726
62 Drilling Liner				
63 Production Casing	168,961			168,961
64 Production Liner				
65 Tubing			30,911	30,911
66 Wellhead	61,000		18,900	81,200
67 Packers, Liner Hangers	22,000		3,400	25,400
68 Tanks				
69 Production Vessels				
70 Flow Lines				
71 Rod string				
72 Artificial Lift Equipment			80,000	80,000
73 Compressor				
74 Installation Costs			35,000	35,000
75 Surface Pumps			5,000	5,000
76 Downhole Pumps			4,950	4,950
77 Measurement & Meter Installation				
78 Gas Conditioning / Dehydration				
79 Interconnecting Facility Piping				
80 Gathering / Bulk Lines				
81 Valves, Dumps, Controllers				
82 Tank / Facility Containment				
83 Haze Stack				
84 Electrical / Grounding			60,000	60,000
85 Communications / SCADA				
86 Instrumentation / Safety				
TOTAL TANGIBLES >	334,280	0	260,261	602,540
TOTAL COSTS >	2,197,415	1,857,382	333,909	4,388,706

## PREPARED BY Colgate Energy:

Drilling Engineer:	Steven Sigrist	CRM
Completions Engineer:	Brady Adams	
Production Engineer:	Steven Harris	

## Colgate Energy APPROVAL:

Co-CFO	WH	Co-CFO	JW	VP - Operations	CRM
VP - Land & Legal	HR	VP - Geosciences	SO		

## NON OPERATING PARTNER APPROVAL:

Company Name:	Working Interest (%):	Tax ID:
Signed by:	Date:	
Title:	Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No (mark one)	

The costs on this AFE are estimates only and may not be submitted to a drilling or completion permit or the full cost of the project. Taking into account the approval of the AFE by the relevant regulatory agency, the AFE is not intended to be used for the purpose of obtaining a permit or the full cost of the project. The AFE is not intended to be used for the purpose of obtaining a permit or the full cost of the project. The AFE is not intended to be used for the purpose of obtaining a permit or the full cost of the project.

## Colgate Energy

303 W. Wall St., Midland TX 79701  
Phone (432) 695-4257 • Fax (432) 695-4063

## ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

DATE:	3/5/2021	AFS NO.:	0
WELL NAME:	Klondike 9 State Com 124H	FIELD:	Paimillo; Bone Spring
LOCATION:	Parkway	MD/TVD:	12080 / 7000
COUNTY/STATE:	Eddy	LATERAL LENGTH:	5,080
Colgate WT:	0.00%	DRILLING DAYS:	17.25
GEOLOGIC TARGET:	2nd Bone Spring	COMPLETION DAYS:	11

REMARKS: Drill and Complete 30 stages in the 2nd Bone Spring formation. AFE includes DMG, flowback &amp; initial ESP install.

INTANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
1 Land / Legal / Regulatory	\$ 35,000	\$ -	\$ -	\$ 35,000
2 Location, Surveys & Damages	150,000	1,000	10,000	177,000
4 Freight / Transportation	55,300	33,250	-	88,550
5 Rental - Surface Equipment	17,514	111,100	1,610	163,251
6 Rental - Downhole Equipment	68,799	80,000	-	108,799
7 Rental - Living Quarters	31,707	80,100	5,200	77,007
10 Directional Drilling, Surveys	164,900	-	-	164,900
11 Drilling	417,959	-	-	417,959
12 Drill Bits	81,000	-	-	81,000
13 Fuel & Power	56,149	105,000	-	161,149
14 Cementing & Float Equip	155,000	-	-	155,000
16 Perforating, Wireline, Slickline	-	133,250	8,000	141,250
17 High Pressure Pump Truck	-	10,000	-	10,000
18 Completion Unit, Swab, CTU	-	40,000	12,000	72,000
20 Mud Circulation System	72,200	-	-	72,200
21 Mud Logging	16,585	-	-	16,585
22 Logging / Formation Evaluation	1,216	8,000	-	12,216
23 Mud & Chemicals	74,396	152,000	-	226,396
24 Water	27,898	263,296	-	291,194
25 Stimulation	-	360,000	-	360,000
26 Stimulation Flowback & Disposal	-	84,000	-	84,000
28 Mud / Wastewater Disposal	96,938	68,000	-	164,938
30 Rig Supervision / Engineering	80,368	37,700	9,800	147,168
32 Drilling & Completion Overhead	6,499	-	-	6,499
35 Labor	108,200	2,000	10,000	111,300
54 Proppant	-	213,868	-	213,868
95 Insurance	23,128	-	-	23,128
97 Contingency	88,721	81,018	5,968	178,707
99 Plugging & Abandonment	-	-	-	-
TOTAL INTANGIBLES >	1,863,136	1,857,382	65,648	3,786,166

TANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
60 Surface Casing	\$ 9,500	\$ -	\$ -	\$ 9,500
61 Intermediate Casing	69,726	-	-	69,726
62 Drilling Liner	-	-	-	-
63 Production Casing	168,961	-	-	168,961
64 Production Liner	-	-	-	-
65 Tubing	-	-	30,911	30,911
66 Wellhead	61,000	-	48,900	112,900
67 Packers, Liner Hangers	22,000	-	3,500	25,500
68 Tanks	-	-	-	-
69 Production Vessels	-	-	-	-
70 Flow Lines	-	-	-	-
71 Run string	-	-	-	-
72 Artificial Lift Equipment	-	-	80,000	80,000
73 Compressor	-	-	-	-
74 Installation Costs	-	-	35,000	35,000
75 Surface Pumps	-	-	5,000	5,000
76 Downhole Pumps	-	-	1,950	1,950
77 Measurement & Meter Installation	-	-	-	-
78 Gas Conditioning / Dehydration	-	-	-	-
79 Interconnecting Facility Piping	-	-	-	-
80 Gathering / Bulk Lines	-	-	-	-
81 Valves, Dumps, Controllers	-	-	-	-
82 Tank / Facility Containment	-	-	-	-
83 Flare Stack	-	-	-	-
84 Electrical / Grounding	-	-	60,000	60,000
85 Communications / SCADA	-	-	-	-
86 Instrumentation / Safety	-	-	-	-
TOTAL TANGIBLES >	334,286	0	268,261	602,547
TOTAL COSTS >	2,197,415	1,857,382	333,909	4,388,706

**PREPARED BY Colgate Energy:**

Drilling Engineer:	Steven Segrest	
Completions Engineer:	Bobby Adams	CRM
Production Engineer:	Leon Flanniss	

**Colgate Energy APPROVAL:**

Co-CEO	WH	Co-CEO	JW	VP - Operations	CRM
VP - Land & Legal	RG	VP - Geosciences	SO		

**NON OPERATING PARTNER APPROVAL:**

Company Name: \_\_\_\_\_ Working Interest (%) \_\_\_\_\_ Tax ID: \_\_\_\_\_  
Signed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Title: \_\_\_\_\_ Approval ☐ Yes ☐ No (mark one)

[illegible]

## Colgate Energy

303 W. Wall St., Midland TX 79701  
Phone (432) 695-4257 • Fax (432) 695-4063

## ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

DATE:	3/5/2021	AFE NO.:	0
WELL NAME:	Klondike 9 State Corn 133H	FIELD:	Palmillo, Bone Spring
LOCATION:	Parkway	MD/TY:	13,230 / 8,150
COUNTY/STATE:	Eddy	LATERAL LENGTH:	5,080
Calgae Wt:	0.00%	DRILLING DAYS:	19.1
GEOLOGIC TARGET:	3rd Bone Spring	COMPLETION DAYS:	11

REMARKS: Drill and Complete 30 stages in the 3rd Bone Spring formation, AFE includes D&C, flowback & initial ESP install.

INTANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
1 Land / Legal / Regulatory	\$ 55,000	\$ -	\$ -	\$ 55,000
2 Location, Surveys & Damages	150,000	13,000	10,000	173,000
4 Freight / Transportation	35,300	33,250	-	68,550
5 Rental - Surface Equipment	52,090	111,100	4,600	167,830
6 Rental - Downhole Equipment	68,799	100,000	-	168,799
7 Rental - Living Quarters	33,817	40,100	5,400	79,127
10 Directional Drilling, Surveys	187,950	-	-	187,950
11 Drilling	419,914	-	-	419,914
12 Drill Bits	91,300	-	-	91,300
13 Fuel & Power	62,171	105,000	-	167,171
14 Cementing & Float Equip	155,000	-	-	155,000
16 Perforating, Wireline, Slickline	-	131,250	8,000	141,250
17 High Pressure Pump Truck	-	10,000	-	10,000
18 Completion Unit, Swab, CTU	-	60,000	12,000	72,000
20 Mud Circulation Systems	78,284	-	-	78,284
21 Mud Logging	18,209	-	-	18,209
22 Logging / Formation Evaluation	5,171	8,000	-	13,171
23 Mud & Chemicals	81,236	152,000	-	233,236
24 Water	28,061	270,000	-	307,945
25 Stimulation	-	350,000	-	350,000
26 Stimulation Flowback & Dump	-	81,000	-	81,000
28 Mud / Wastewater Disposal	96,938	68,000	-	164,938
30 Rig Supervision / Engineering	88,367	37,200	9,800	135,367
32 Uteg & Completion Overhead	7,163	-	-	7,163
35 Labor	108,300	23,000	10,000	141,300
54 Proppant	-	240,602	-	240,602
95 Insurance	25,306	-	-	25,306
97 Contingency	93,997	86,209	3,908	186,211
99 Plugging & Abandonment	-	-	-	-
<b>TOTAL INTANGIBLES &gt;</b>	<b>1,973,934</b>	<b>1,904,655</b>	<b>65,648</b>	<b>3,944,237</b>

	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
<b>TANGIBLE COSTS</b>				
60 Surface Casing	\$ 9,900	\$ -	\$ -	\$ 9,900
61 Intermediate Casing	69,736	-	-	69,736
62 Drilling Liner	-	-	-	-
63 Production Casing	184,876	-	-	184,876
64 Production Liner	-	-	-	-
65 Tubing	-	-	36,356	36,356
66 Wellhead	61,000	-	46,900	112,900
67 Packers, Liner Hangers	27,000	-	5,000	32,000
68 Tanks	-	-	-	-
69 Production Vessels	-	-	-	-
70 Flow Lines	-	-	-	-
71 Rod string	-	-	-	-
72 Artificial Lift Equipment	-	-	80,000	80,000
73 Compressor	-	-	-	-
74 Installation Costs	-	-	35,000	35,000
75 Surface Pumps	-	-	5,000	5,000
76 Downhole Pumps	-	-	4,950	4,950
77 Measurement & Meter Installation	-	-	-	-
78 Gas Conditioning/ Dehydration	-	-	-	-
79 Interconnecting Facility Piping	-	-	-	-
80 Gathering/ Bulk Lines	-	-	-	-
81 Valves, Dumps, Controllers	-	-	-	-
82 Tank/ Facility Containment	-	-	-	-
83 Flare Stack	-	-	-	-
84 Electrical/ Grounding	-	-	60,000	60,000
85 Communications/ SCADA	-	-	-	-
86 Instrumentation/ Safety	-	-	-	-
<b>TOTAL TANGIBLES &gt;</b>	<b>350,191</b>	<b>0</b>	<b>273,706</b>	<b>623,897</b>
<b>TOTAL COSTS &gt;</b>	<b>2,324,125</b>	<b>1,904,655</b>	<b>339,354</b>	<b>4,568,134</b>

**PREPARED BY** Colgate Energy:

Drilling Engineer:	Steven Segrest	
Completions Engineer:	Brady Adams	CRM
Production Engineer:	Leon Harris	

**Colgate Energy APPROVAL:**

On CEO WH  
VP - Land & Legal BG

Co-CEO JW  
VP - Geosciences SO

VP - Operations CRM

**NON OPERATING PARTNER APPROVAL:**

Company Name: \_\_\_\_\_ Working Interest (%): \_\_\_\_\_ Tax ID: \_\_\_\_\_  
Signed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Title: \_\_\_\_\_ Approval: ☐ Yes ☐ No (mark one)

[illegible]



## Colgate Energy

303 W. Wall St., Midland TX 79701  
Phone (432) 695-4257 • Fax (432) 695-4063

## ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

ESTIMATE OF COSTS AND AMORTIZATION FOR EXPENDITURE			
DATE:	3/5/2021	AFE NO.:	0
WELL NAME:	Klondike 9 State Com 134H	FIELD:	Palmilla, Bone Spring
LOCATION:	Parkway	MD/TVD:	13,230 / 8,150
COUNTY/STATE:	Eddy	LATERAL LENGTH:	5,080
Oil/gate WT:	0.00%	DRILLING DAYS:	19.1
GEOLOGIC TARGET:	3rd Bone Spring	COMPLETION DAYS:	11

REMARKS: Drill and Complete 30 stages in the 3rd Bone Spring formation. AFE includes D&C, flowback & initial ESP install.

INTANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
1 Land / Legal / Regulatory	\$ 55,000	\$ 13,000	\$ -	\$ 68,000
2 Location, Surveys & Damages	150,000	13,000	10,000	173,000
4 Freight / Transportation	55,500	33,250	-	88,750
5 Rental - Surface Equipment	521,980	111,300	4,600	167,830
6 Rental - Downhole Equipment	58,799	10,000	-	108,799
7 Rental - Living Quarters	33,827	40,100	5,200	79,127
10 Directional Drilling, Surveys	187,950	-	-	187,950
11 Drilling	449,911	-	-	449,911
12 Drill Bits	91,200	-	-	91,200
13 Fuel & Power	62,171	105,000	-	167,171
14 Cementing & Final Equip	155,000	-	-	155,000
16 Perforating, Wireline, Slickline	-	133,250	8,000	141,250
17 High Pressure Pump Truck	-	10,000	-	10,000
18 Completion Unit, Swab, CTU	-	60,000	12,000	72,000
20 Mud Circulation System	78,284	-	-	78,284
21 Mud Logging	18,239	-	-	18,239
22 Logging / Formation Evaluation	5,174	8,000	-	13,174
23 Mud & Chemicals	81,238	152,000	-	233,238
24 Water	28,861	279,884	-	308,745
25 Stimulation	-	360,000	-	360,000
26 Stimulation Flowback & Cleanup	-	81,000	-	81,000
28 Mud / Wastewater Disposal	96,938	68,000	-	164,938
30 Rig Supervision / Engineering	88,987	57,300	9,800	156,087
32 Drilling & Completion Overhead	7,163	-	-	7,163
35 Labor	108,500	25,000	10,000	143,500
54 Proppant	-	210,602	-	210,602
96 Insurance	25,306	-	-	25,306
97 Contingency	93,997	86,359	5,968	186,314
99 Plugging & Abandonment	-	-	-	-
TOTAL INTANGIBLES >	1,973,934	1,904,655	65,648	3,944,237

TANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
60 Surface Casing	\$ 9,500	\$ -	\$ -	\$ 9,500
61 Intermediate Casing	69,726	-	-	69,726
62 Drilling Liner	-	-	-	-
63 Production Casing	184,876	-	-	184,876
64 Production Liner	-	-	-	-
65 Tubing	-	-	36,356	36,356
66 Wellhead	64,000	-	48,900	112,900
67 Packers, Liner Hangers	22,000	-	3,500	25,500
68 Tanks	-	-	-	-
69 Production Vessels	-	-	-	-
70 Flow Lines	-	-	-	-
71 Rod string	-	-	-	-
72 Artificial Lift Equipment	-	-	80,000	80,000
73 Compressor	-	-	-	-
74 Installation Costs	-	-	35,000	35,000
75 Surface Pumps	-	-	5,000	5,000
76 Downhole Pumps	-	-	4,950	4,950
77 Measurement & Meter Installation	-	-	-	-
78 Gas Conditioning / Dehydration	-	-	-	-
79 Interconnecting Facility Piping	-	-	-	-
80 Gathering / Bulk Lines	-	-	-	-
81 Valves, Dumps, Controllers	-	-	-	-
82 Tank / Facility Containment	-	-	-	-
83 Flare Stack	-	-	-	-
84 Electrical / Grounding	-	-	60,000	60,000
85 Communications / SCADA	-	-	-	-
86 Instrumentation / Safety	-	-	-	-
TOTAL TANGIBLES >	350,191	0	273,706	623,897
TOTAL COSTS >	2,324,125	1,904,655	339,354	4,568,133

**PREPARED BY Colgate Energy:**

Drilling Engineer:	Steven Segrest	CRM
Completions Engineer:	Brady Adams	
Production Engineer:	Lynn Harris	

**Colgate Energy APPROVAL:**

Co-CEO \_\_\_\_\_ WH  
 VP - Land & Legal \_\_\_\_\_ BG  
 Co-CEO \_\_\_\_\_ JW  
 VP - Grassroots \_\_\_\_\_ SO  
 VP - Operations \_\_\_\_\_ CRM

**NON OPERATING PARTNER APPROVAL:**

Company Name: \_\_\_\_\_ Working Interest (%) \_\_\_\_\_ Tax ID: \_\_\_\_\_  
Signed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Title: \_\_\_\_\_ Approval: ☐ Yes ☐ No (mark one)

The results on the ATT are consistent with and even go beyond the information on the effect size of the study used in the paper. Taking into account the reported results for the ATT, the effect of the program on the well-being has been calculated by assuming that 10% of the population is exposed to the program. This is a reasonable assumption, given that the program is a pilot project and the results are preliminary. The results on the ATT are consistent with and even go beyond the information on the effect size of the study used in the paper. Taking into account the reported results for the ATT, the effect of the program on the well-being has been calculated by assuming that 10% of the population is exposed to the program. This is a reasonable assumption, given that the program is a pilot project and the results are preliminary.

# **Table of Contents**

## **Exhibit A**

Affidavit of  
Mark Hadjik

OCD Case 22086  
(Madera wells)  
Colgate Operating, LLC

	<u>Bate Numbers</u>
1) Exhibit A Affidavit	1-4
2) Exhibits 5 through 8 C-102's	(to be supplemented)
3) Exhibit 10 Pooled parties	15-16
4) Exhibit 12 Communication timeline	17
5) Exhibit 14 Well Proposal letter	18-20
6) Exhibit 15 AFE's	21-24

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

**APPLICATION OF COLGATE OPERATING, LLC  
FOR COMPULSORY POOLING IN  
EDDY COUNTY, NEW MEXICO**

**CASE NO. 22085**

**APPLICATION OF COLGATE OPERATING, LLC  
FOR COMPULSORY POOLING IN  
EDDY COUNTY, NEW MEXICO**

**CASE NO. 22086**

**AFFIDAVIT**

**STATE OF TEXAS            )**  
  **) ss.**  
**COUNTY OF MIDLAND    )**

Mark Hajdik, being duly sworn, deposes and states:

1. I am over the age of 18, I am a Petroleum Landman for Colgate Operating. LLC, and have personal knowledge of the matters stated herein. I have previously testified before the Oil Conservation Division ("Division") and my credentials as an expert petroleum landman are a matter of record with the Division.

2. My area of responsibility of Colgate Operating. LLC includes the area of Eddy County in New Mexico.

3. I am familiar with the applications filed with by Colgate Operating. LLC.

4. I am familiar with the status of the lands that are subject to these applications.

5. I submit the following information pursuant to NMAC 19.15.4.12.A(1) in support of the above referenced compulsory pooling applications.

6. In Case 22085 Applicant seeks an order pooling all mineral interests within the West Winchester Bone Spring (Pool Code 97569), underlying the S/2 of Section 9, Township 19 South, Range 28 East, NMPM, Eddy County, New Mexico, on the following wells listed below.

**Klondike 9 State Com 123H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Klondike 9 State Com 124H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit M of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Klondike 9 State Com 133H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

**Klondike 9 State Com 134H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit M of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

Attached hereto as Exhibits 1, 2, 3, and 4 are copies of the C-102s for the foregoing wells, together with associated mapping.

7. In Case 22086 Applicant seeks an order pooling all mineral interests within the West Winchester Bone Spring (Pool Code 97569), underlying the N/2 of Section 9, Township 19 South, Range 28 East, NMPM, Eddy County, New Mexico, on the following wells listed below.

**Madera 9 State Com 121H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit D of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Madera 9 State Com 122H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit D of

Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Madera 9 State Com 131H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L1 of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

**Madera 9 State Com 132H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit E Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

Attached hereto as **Exhibits 5, 6, 7, and 8** are copies of the C-102s for the foregoing wells, together with associated mapping.

7. The parties being pooled and the percent of their interests are shown in **Exhibits 9 and 10** for the respective cases. The owners of overriding royalty interests are also identified in Exhibits 9 and 10.

8. Colgate Operating LLC have conducted a diligent search of the public records in the county where the wells are located and conducted phone directory and computer searches to locate contact information for parties entitled to notification, and mailed all parties well proposals. A copy of Communication Timeline is attached hereto as **Exhibit 12** for both cases.

9. In my opinion, Colgate Operating. LLC has made a good faith effort to obtain voluntary joinder of the working interest owners in the proposed wells.

10. **Exhibits 13 and 14** are copies of proposal letters sent to working interest owners, which were sent in March 2021, for the proposed wells in both cases together with AFEs.


11. The proposal letters identified the proposed first and last take points and approximate TVD.

12. **Exhibit 15** contains updated and reduced Authorizations for Expenditure for the proposed wells. The estimated cost of the wells set forth therein is fair and reasonable and is comparable to the costs of other wells of similar depths and length drilled in this area of New Mexico. Colgate Operating, LLC requests overhead and administrative rates of \$8,000.00/month for drilling a well and \$800.00/month for a producing well. These rates are fair, and comparable to the rates charged by other operators for wells of this type in this area of Southeastern, New Mexico. Colgate Operating, LLC requests that these rates be adjusted periodically as provided in the COPAS Accounting Procedure.

13. Colgate Operating, LLC requests the maximum cost plus 200% risk charge be assessed against non-consenting working interest owners.

14. Colgate Operating, LLC requests that it be designated operator of the wells.

15. The granting of this application is in the interests of conservation and the prevention of waste.

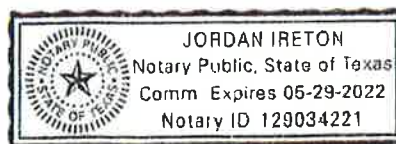
  
\_\_\_\_\_  
MARK HADJIK

SUBSCRIBED AND SWORN to before me this 2<sup>nd</sup> day of August, 2021,  
by MARK HADJIK on behalf of Colgate Operating, LLC.

  
\_\_\_\_\_  
Notary Public

My Commission Expires:

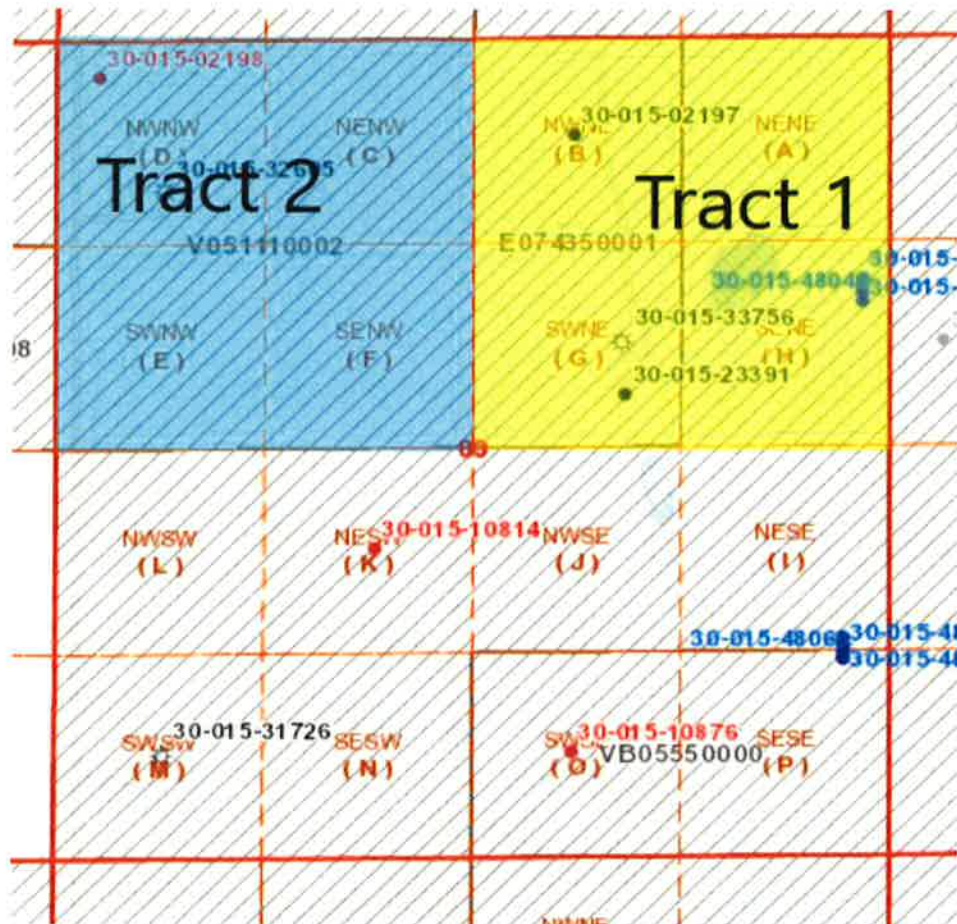
5/29/2022



WI OWNER	TRACT	NET	WI	FORCE POOL INTEREST
Colgate Production, LLC	1, 2	130.799	40.87%	Operator
CM Resources, LLC (Northern Oil and Gas)	2	49.4028	15.44%	Executed JOA
Oxy USA WTP, LP	1, 2	86.5901	27.06%	Yes
Slash Exploration, LP	1	2.5	0.78%	Yes
Harvard Petroleum Company, LLC	1	2.5	0.78%	Yes
Read & Stevens, Inc.	1	0.62496	0.20%	Yes
Anne S. Johnson	1	0.20832	0.07%	Yes
Roy G. Barton, Jr., Trustee of the Roy G. Barton, Sr., and Opal Barton Trust u/t/a dated 1/28/1982	1	0.62496	0.20%	Yes
COG Operating	2	19.2778	6.02%	Yes
ZPZ Delaware I LLC	2	15	4.69%	Yes
D2 Resources, LLC	2	3.43889	1.07%	Yes
Solis Energy, LLC	2	3.43889	1.07%	Yes
WPX Energy Permian, LLC	2	3.19444	1.00%	Yes
Penroc Oil Corp	2	2.4	0.75%	Yes

NMSLO Record Title
Marathon Oil Permian LLC
Occidental Permian LTD
WPX ENERGY PERMIAN, LLC.





### Communication Timeline

**March, 2021** – Revised proposals sent for Madera 9 State Com wells

**January - Present, 2021** – Ongoing discussions of trade proposals and other deal structures to acquire Oxy's interest and Concho's interest in separate discussions

**Various Dates** – Discussed offers to acquire small interest owners in section, most did not respond to offers

**August - Present, 2020** – Finalizing plans to acquire Devon's interest

**March, June, July, 2021** – Kept Slash Energy apprised of revised plans and potential participation from them

**June 2021** – CM Resources, LLC executed JOA covering these wells

**August 3, 2021** – As of this date a number of the parties have not reached final resolution with participation nor have the deals to acquire finalized



OXY Y-1 Company  
5 Greenway Plaza  
Houston, TX 77046

Via Certified Mail  
March 5, 2021

RE: Madera 9 State Com Well Proposals  
N/2 of Sec. 9, T19S-28E, Bone Spring Formation  
Eddy County, New Mexico

To whom it may concern:

Colgate Production, LLC ("Colgate"), hereby proposes the drilling of four (4) wells, the Madera 9 State Com 121H, 122H, 131H, and 132H at the following approximate locations:

Madera 9 State Com 121H

SHL: To be located at a legal location in Units A/H of Section 9-19S-28E

BHL: To be located at a legal location in Unit D Section 9-19S-28E

TVD: ~7,000'

TMD: Approximately 12,080'

Targeted Interval: 2<sup>nd</sup> Bone Spring

Total Cost: See attached AFE

Madera 9 State Com 122H

SHL: To be located at a legal location in Units A/H of Section 9-19S-28E

BHL: To be located at a legal location in Unit E of Section 9-19S-28E

TVD: ~7,000'

TMD: Approximately 12,080'

Targeted Interval: 2<sup>nd</sup> Bone Spring

Total Cost: See attached AFE

Madera 9 State Com 131H

SHL: To be located at a legal location in Units A/H of Section 9-19S-28E

BHL: To be located at a legal location in Unit D of Section 9-19S-28E

TVD: ~8,150'

TMD: Approximately 13,230'

Targeted Interval: 3<sup>rd</sup> Bone Spring

Total Cost: See attached AFE

Madera 9 State Com 132H

SHL: To be located at a legal location in Units A/H of Section 9-19S-28E

BHL: To be located at a legal location in Unit E of Section 9-19S-28E

TVD: ~8,150'

TMD: Approximately 13,230'

Targeted Interval: 3<sup>rd</sup> Bone Spring

Total Cost: See attached AFE

Ex.14-018

The locations, TVD's, and targets are approximate and subject to change depending on surface or subsurface issues encountered. Colgate is proposing to drill these wells under the modified terms of the 1989 AAPL Operating Agreement and a form of said Operating Agreement will be forwarded to you following your receipt of your election to participate. The Operating Agreement will have the following general provisions:

- 100%/200%/200% non-consent provisions
- \$8,000/\$800 drilling and producing rates
- Colgate Operating, LLC named as Operator

Please indicate your election to participate in the drilling and completion of the proposed wells in the space provided below. Please sign and return one copy of this letter, a signed copy of the previously proposed AFE, and your geologic well requirements.

Colgate will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well, should we not reach an agreement within 30 days of the date of this letter. If you do not wish to participate Colgate would be interested in acquiring your interest in the subject lands.

If you have any questions regarding this matter, please give me a call at 432-257-3886 or via email at [mhajdik@colgateenergy.com](mailto:mhajdik@colgateenergy.com).

Sincerely,



Mark Hajdik  
Senior Landman

Colgate Energy  
300 N. Marienfeld St.  
Suite 1000  
Midland, TX 79701

Enclosures

Well Elections

---

\_\_\_\_ I/We hereby elect to participate in the Madera 9 State Com 121H.  
\_\_\_\_ I/We hereby elect NOT to participate in the Madera 9 State Com 121H.

\_\_\_\_ I/We hereby elect to participate in the Madera 9 State Com 122H.  
\_\_\_\_ I/We hereby elect NOT to participate in the Madera 9 State Com 122H.

\_\_\_\_ I/We hereby elect to participate in the Madera 9 State Com 131H.  
\_\_\_\_ I/We hereby elect NOT to participate in the Madera 9 State Com 131H.

\_\_\_\_ I/We hereby elect to participate in the Madera 9 State Com 132H.  
\_\_\_\_ I/We hereby elect NOT to participate in the Madera 9 State Com 132H.

Working Interest Owner: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Ex.14-020

## Colgate Energy

303 W. Wall St., Midland TX 79701  
Phone (432) 695-4257 • Fax (432) 695-4063

## ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

DATE:	3/5/2021	AFE NO.:	0
WELL NAME:	Madera State 9 Com 121H	FIELD:	Palmillo; Bone Spring
LOCATION:	Parkway	MD/TVD:	12080 / 7000
COUNTY/STATE:	Eddy	LATERAL LENGTH:	5,080
Colgate WE:	0.00%	DRILLING DAYS:	17.25
GEOLOGIC TARGET:	2nd Bone Spring	COMPLETION DAYS:	11

REMARKS: Drill and Complete 30 stages in the 2nd Bone Spring formation. AFE includes D&C, flowback & initial ESP install.

	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
<b>INTANGIBLE COSTS</b>				
1 Land / Legal / Regulatory	\$ 35,000	\$ -	\$ -	\$ 35,000
2 Location, Surveys & Damages	150,000	13,000	10,000	173,000
4 Freight / Transportation	35,500	33,250	-	88,750
5 Rental - Surface Equipment	47,514	111,100	4,640	163,254
6 Rental - Downhole Equipment	68,799	40,000	-	108,799
7 Rental - Living Quarters	31,707	40,100	5,200	117,007
10 Directional Drilling, Surveys	164,900	-	-	164,900
11 Drilling	417,959	-	-	417,959
12 Drill Bits	81,000	-	-	81,000
13 Fuel & Power	56,149	105,000	-	161,149
14 Cementing & Float Equip	155,000	-	-	155,000
16 Perforating, Wireline, Slickline	-	133,250	8,000	141,250
17 High Pressure Pump Truck	-	10,000	-	10,000
18 Completion Unit, Swab, CTU	-	60,000	12,040	72,040
20 Mud Circulation System	72,290	-	-	72,290
21 Mud Logging	16,685	-	-	16,685
22 Logging / Formation Evaluation	4,216	8,000	-	12,216
23 Mud & Chemicals	74,396	152,000	-	226,396
24 Water	27,898	261,596	-	289,494
25 Stimulation	-	360,000	-	360,000
26 Stimulation Flowback & Disp	-	84,000	-	84,000
28 Mud / Wastewater Disposal	96,938	68,000	-	164,938
30 Rig Supervision / Engineering	80,368	57,200	9,800	147,368
32 Drig & Completion Overhead	6,469	-	-	6,469
35 Labor	108,500	23,000	10,000	141,500
54 Proppant	-	213,868	-	213,868
95 Insurance	23,128	-	-	23,128
97 Contingency	88,721	84,018	5,968	178,707
99 Plugging & Abandonment	-	-	-	-
<b>TOTAL INTANGIBLES &gt;</b>	<b>1,863,135</b>	<b>1,857,382</b>	<b>65,648</b>	<b>3,786,166</b>
<b>TANGIBLE COSTS</b>				
60 Surface Casing	\$ 9,390	\$ -	\$ -	\$ 9,390
61 Intermediate Casing	69,726	-	-	69,726
62 Drilling Liner	-	-	-	-
63 Production Casing	168,964	-	-	168,964
64 Production Liner	-	-	-	-
65 Tubing	-	-	30,911	30,911
66 Wellhead	64,000	-	48,900	112,900
67 Packers, Liner Hangers	22,000	-	3,500	25,500
68 Tanks	-	-	-	-
69 Production Vessels	-	-	-	-
70 Flow Lines	-	-	-	-
71 Rod string	-	-	-	-
72 Artificial Lift Equipment	-	-	80,000	80,000
73 Compressor	-	-	-	-
74 Installation Costs	-	-	35,000	35,000
75 Surface Pumps	-	-	5,000	5,000
76 Downhole Pumps	-	-	4,950	4,950
77 Measurement & Meter Installation	-	-	-	-
78 Gas Conditioning / Dehydration	-	-	-	-
79 Interconnecting Facility Piping	-	-	-	-
80 Gathering / Bulk Lines	-	-	-	-
81 Valves, Dumps, Controllers	-	-	-	-
82 Tank / Facility Containment	-	-	-	-
83 Flare Stack	-	-	-	-
84 Electrical / Grounding	-	-	60,000	60,000
85 Communications / SCADA	-	-	-	-
86 Instrumentation / Safety	-	-	-	-
<b>TOTAL TANGIBLES &gt;</b>	<b>334,280</b>	<b>0</b>	<b>268,261</b>	<b>602,540</b>
<b>TOTAL COSTS &gt;</b>	<b>2,197,415</b>	<b>1,857,382</b>	<b>333,909</b>	<b>4,388,706</b>

## PREPARED BY Colgate Energy:

Drilling Engineer: Steven Sugrest  
Completions Engineer: Brady Adams  
Production Engineer: Lew Harris

CRM

## Colgate Energy APPROVAL:

Co-CEO	WH	Co-CEO	JW	VP - Operations	CRM
VP - Land & Legal	BG	VP - Geosciences	SO		

## NON OPERATING PARTNER APPROVAL:

Company Name:	Working Interest (%):	Tax ID:
Signed by:	Date:	
Title:	Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No (mark one)	

This AFE is an estimate only and does not constitute an obligation to drill or complete the well. The Operator shall be responsible for obtaining all necessary permits, licenses, and approvals from the appropriate regulatory agencies. The Operator shall be responsible for obtaining all necessary insurance coverage. The Operator shall be responsible for obtaining all necessary permits, licenses, and approvals from the appropriate regulatory agencies. The Operator shall be responsible for obtaining all necessary insurance coverage. The Operator shall be responsible for obtaining all necessary permits, licenses, and approvals from the appropriate regulatory agencies. The Operator shall be responsible for obtaining all necessary insurance coverage.

Ex.15-021

## Colgate Energy

303 W. Wall St., Midland TX 79701  
Phone (432) 695-4257 • Fax (432) 695-4063

## ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

DATE:	3/5/2021	AFE NO.:	0
WELL NAME:	Madera State 9 Com 122H	FIELD:	Palmillo; Bone Spring
LOCATION:	Parkway	MD/TVD:	12080 / 7000
COUNTY/STATE:	Eddy	LATERAL LENGTH:	5,080
Colgate Well:	0.00%	DRILLING DAYS:	17.25
GEOLOGIC TARGET:	2nd Bone Spring	COMPLETION DAYS:	11

REMARKS: Drill and Complete 30 stages in the 2nd Bone Spring formation. AFE includes D&C, flowback & initial ESP install.

	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
<b>INTANGIBLE COSTS</b>				
1 Land / Legal / Regulatory	\$ 35,000	\$ -	\$ -	\$ 35,000
2 Location, Surveys & Damages	150,000	13,000	10,000	173,000
4 Freight / Transportation	55,300	33,250	-	88,550
5 Rental - Surface Equipment	47,514	111,100	4,640	163,254
6 Rental - Downhole Equipment	68,799	40,000	-	108,799
7 Rental - Living Quarters	31,707	40,100	5,200	117,007
10 Directional Drilling, Surveys	164,900	-	-	164,900
11 Drilling	417,959	-	-	417,959
12 Drill Bits	81,000	-	-	81,000
13 Fuel & Power	56,149	105,000	-	161,149
14 Cementing & Float Equip	155,000	-	-	155,000
16 Perforating, Wireline, Slickline	-	133,250	8,000	141,250
17 High Pressure Pump Truck	-	10,000	-	10,000
18 Completion Unit, Swab, CTU	-	60,000	12,040	72,040
20 Mud Circulation System	72,290	-	-	72,290
21 Mud Logging	16,685	-	-	16,685
22 Logging / Formation Evaluation	4,216	8,000	-	12,216
23 Mud & Chemicals	74,396	152,000	-	226,396
24 Water	27,898	261,596	-	289,494
25 Stimulation	-	360,000	-	360,000
26 Stimulation Flowback & Disposal	-	84,000	-	84,000
28 Mud / Wastewater Disposal	96,938	68,000	-	164,938
30 Rig Supervision / Engineering	80,368	57,200	9,800	147,368
32 Drig & Completion Overhead	6,469	-	-	6,469
35 Labor	108,300	23,000	10,000	141,300
54 Proppant	-	213,868	-	213,868
95 Insurance	23,128	-	-	23,128
97 Contingency	88,721	84,018	5,968	178,707
99 Plugging & Abandonment	-	-	-	-
<b>TOTAL INTANGIBLES &gt;</b>	<b>1,863,135</b>	<b>1,857,382</b>	<b>65,648</b>	<b>3,786,166</b>
<b>TANGIBLE COSTS</b>				
60 Surface Casing	\$ 9,390	\$ -	\$ -	\$ 9,390
61 Intermediate Casing	69,726	-	-	69,726
62 Drilling Liner	-	-	-	-
63 Production Casing	168,964	-	-	168,964
64 Production Liner	-	-	-	-
65 Tubing	-	-	30,911	30,911
66 Wellhead	64,000	-	18,900	112,900
67 Packers, Liner Hangers	22,000	-	3,500	25,500
68 Tanks	-	-	-	-
69 Production Vessels	-	-	-	-
70 Flow Lines	-	-	-	-
71 Rod string	-	-	-	-
72 Artificial Lift Equipment	-	-	80,000	80,000
73 Compressor	-	-	-	-
74 Installation Costs	-	-	35,000	35,000
75 Surface Pumps	-	-	5,000	5,000
76 Downhole Pumps	-	-	4,950	4,950
77 Measurement & Meter Installation	-	-	-	-
78 Gas Conditioning / Dehydration	-	-	-	-
79 Interconnecting Facility Piping	-	-	-	-
80 Gathering / Bulk Lines	-	-	-	-
81 Valves, Dumps, Controllers	-	-	-	-
82 Tank / Facility Containment	-	-	-	-
83 Flare Stack	-	-	-	-
84 Electrical / Grounding	-	-	60,000	60,000
85 Communications / SCADA	-	-	-	-
86 Instrumentation / Safety	-	-	-	-
<b>TOTAL TANGIBLES &gt;</b>	<b>334,280</b>	<b>0</b>	<b>268,261</b>	<b>602,540</b>
<b>TOTAL COSTS &gt;</b>	<b>2,197,415</b>	<b>1,857,382</b>	<b>333,909</b>	<b>4,388,706</b>

## PREPARED BY Colgate Energy:

Drilling Engineer: Steven Segrest  
Completions Engineer: Brady Adams  
Production Engineer: Levi Harris

CRM

## Colgate Energy APPROVAL:

Co-CEO	WH	Co-CEO	JW	VP - Operations	CRM
VP - Land & Legal	BE	VP - Geosciences	SO		

## NON OPERATING PARTNER APPROVAL:

Company Name:	Working Interest (%):	Tax ID:
Signed by:	Date:	
Title:	Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No (mark one)	

The costs on this AFE are estimates only and may not be accurate as conditions are specific to the well and the project. Taking installation approved under the AFE may be delayed by a true state of the well has been required. By reviewing this AFE, the Participant agrees to pay the participant's share of actual costs incurred, including legal, consulting, regulatory, bonding and other costs under the terms of the applicable permit operating agreement, regulatory order or other agreement covering the well. Participant shall be covered by and hold proper security for Operator's well control and general liability insurance unless participant provides Operator a certificate establishing its own coverage or is deemed acceptable to the Operator by the date of sign.

Ex.15-022



## Colgate Energy

303 W. Wall St., Midland TX 79701  
Phone (432) 695-4257 • Fax (432) 695-4063

## ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

DATE:	3/5/2021	AFE NO.:	0
WELL NAME:	Madera 9 State Corn 131H	FIELD:	Palmillo; Bone Spring
LOCATION:	Parkway	MD/TVD:	13,230 / 8,150
COUNTY/STATE:	Eddy	LATERAL LENGTH:	5,080
Colgate Well:	0.00%	DRILLING DAYS:	19.1
GEOLOGIC TARGET:	3rd Bone Spring	COMPLETION DAYS:	11

REMARKS: Drill and Complete 30 stages in the 3rd Bone Spring formation. AFE includes D&C, flowback & initial ESP install.

	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
<b>INTANGIBLE COSTS</b>				
1 Land / Legal / Regulatory	\$ 35,000	\$ -	\$ -	\$ 35,000
2 Location, Surveys & Damages	150,000	13,000	10,000	173,000
4 Freight / Transportation	55,500	33,250	-	88,750
5 Rental - Surface Equipment	52,090	111,100	4,640	167,830
6 Rental - Downhole Equipment	68,799	40,000	-	108,799
7 Rental - Living Quarters	33,827	40,100	5,200	79,127
10 Directional Drilling, Surveys	187,950	-	-	187,950
11 Drilling	419,914	-	-	419,914
12 Drill Bits	91,500	-	-	91,500
13 Fuel & Power	62,171	105,000	-	167,171
14 Cementing & Float Equip	155,000	-	-	155,000
16 Perforating, Wireline, Slickline	-	133,250	8,000	141,250
17 High Pressure Pump Truck	-	10,000	-	10,000
18 Completion Unit, Swab, CTU	-	60,000	12,040	72,040
20 Mud Circulation System	78,284	-	-	78,284
21 Mud Logging	18,239	-	-	18,239
22 Logging / Formation Evaluation	5,174	8,000	-	13,174
23 Mud & Chemicals	81,236	152,000	-	233,236
24 Water	28,061	279,884	-	307,945
25 Stimulation	-	360,000	-	360,000
26 Stimulation Flowback & Disp	-	84,000	-	84,000
28 Mud / Wastewater Disposal	96,938	68,000	-	164,938
30 Rig Supervision / Engineering	88,987	57,200	9,800	155,987
32 Drig & Completion Overhead	7,163	-	-	7,163
35 Labor	108,500	23,000	10,000	141,500
54 Proppant	-	240,602	-	240,602
96 Insurance	25,306	-	-	25,306
97 Contingency	93,997	86,269	5,968	186,234
99 Plugging & Abandonment	-	-	-	-
<b>TOTAL INTANGIBLES &gt;</b>	<b>1,973,934</b>	<b>1,904,655</b>	<b>65,648</b>	<b>3,944,237</b>
<b>TANGIBLE COSTS</b>				
60 Surface Casing	\$ 9,590	\$ -	\$ -	\$ 9,590
61 Intermediate Casing	69,726	-	-	69,726
62 Drilling Liner	-	-	-	-
63 Production Casing	184,876	-	-	184,876
64 Production Liner	-	-	-	-
65 Tubing	-	-	36,356	36,356
66 Wellhead	64,000	-	48,900	112,900
67 Packers, Liner Hangers	22,000	-	3,500	25,500
68 Tanks	-	-	-	-
69 Production Vessels	-	-	-	-
70 Flow Lines	-	-	-	-
71 Rod string	-	-	-	-
72 Artificial Lift Equipment	-	-	80,000	80,000
73 Compressor	-	-	-	-
74 Installation Costs	-	-	35,000	35,000
75 Surface Pumps	-	-	5,000	5,000
76 Downhole Pumps	-	-	4,950	4,950
77 Measurement & Meter Installation	-	-	-	-
78 Gas Conditioning / Dehydration	-	-	-	-
79 Interconnecting Facility Piping	-	-	-	-
80 Gathering / Bulk Lines	-	-	-	-
81 Valves, Dumps, Controllers	-	-	-	-
82 Tank / Facility Containment	-	-	-	-
83 Flare Stack	-	-	-	-
84 Electrical / Grounding	-	-	60,000	60,000
85 Communications / SCADA	-	-	-	-
86 Instrumentation / Safety	-	-	-	-
<b>TOTAL TANGIBLES &gt;</b>	<b>350,191</b>	<b>0</b>	<b>273,706</b>	<b>623,897</b>
<b>TOTAL COSTS &gt;</b>	<b>2,324,125</b>	<b>1,904,655</b>	<b>339,354</b>	<b>4,568,133</b>

## PREPARED BY Colgate Energy:

Drilling Engineer: Steven Segrest  
Completions Engineer: Brady Adams  
Production Engineer: Levi Harris

CRM

## Colgate Energy APPROVAL:

Co-CEO: WH Co-CEO: JW VP - Operations: CRM  
VP - Land & Legal: BG VP - Geosciences: SO

## NON OPERATING PARTNER APPROVAL:

Company Name: Working Interest (%): Tax ID:  
Signed by: Date:  
Title: Approval: ☐ Yes ☐ No (mark one)

The costs on this AFE are estimates only and may not be identical to actual costs at the end of the project. Following conditions apply to the AFE: The AFE may be subject to a review after the well has been completed. In reviewing this AFE, the Participant agrees to pay its proportionate share of actual costs incurred, including legal, contract, regulatory, brokerage and well costs under the terms of the applicable non-operating agreement, regulatory order or other agreement covering this well. Participants shall be covered for and held proportionately for Operator's well-control and general liability insurance unless participant provides Operator a certificate evidencing its own insurance on an amount acceptable to the Operator by the date of approval.

Ex.15-023

## Colgate Energy

303 W. Wall St., Midland TX 79701  
Phone (432) 695-4257 • Fax (432) 695-4063

## ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

DATE:	3/5/2021	AFE NO.:	0
WELL NAME:	Madera 9 State Com 132H	FIELD:	Palmillo; Bone Spring
LOCATION:	Parkway	MD/TVD:	13,230 / 8,150
COUNTY/STATE:	Eddy	LATERAL LENGTH:	5,080
Colgate WL:	0.00%	DRILLING DAYS:	19.1
GEOLOGIC TARGET:	3rd Bone Spring	COMPLETION DAYS:	11

REMARKS: Drill and Complete 30 stages in the 3rd Bone Spring formation. AFE includes D&C, flowback & initial ESP install.

INTANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
1 Land / Legal / Regulatory	\$ 35,000	\$ -	\$ -	\$ 35,000
2 Location, Surveys & Damages	150,000	13,000	10,000	173,000
4 Freight / Transportation	55,500	33,250	-	88,750
5 Rental - Surface Equipment	52,090	111,100	3,640	166,830
6 Rental - Downhole Equipment	68,799	40,000	-	108,799
7 Rental - Living Quarters	33,827	40,100	5,200	79,127
10 Directional Drilling, Surveys	187,950	-	-	187,950
11 Drilling	449,914	-	-	449,914
12 Drill Bits	91,500	-	-	91,500
13 Fuel & Power	62,171	105,000	-	167,171
14 Cementing & Float Equip	155,000	-	-	155,000
16 Perforating, Wireline, Slickline	-	133,250	8,000	141,250
17 High Pressure Pump Truck	-	10,000	-	10,000
18 Completion Unit, Swab, CTU	-	60,000	12,040	72,040
20 Mud Circulation System	78,284	-	-	78,284
21 Mud Logging	18,239	-	-	18,239
22 Logging / Formation Evaluation	3,474	8,000	-	11,474
23 Mud & Chemicals	81,236	152,000	-	233,236
24 Water	28,061	279,884	-	307,945
25 Stimulation	-	360,000	-	360,000
26 Stimulation Flowback & Disp	-	84,000	-	84,000
28 Mud / Wastewater Disposal	96,938	68,000	-	164,938
30 Rig Supervision / Engineering	88,987	57,200	9,800	155,987
32 Drig & Completion Overhead	7,163	-	-	7,163
36 Labor	108,500	23,000	10,000	141,500
54 Proppant	-	240,602	-	240,602
96 Insurance	25,306	-	-	25,306
97 Contingency	93,997	86,269	3,968	184,234
99 Plugging & Abandonment	-	-	-	-
<b>TOTAL INTANGIBLES &gt;</b>	<b>1,973,934</b>	<b>1,904,655</b>	<b>65,648</b>	<b>3,944,237</b>
TANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	TOTAL COSTS
60 Surface Casing	\$ 9,290	\$ -	\$ -	\$ 9,290
61 Intermediate Casing	69,726	-	-	69,726
62 Drilling Liner	-	-	-	-
63 Production Casing	184,876	-	-	184,876
64 Production Liner	-	-	-	-
65 Tubing	-	-	36,356	36,356
66 Wellhead	64,000	-	48,900	112,900
67 Packers, Liner Hangers	22,000	-	3,500	25,500
68 Tanks	-	-	-	-
69 Production Vessels	-	-	-	-
70 Flow Lines	-	-	-	-
71 Rod string	-	-	-	-
72 Artificial Lift Equipment	-	-	80,000	80,000
73 Compressor	-	-	-	-
74 Installation Costs	-	-	35,000	35,000
75 Surface Pumps	-	-	5,000	5,000
76 Downhole Pumps	-	-	4,950	4,950
77 Measurement & Meter Installation	-	-	-	-
78 Gas Conditioning / Dehydration	-	-	-	-
79 Interconnecting Facility Piping	-	-	-	-
80 Gathering / Bulk Lines	-	-	-	-
81 Valves, Dumps, Controllers	-	-	-	-
82 Tank / Facility Containment	-	-	-	-
83 Flare Stack	-	-	-	-
84 Electrical / Grounding	-	-	60,000	60,000
85 Communications / SCADA	-	-	-	-
86 Instrumentation / Safety	-	-	-	-
<b>TOTAL TANGIBLES &gt;</b>	<b>350,191</b>	<b>0</b>	<b>273,706</b>	<b>623,897</b>
<b>TOTAL COSTS &gt;</b>	<b>2,324,125</b>	<b>1,904,655</b>	<b>339,354</b>	<b>4,568,133</b>

## PREPARED BY Colgate Energy:

Drilling Engineer: Steven Segrest  
Completions Engineer: Brady Adams  
Production Engineer: Levi Harris

CRM

## Colgate Energy APPROVAL:

Co-CEO	WH	Co-CEO	JW	VP - Operations	CRM
VP - Land & Legal	BC	VP - Geosciences	SO		

## NON OPERATING PARTNER APPROVAL:

Company Name: \_\_\_\_\_ Working Interest (%): \_\_\_\_\_ Tax ID: \_\_\_\_\_

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Approval: ☐ Yes ☐ No (mark one)

The costs on this AFE are estimates only and may not be recovered as costs are incurred on the field over the project. Taking no action approved under the AFE may be subject to approval after the well has been completed. In executing this AFE, the Participant agrees to pay the appropriate share of actual costs incurred, including, legal, contract, regulatory, bonding and well costs under the terms of the applicable joint operating agreement, regulatory order or other agreement governing this well. Participants shall be covered by and hold participants for the Operator's well control and general liability insurance unless participants provide Operator a certificate evidencing its own insurance in an amount acceptable to the Operator by the date of sign.

Ex.15-024

# **Table of Contents**

## **Exhibit B**

Affidavit of  
Sergio Ojeda

OCD Case 22085 (Klondike)  
OCD Case 22086 (Madera)  
Colgate Operating, LLC

	<u>Bate Numbers</u>
1) Exhibit B Affidavit	1-4
2) Exhibit B1-Cover Page Geology Study	5
3) Exhibit B1.1 Regional Locator Map	6
4) Exhibit B1.2 Cross-Section Locator Map	7
5) Exhibit B1.3 Gun Barrel Development	8
6) Exhibit B1.4 SBSG Structure Map	9
7) Exhibit B1.5 SBSG Isopach Map	10
8) Exhibit B1.6 TBSG Structure Map	11
9) Exhibit B1.7 TBSG Isopach Map	12
10) Exhibit B1.8 Stratigraphic Cross Section A-A	13
11) Exhibit B1.9 Cross-Section A-A (SBSG)	14
12) Exhibit B1.10 Cross-Section A-A (TBSG)	15

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## **Exhibit B**

Affidavit of  
Sergio Ojeda

OCD Case 22085 (Klondike)  
OCD Case 22086 (Madera)  
Colgate Operating, LLC

	<u>Bate Numbers</u>
1) Exhibit B Affidavit	1-4
2) Exhibit 1-Cover Page Geology Study	5
3) Exhibit 1.1 Regional Locator Map	6
4) Exhibit 1.2 Cross-Section Locator Map	7
5) Exhibit 1.3 Gun Barrel Development	8
6) Exhibit 1.4 SBSG Structure Map	9
7) Exhibit 1.5 SBSG Isopach Map	10
8) Exhibit 1.6 TBSG Structure Map	11
9) Exhibit 1.7 TBSG Isopach Map	12
10) Exhibit 1.8 Stratigraphic Cross Section A-A	13
11) Exhibit 1.9 Cross-Section A-A (SBSG)	14
12) Exhibit 1.10 Cross-Section A-A (TBSG)	15

**CASE NO. 22085**

**CASE NO. 22086**

**b. Exhibit 1.2** is a Cross-Section Locator Map. This map identifies the cross-section running from A-A' with the cross-section well names and a black line in

Released to Imaging: 8/4/2021 8:18:18 AM

proximity to the Proposed Wells. It also identifies the Proposed Wells with well names and red or orange lines.

c. **Exhibit 1.3** is a Gunbarrel/Lateral Trajectory Diagram. This diagram identifies the wells within the Klondike & Madera development plan. It displays the **Madera 9 State Com 121H, 122H, and the Klondike 9 State Com 123H & 124H** wells in the Second Bone Spring formation with orange circles. The **Madera 9 State Com 131H, 132H, and the Klondike 9 State Com 133H & 134H** wells are in the Third Bone Spring formation with red circles. The proposed units are identified together in green in the reference map in the bottom right.

d. **Exhibit 1.4** is a Second Bone Spring Structure map on the base of the Second Bone Spring formation. This map identifies the **Madera 9 State Com 121H, 122H, and the Klondike 9 State Com 123H, & 124H** wells with an orange line. It also identifies the location of the cross-section running from A-A' in proximity to the Proposed Wells. This map shows that the structure slightly dips to the East-Southeast.

e. **Exhibit 1.5** is a Second Bone Spring Isopach Map. It shows the gross thickness of the Second Bone Spring interval ranges from 25 ft to 125 ft and is no less than 75 ft across the proposed unit. This map identifies the **Madera 9 State Com 121H, 122H, and the Klondike 9 State Com 123H, & 124H** wells with an orange line. It also shows the location of cross-section A-A' in proximity to the Proposed wells.

f. **Exhibit 1.6** is a Third Bone Spring Structure Map on the top of the Third Bone Spring formation. This map identifies the **Madera 9 State Com 131H, 132H, and the Klondike 9 State Com 133H, & 134H** wells with red lines. It also identifies

the location of the cross-section running from A-A' in proximity to the Proposed Wells. This map shows that the structure slightly dips to the East-Southeast.

**g. Exhibit 1.7** is a Third Bone Spring Isopach Map. It shows the gross thickness of the Third Bone Spring interval ranges from 200 ft to 475 ft, and is uniform across the proposed unit at 400 ft. This map identifies the **Madera 9 State Com 131H, 132H, and the Klondike 9 State Com 133H, & 134H** wells with red lines. It also shows the location of cross-section A-A' in proximity to the Proposed Wells.

**h. Exhibit 1.8** is a Stratigraphic Cross Section hung on the top of the Wolfcamp formation. The well logs on the cross-section give a representative sample of the Bone Spring formation in the area. The target zones for the Proposed Wells are the Second and Third Bone Spring formations, which are consistent across the units. The planned well-path for the Proposed Wells are indicated by orange and red dashed lines.

**i. Exhibit 1.9** is a detailed view of the Target Zone within Stratigraphic Cross Section for the **Madera 9 State Com 121H, 122H, and the Klondike 9 State Com 123H, & 124H** wells. The target zone for the well is the Second Bone Spring Formation, and that zone is consistent across the unit. The planned well-path is indicated by an orange dashed line.

**j. Exhibit 1.10** is a detailed view of the Target Zone within Stratigraphic Cross Section for the **Madera 9 State Com 131H, 132H, and the Klondike 9 State Com 133H, & 134H** wells. The target zone for the well is the Third Bone Spring Formation, and that zone is consistent across the unit. The planned well-path is indicated by a red dashed line.



Proposed Wells. This map shows that the structure slightly dips to the East-Southeast.

g. Exhibit 1.7 is a Third Bone Spring Isopach Map. It shows the gross thickness of the Third Bone Spring interval ranges from 200 ft to 475 ft, and is uniform across the proposed unit at 400 ft. This map identifies the **Madera 9 State Com 131H, 132H, and the Klondike 9 State Com 133H, & 134H** wells with red lines. It also shows the location of cross-section A-A' in proximity to the Proposed Wells.

h. Exhibit 1.8 is a Stratigraphic Cross Section hung on the top of the Wolfcamp formation. The well logs on the cross-section give a representative sample of the Bone Spring formation in the area. The target zones for the Proposed Wells are the Second and Third Bone Spring formations, which are consistent across the units. The planned well-path for the Proposed Wells are indicated by orange and red dashed lines.

i. Exhibit 1.9 is a detailed view of the Target Zone within Stratigraphic Cross Section for the **Madera 9 State Com 121H, 122H, and the Klondike 9 State Com 123H, & 124H** wells. The target zone for the well is the Second Bone Spring Formation, and that zone is consistent across the unit. The planned well-path is indicated by an orange dashed line.

j. Exhibit 1.10 is a detailed view of the Target Zone within Stratigraphic Cross Section for the **Madera 9 State Com 131H, 132H, and the Klondike 9 State Com 133H, & 134H** wells. The target zone for the well is the Third Bone Spring Formation, and that zone is consistent across the unit. The planned well-path is indicated by a red dashed line.

4. I conclude from the foregoing exhibits for the Klondike and Madera wells that:

- The horizontal spacing units are justified from a geologic standpoint.
- There are no structural impediments or faulting that will interfere with horizontal development.
- Each quarter section encountered by each of the wells in the proposed unit will contribute more or less equally to production.

5. In my opinion, the granting of Colgate Operating's applications are in the interests of conservation and the prevention of waste.

SERGIO OJEDA

SUBSCRIBED AND SWORN to before me this 3<sup>rd</sup> day of August, 2021 by Sergio Ojeda on behalf of Colgate Operating, L.L.C.

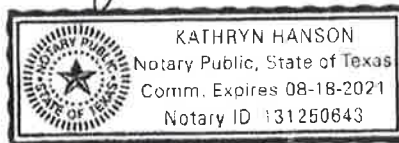
*[Signature of Sergio Ojeda]*  
Sergio Ojeda

Notary Public

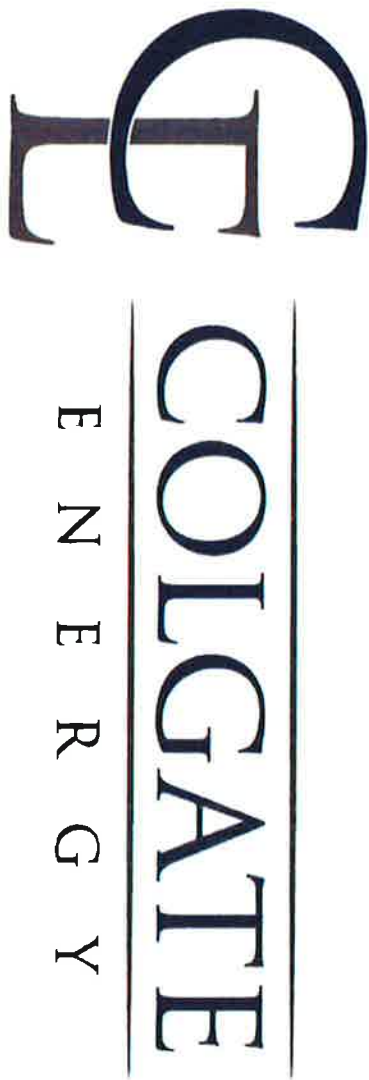
*[Signature of Kathryn Hanson]*  
Kathryn Hanson

My Commission Expires:

8/18/21



Ex.B-004



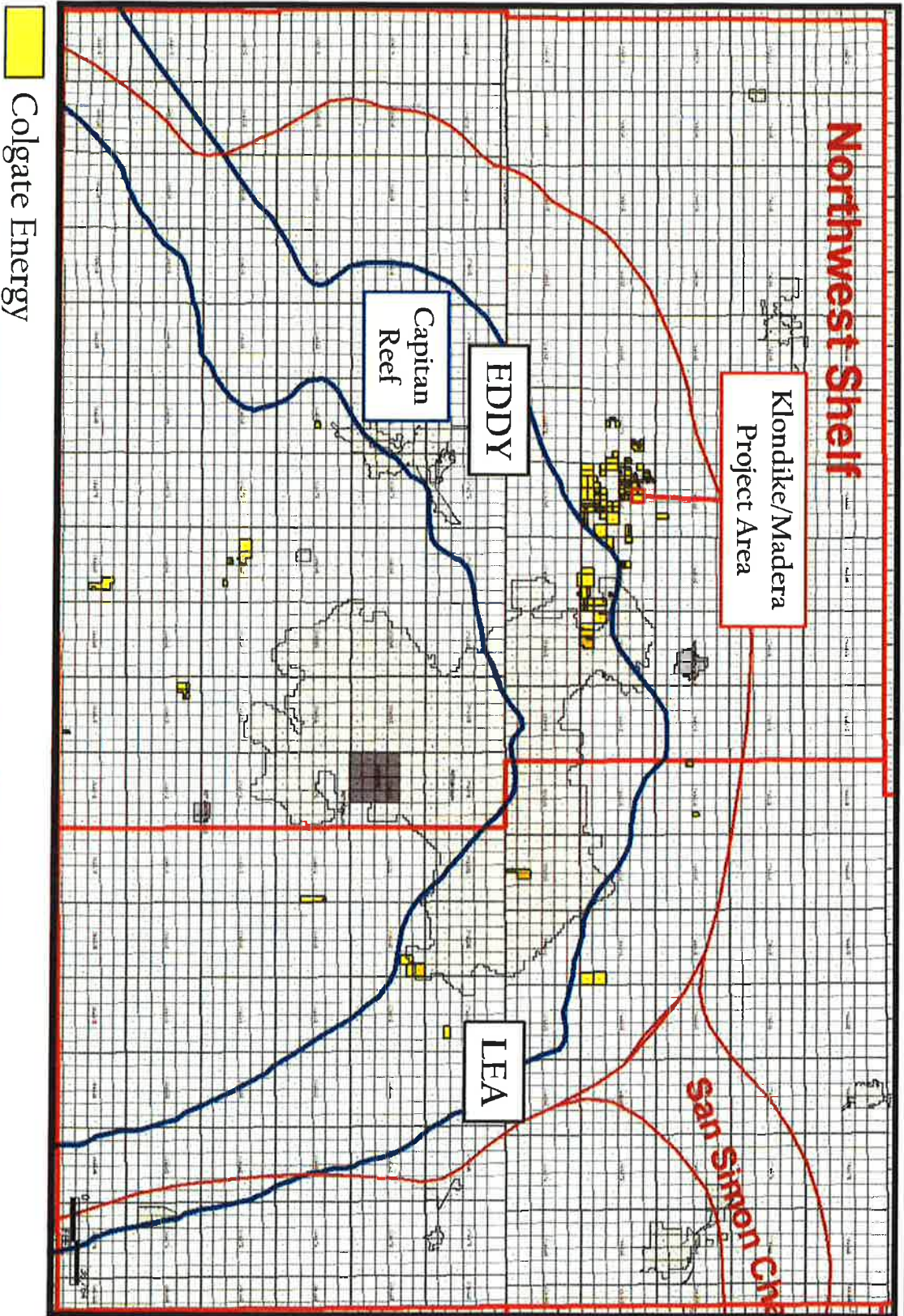
PDU: Klondike 9 State Com & Madera 9 State Com  
Pooling  
8/3/2021

Ex.B-1-005

# Klondike & Madera 9 State Com: Regional Locator Map



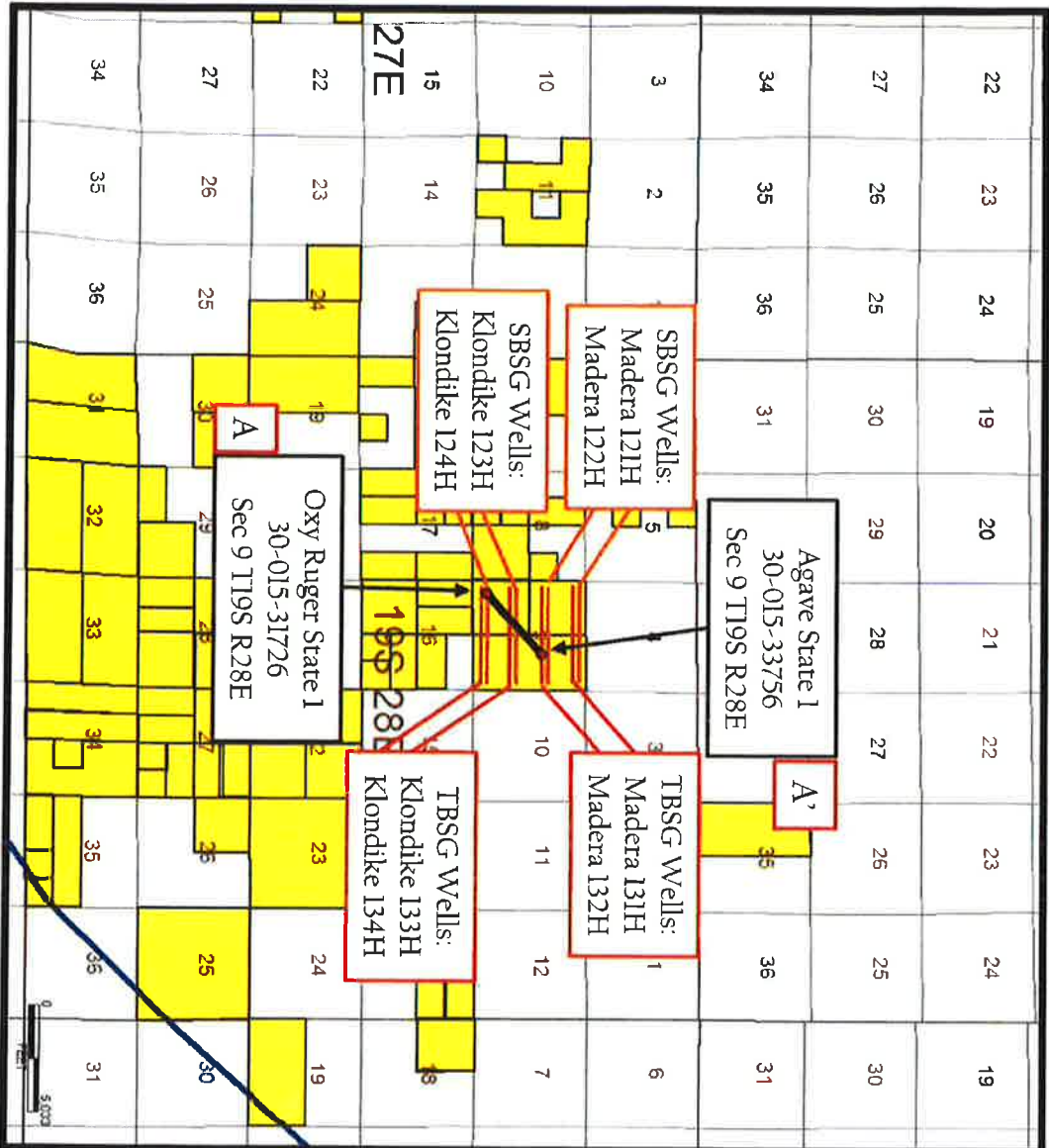
Ex.B-1.1-006



CONFIDENTIAL



# Klondike & Madera 9 State Com: Cross-Section Locator Map



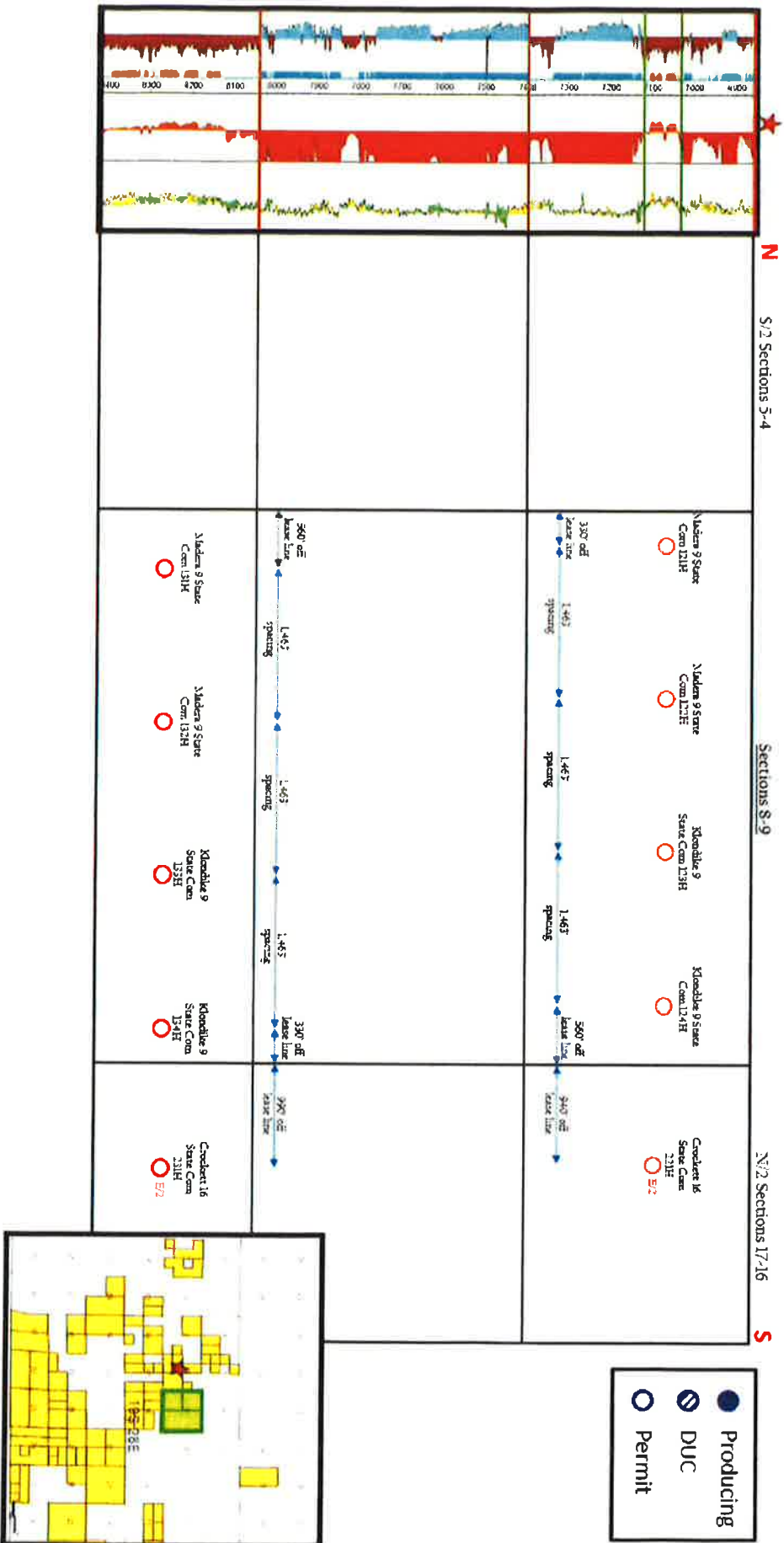
Colgate Energy

CONFIDENTIAL

# Klondike & Madera 9 State Com Gun Barrel Development



Ex.B-1.3-008

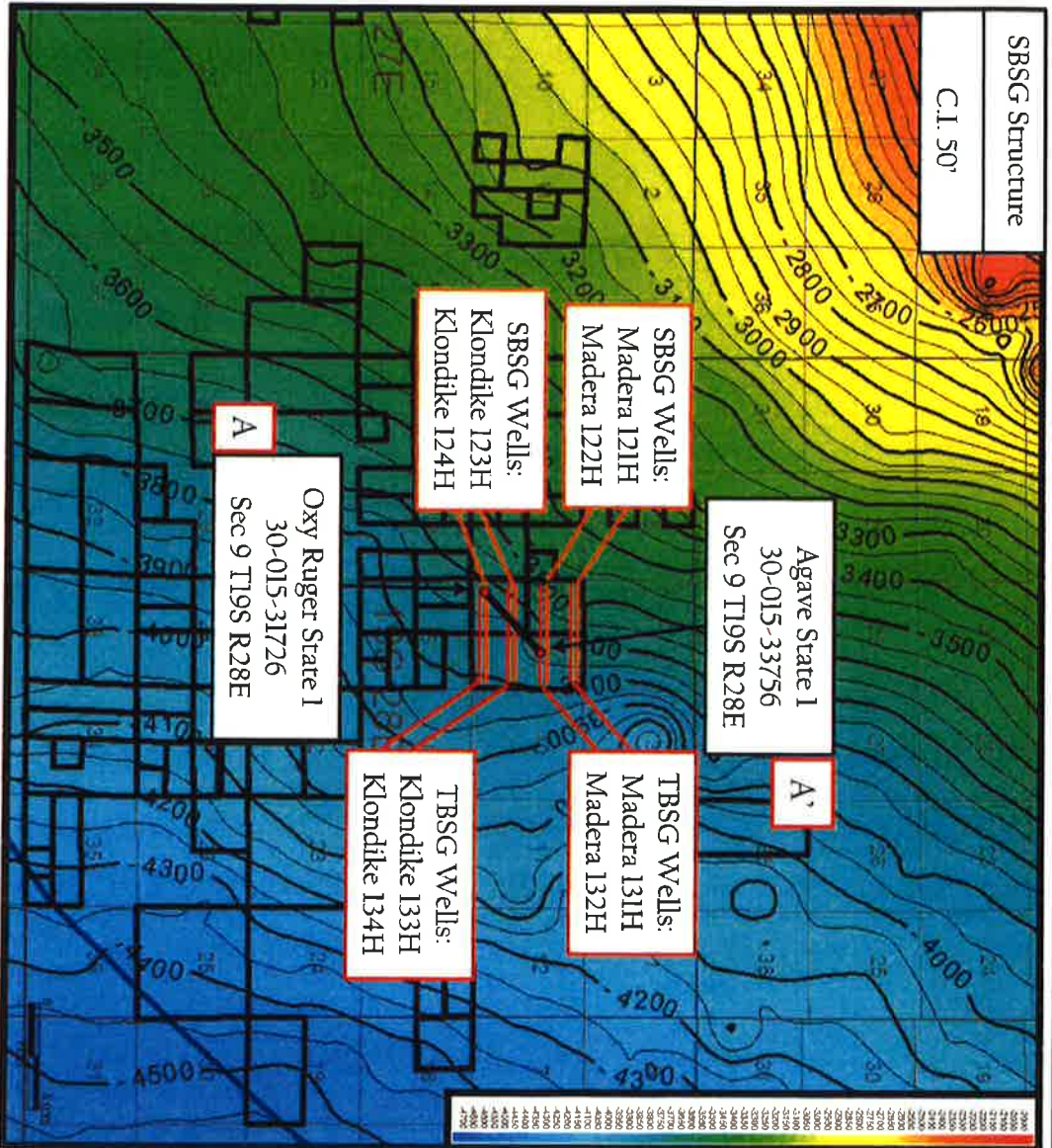


CONFIDENTIAL

# Klondike & Madera 9 State Com: SBSG Structure Map



Ex.B-1.4-009



Colgate Energy

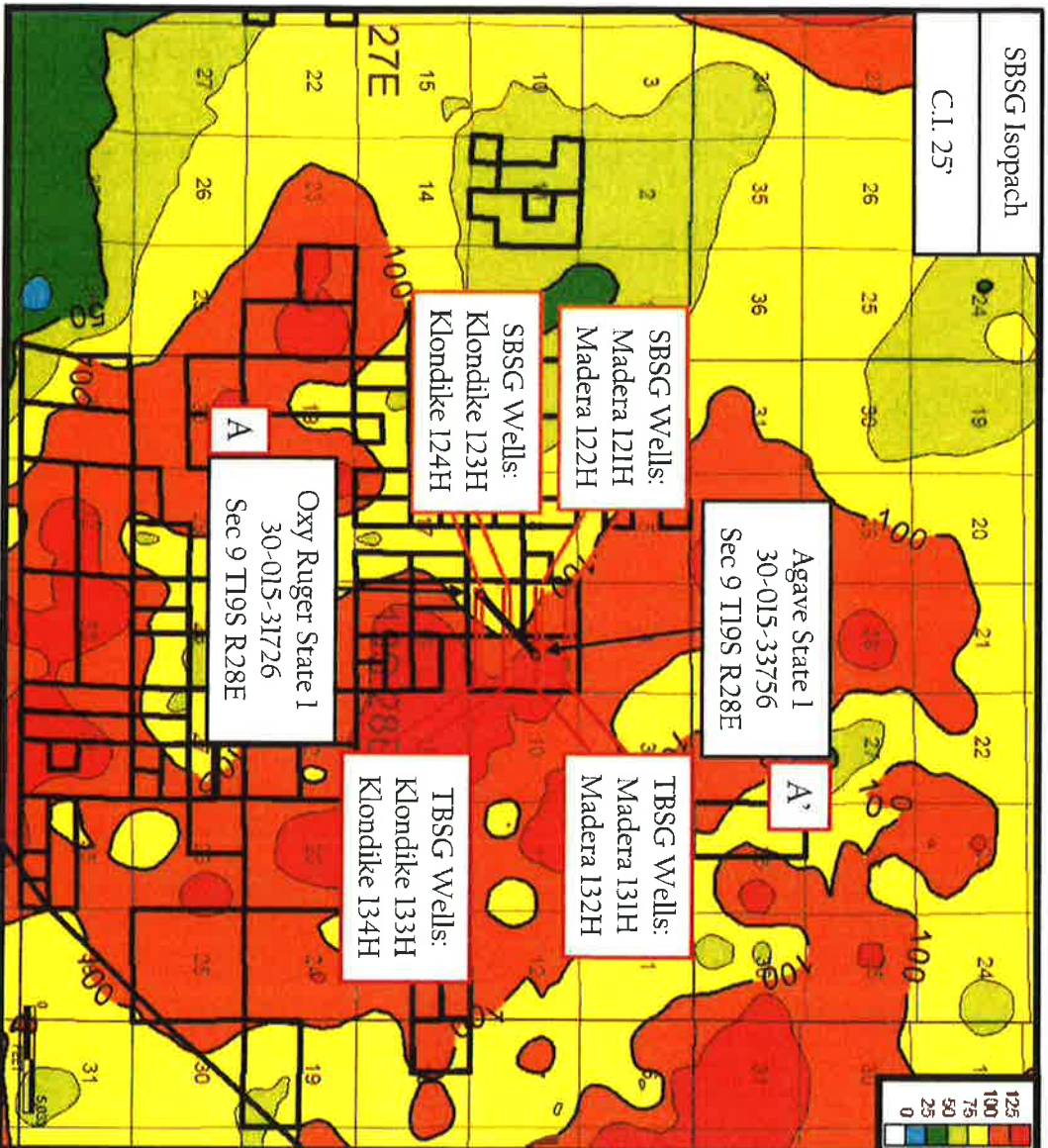
CONFIDENTIAL



# Klondike & Madera 9 State Com: SBSG Isopach Map



Ex.B-1.5-010

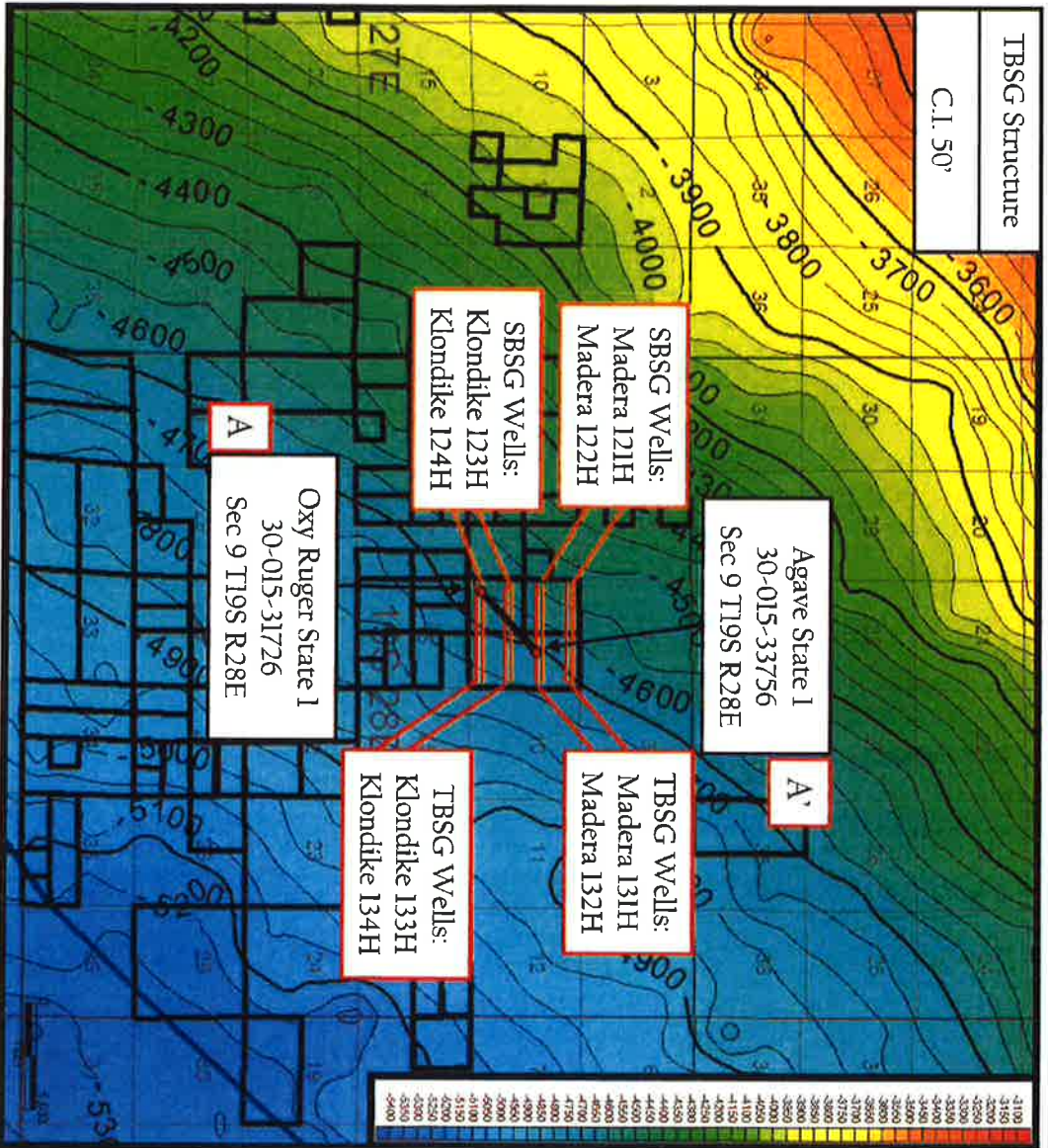


☐ Colgate Energy

CONFIDENTIAL



# Klondike & Madera 9 State Com: TBSG Structure Map



☐ Colgate Energy

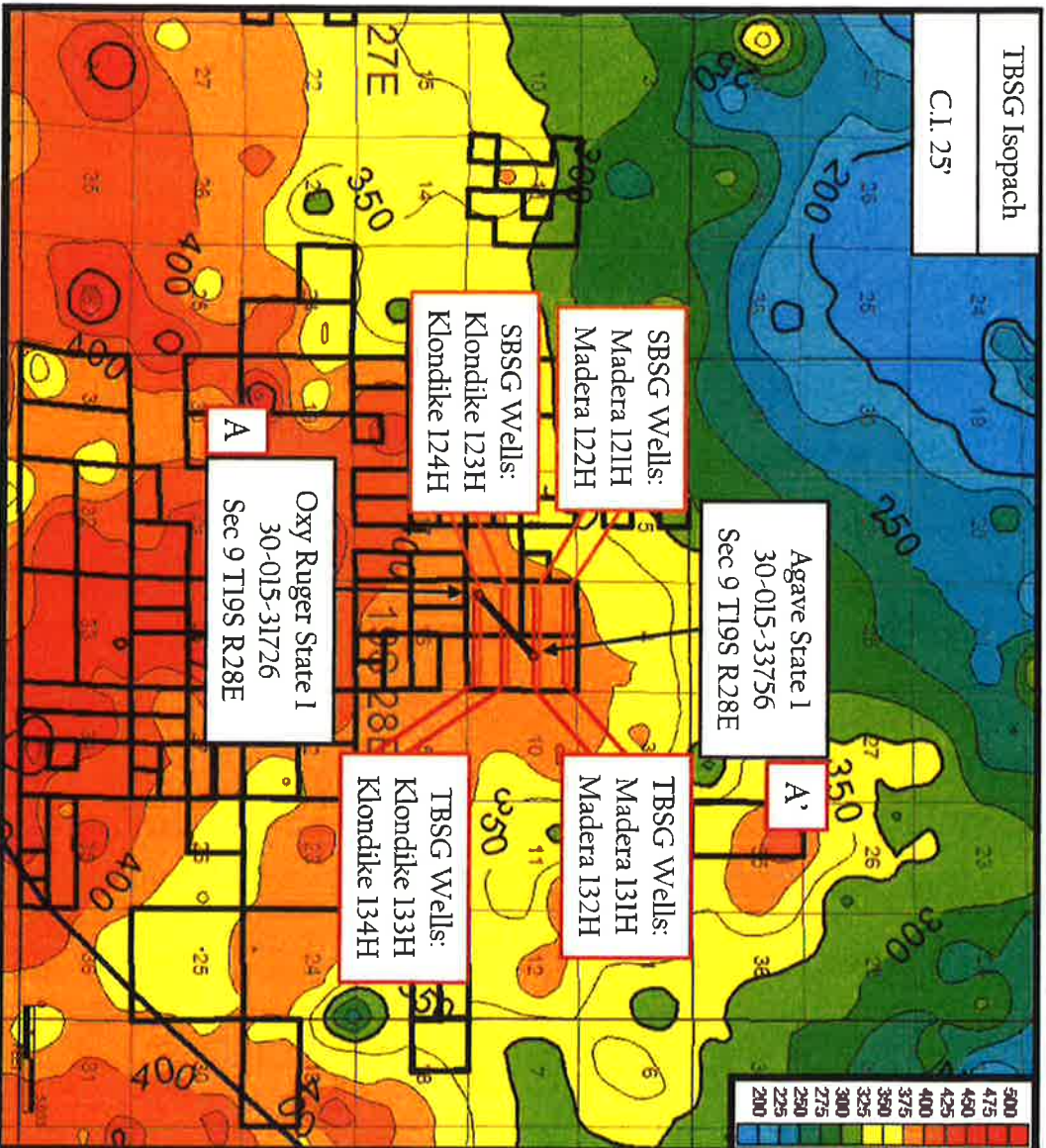
CONFIDENTIAL

Ex.B-1.6-011

# Klondike & Madera 9 State Com: TBSG Isopach Map



Ex.B-1.7-012



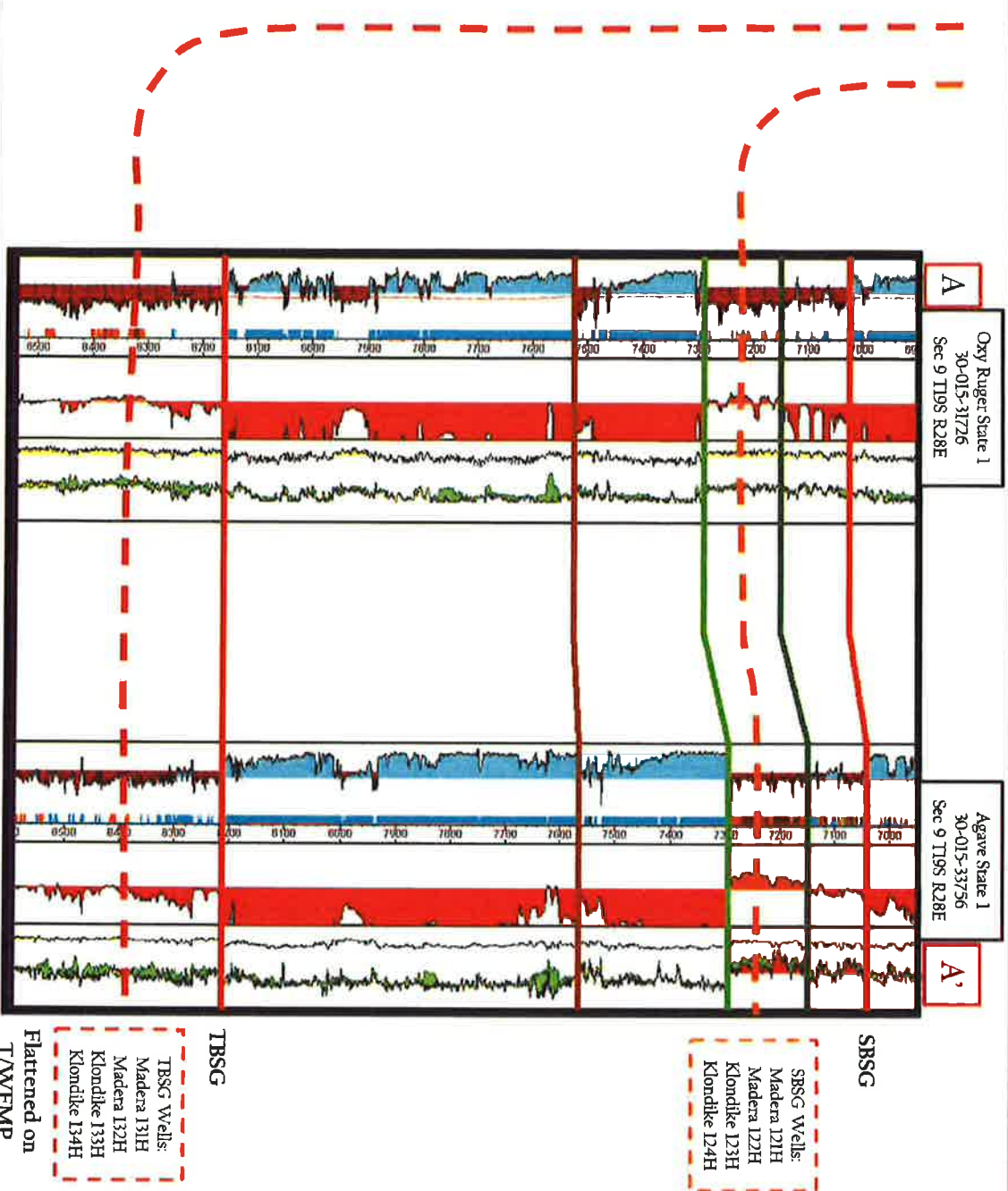
☐ Colgate Energy

CONFIDENTIAL



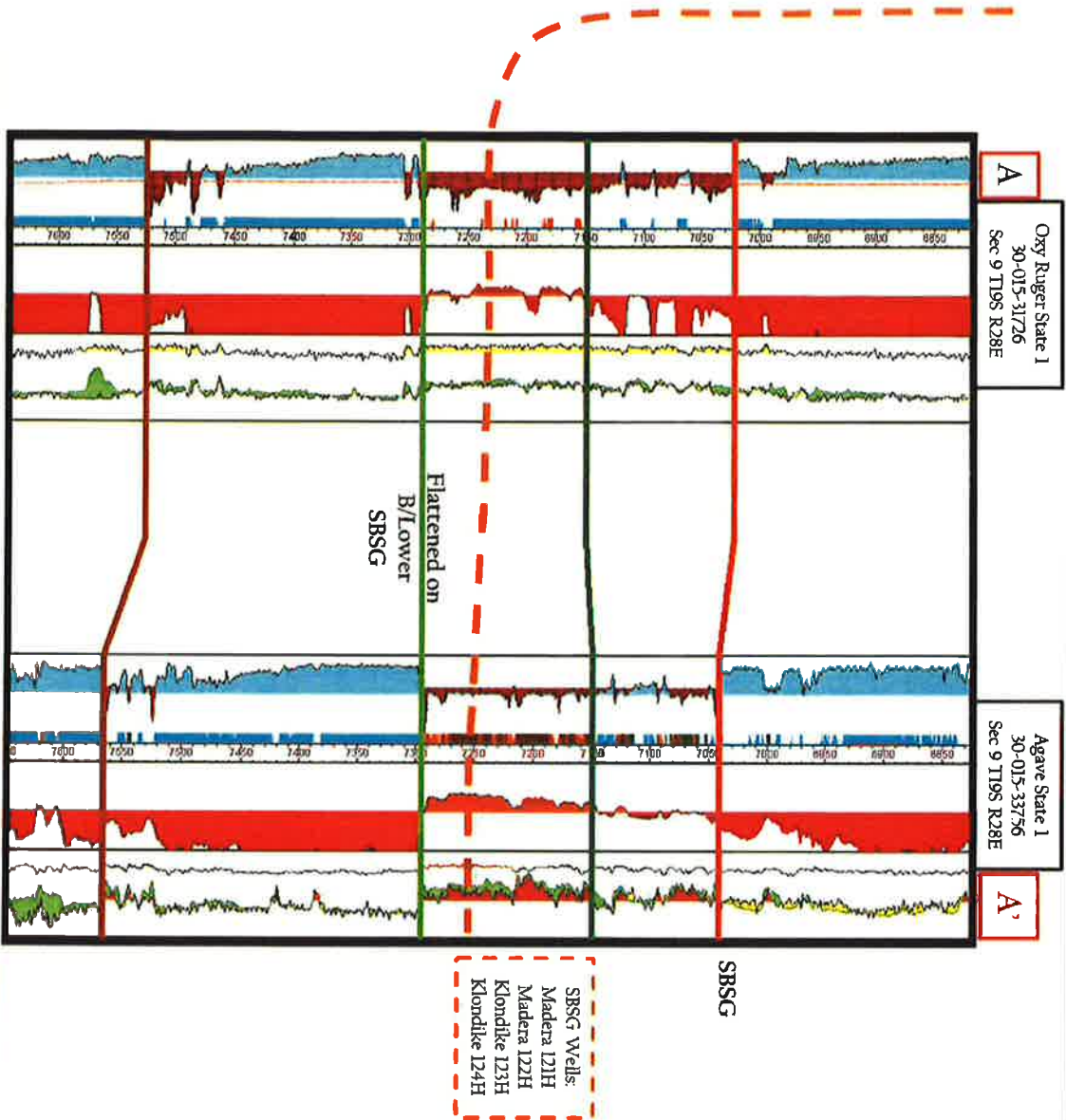
# Klondike & Madera 9 State Com: Cross-Section A-A'

COLGATE  
ENERGY



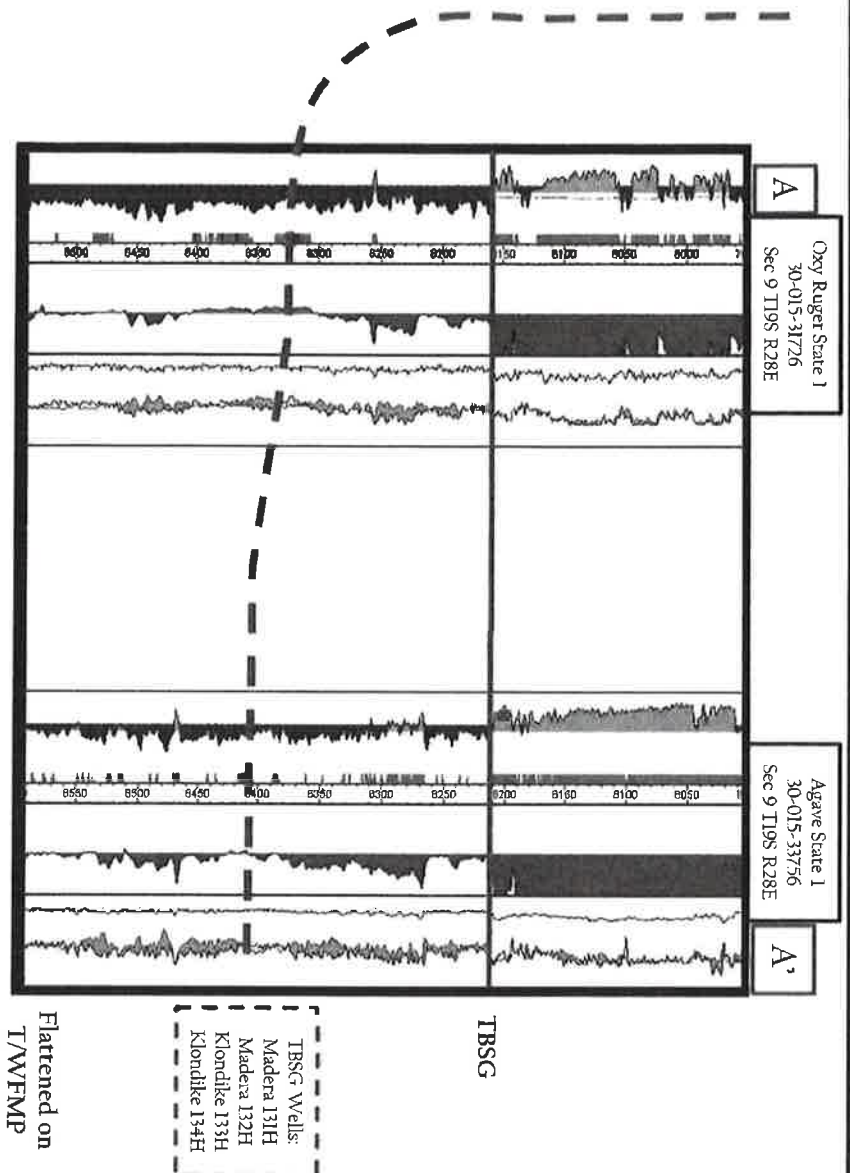
CONFIDENTIAL

# Klondike & Madera 9 State Com: Cross-Section A-A' (SBSG)



CONFIDENTIAL

# Klondike & Madera 9 State Com: Cross-Section A-A' (TBSG)



CONFIDENTIAL

# **Table of Contents**

## **Exhibit C**

Affidavit of  
ERNEST L. PADILLA  
OCD Hearing Thursday, August 5, 2021  
OCD Case 22085 and 22086  
(Klondike & Madera wells)  
Colgate Operating, LLC

### **Bate Numbers**

1) Affidavit	1
2) Notification letter (both cases)	2
3) Applications (22085 & 22086)	3-8
4) WI and ORRI owner listing	9
5) Certified mail receipt and Return receipt green cards (22085-22086)	10-33

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

**APPLICATION OF COLGATE OPERATING, LLC  
FOR COMPULSORY POOLING IN  
EDDY COUNTY, NEW MEXICO**

**CASE NO. 22085**

**APPLICATION OF COLGATE OPERATING, LLC  
FOR COMPULSORY POOLING IN  
EDDY COUNTY, NEW MEXICO**

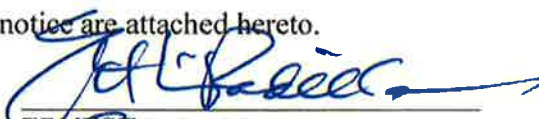
**CASE NO. 22086**

**AFFIDAVIT**

**STATE OF NEW MEXICO }  
  }ss  
COUNTY OF SANTA FE }**

AFFIANT, ERNEST L. PADILLA, first being duly sworn on oath states:

Ernest L. Padilla, attorney for COLGATE OPERATING, LLC, the Applicant herein, states that notice of the above-referenced Application was mailed to the interested parties shown on Exhibit "1" attached hereto in accordance with Oil Conservation Division Rules, and that true and correct copies of the notice letter and proof of notice are attached hereto.

  
ERNEST L. PADILLA

SWORN TO AND SUBSCRIBED to before me this 3<sup>rd</sup> day of August, 2021, by Ernest L. Padilla.

  
Notary Public

My Commission Expires:

4/9/2025



Ex.C-001



PADILLA LAW FIRM, P.A.

STREET ADDRESS  
1512 S. ST. FRANCIS DRIVE  
SANTA FE, NM 87505

MAILING ADDRESS  
P.O. BOX 2523  
SANTA FE, NEW MEXICO 87504-2523

EMAIL ADDRESS  
[padillalaw@qwestoffice.net](mailto:padillalaw@qwestoffice.net)  
[padillalawnm@outlook.com](mailto:padillalawnm@outlook.com)

TELEPHONE  
505-988-7577

FACSIMILE  
505-988-7592

July 14, 2021

**CERTIFIED MAIL/RETURN RECEIPT REQUESTED**

**TO: ALL INTEREST OWNERS**

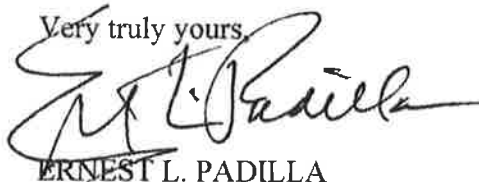
**Re: NMOCD Case Numbers#22085-22086 In the Matter of the Applications of Colgate Operating, LLC, for compulsory pooling in Eddy County, New Mexico.**

Ladies and Gentlemen:

This letter will advise that Colgate Operating, LLC has filed applications with the New Mexico Oil Conservation Division seeking an order for compulsory pooling, in Eddy County, New Mexico as referenced above. Copy of these applications are enclosed.

During the COVID-19 Public Health Emergency, state buildings are closed to the public and hearings will be conducted remotely. A status conference hearing will be conducted on August 5, 2021 at 8:15 a.m., at which time a hearing date will be set for a later date. To participate in the electronic hearing, see the instructions posted on the OCD Hearings website: <http://www.emnrd.state.nm.us/OCD/announcements.html>. Nonetheless, to stay informed as to any changes for hearing procedures you should consult the OCD website for further instructions. You are not required to attend these hearings, but as an owner of an interest or offset operator that may be affected, you may appear and present testimony. Failure to appear at the time and become a party of record will preclude you from challenging these applications at a later time. If you intend to attend the hearing and present testimony or evidence, you must enter your appearance and serve the Division, counsel for the Applicant, and other parties with a pre-hearing statement at least four business days before the scheduled hearing date in accordance with Division Rule 1211.

Very truly yours,



ERNEST L. PADILLA

ELP:jbg

cc: Colgate Operating, LLC

Ex.C-002

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

APPLICATION OF COLGATE OPERATING, LLC  
FOR COMPULSORY POOLING IN  
EDDY COUNTY, NEW MEXICO

CASE NO. 77085

**APPLICATION FOR COMPULSORY POOLING**

COLGATE OPERATING, LLC (OGRID 371449) applies for an order pooling all mineral interests within the West Winchester Bone Spring (Pool Code 97569), underlying the S/2 of Section 9, Township 19 South, Range 28 East, NMPM, Eddy County, New Mexico. In support of this application, Applicant states:

1. Applicant is a working interest owner in the proposed horizontal spacing unit and has the right to drill thereon.
2. Applicant seeks to dedicate the above referenced horizontal spacing unit to the following four initial wells:

**Klondike 9 State Com 123H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Klondike 9 State Com 124H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit M of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Klondike 9 State Com 133H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

**Klondike 9 State Com 134H**

This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit M Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

3. Applicant has sought and been unable to obtain voluntary agreement for the development of these lands from all of the working interest owners in the subject spacing unit.

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

5. In order to permit Applicant to obtain its just and fair share of the oil and gas underlying the subject lands, all uncommitted interests in this horizontal spacing unit should be pooled and Applicant should be designated the operator of these proposed horizontal wells and the proposed spacing unit.

**WHEREFORE**, Applicant, requests after notice and hearing, the Division enter its order:

- A. Pooling all uncommitted interests in this horizontal spacing unit;
- B. Approving four initial horizontal wells in this spacing unit;
- C. Designating Applicant operator of this spacing unit and the horizontal wells to be drilled thereon;
- D. Authorizing Applicant to recover its costs of drilling, equipping and completing the wells;
- E. Approving the actual operating charges and costs of supervision while drilling and after completing, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and;
- F. Imposing a 200% charge for risk assumed by Applicant in drilling and

completing the wells against any working interest owner who does not voluntarily participate in the drilling of the wells.

PADILLA LAW FIRM, P.A.

By: /s/ Ernest L. Padilla  
Ernest L. Padilla  
P.O. Box 2523  
Santa Fe, New Mexico 87504  
(505) 988-7577  
[padillalaw@qwestoffice.net](mailto:padillalaw@qwestoffice.net)  
[padillalawnm@outlook.com](mailto:padillalawnm@outlook.com)

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

**APPLICATION OF COLGATE OPERATING, LLC  
FOR COMPULSORY POOLING IN  
EDDY COUNTY, NEW MEXICO**

CASE NO. 22086

**APPLICATION FOR COMPULSORY POOLING**

COLGATE OPERATING, LLC (OGRID 371449) applies for an order pooling all mineral interests within the West Winchester Bone Spring (Pool Code 97569), underlying the N/2 of Section 9, Township 19 South, Range 28 East, NMPM, Eddy County, New Mexico. In support of this application, Applicant states:

1. Applicant is a working interest owner in the proposed horizontal spacing unit and has the right to drill thereon.
2. Applicant seeks to dedicate the above referenced horizontal spacing unit to the following four initial wells:

**Madera 9 State Com 121H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit D of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Madera 9 State Com 122H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit D of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2<sup>nd</sup> Bone Spring.

**Madera 9 State Com 131H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L1 of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

**Madera 9 State Com 132H**

This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit E Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3<sup>rd</sup> Bone Spring.

3. Applicant has sought and been unable to obtain voluntary agreement for the development of these lands from all of the working interest owners in the subject spacing unit.

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

5. In order to permit Applicant to obtain its just and fair share of the oil and gas underlying the subject lands, all uncommitted interests in this horizontal spacing unit should be pooled and Applicant should be designated the operator of these proposed horizontal wells and the proposed spacing unit.

**WHEREFORE**, Applicant, requests after notice and hearing, the Division enter its order:

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

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

PADILLA LAW FIRM, P.A.

By: /s/ Ernest L. Padilla  
Ernest L. Padilla  
P.O. Box 2523  
Santa Fe, New Mexico 87504  
(505) 988-7577  
[padillalaw@gwestoffice.net](mailto:padillalaw@gwestoffice.net)  
[padillalawnm@outlook.com](mailto:padillalawnm@outlook.com)



WI OWNER LIST	WI OWNER LIST	ORRI OWNER LIST	ORRI OWNER LIST	ORRI OWNER LIST	ORRI OWNER LIST
Oxy USA WTP, LP 5 Greenway Plaza Suite 110 Houston, Texas 77046	WPX Energy Permian, LLC 3500 One Williams Center, MD 38 Tulsa, Oklahoma 74172	Heco Development Corporation PO Box 1933 Roswell, NM 88202	J. Phelps White IV PO Box 1433 Roswell, NM 88202	J. Phelps White III 883F SW 94th Lane Ocala, FL 34481	Pamela Anne Evans 7625 Parkway Circle Austin, TX 78731
Shah Exploration, LP P.O. Box 1973 Roswell, New Mexico 88202	Pennco Oil Corporation P.O. Box 2769 Hobbs, New Mexico 88241	Nadel & Gussman Capital, LLC 15 East 5th Street, Suite 3300 Tulsa, OK 74103-4340	Elizabeth White Karilyn Erika Elizabeth White Nelson 1022 Potomac Drive Houston, TX 77057	The Beverage Company 4305 North Garfield, Suite 235 Midland, TX 79705	Nilo Operating Co 1111 Bagby, Sky Lobby 2 Houston, TX 77002
Harvard Petroleum Company, LLC P.O. Box 936 Roswell, New Mexico 88202	CM Resources, LLC 3007 N. Mainfield Street, Suite 1000 Midland, TX 79701	Colkelan Corporation PO Box 25663 Albuquerque, NM 87125	Constance Ann White Erika Constance White Lloyd 7007 Lawler Ridge Houston, TX 77055	Charles F. Malone, Jr., Trustee of the Charles F. Malone Living Trust 2701 Chrysler Dr., Roswell, NM 88201-5207	WPX Energy Permian, LLC 3500 One Williams Center, MD 38 Tulsa, Oklahoma 74172
Read & Stevens, Inc. P.O. Box 1518 Roswell, New Mexico 88202		Spiral, Inc. PO Box 1933 Roswell, NM 88202	Lisa L. Dyrban PO Box 3194 Boulder, CO 80307	Linda E. Schwarz 324 W. Ramona Colorado Springs, CO 80906	Yates Brothers, a Partnership 105 South 4th Street Artesia, NM 88210
Roy G. Barton, Jr., Trustee of the Roy G. Barton, Sr., and Opal Barton Trust u/a dated 1/28/1982 1919 North Turner Street Hobbs, New Mexico 88240		Explores Petroleum Corporation PO Box 1933 Roswell, NM 88202	Dan M. Leonard, Trustee of the DML Revocable Trust dated January 10, 2007. PO Box 3422 Midland, TX 79702	Anderson-Malone, LLC PO Box 87 Roswell, NM 88202	Marathon Oil Company P.O. Box 552 Midland, Texas 79702
Anne S. Johnson 6539 Highway 42 South Fort Valley, Georgia 31030		Occidental Permian Ltd P.O. Box 27520 Houston, Texas 77227	Robert K. Leonard PO Box 294928 Kerrville, TX 78029	Gilbert J. Eaton 508 4th Street Newark, DE 19711-6745	Nestleg Energy Corporation 2308 Sierra Vista Rd Artesia, NM 88210
COG Operating LLC 600 West Illinois Avenue Midland, Texas 79701		Hangan Investment, LLC PO Box 1737 Roswell, NM 88202	LRV Corporation 20540 Highway 46W, #115- 621 Spring Branch, TX 78070	Elizabeth Eaton 5870 S. Curfise Street Littleton, CO 80120	Columbine II, LP PO Box 22854 Denver, CO 80222
D2 Resources, LLC P.O. Box 10187 Midland, Texas 79702		Hanaco LLC PO Box 750 Big Horn, WY 82833	Bean Family Limited Company PO Box 1738 Roswell, NM 88202	Laura Lynn McCampbell 6023 Weymouth Drive Dallas, TX 75252	COG Operating LLC 600 West Illinois Avenue Midland, Texas 79701
2PZ Delaware LLC 303 Veterans Airport Lane Suite 1000 Midland, Texas 79705		New Mexico Western Minerals, Inc. PO Box 1738 Roswell, NM 88202-1738	Theodore P. White PO Box 533 Roswell, NM 88202	William J. Derrick, Trustee of the Gretchen S. White Testamentary Trust 7th/6 Cheryl White Derrick 6006 Balcones Ct., Apt. 20 El Paso, TX 79912-3340	2PZ Delaware LLC 303 Veterans Airport Lane Suite 1000 Midland, Texas 79705
Soils Energy, LLC P.O. Box 51451 Midland, Texas 79710		Zia Royalty LLC PO Box 2160 Hobbs, NM 88241-2160	Cheryl White Derrick 6006 Balcones Ct., Apt. 20 El Paso, TX 79912-3340	James R. Gebel, Trustee of the James R. Gabel Revocable Living Trust PO Box 162 Roswell, NM 88202	Soils Resources, Ltd. 6804 Island Circle Midland, TX 79707

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1202 0640 0000 1043 1424

Certified Mail Fee \$ 3.00

Extra Services & Fees (check box, add fee if applicable)

☐ Return Receipt (hardcopy) \$ 2.85

☐ Return Receipt (electronic) \$ \_\_\_\_\_

☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_

☐ Adult Signature Required \$ \_\_\_\_\_

☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ 11.11

Total Postage and Fees \$ 14.11

Sent to Mail

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

Postmark  
 Here

ZPZ Delaware I LLC  
 303 Veterans Airpark Ln, Ste. 1000  
 Midland, TX 79705

95 Form 3800, April 2011 PSN 7520-02-000-9041

U.S. Postal Service™  
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Domestic Mail Only

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**OFFICIAL USE**

**Certified Mail Fee** 3.60

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

<input type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.85</u>
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

**Postage** 1.71

**Total Postage** \$ 4.16

**Sent To** \_\_\_\_\_

**Street and Apt. N°** \_\_\_\_\_

**City, State, ZIP+4** \_\_\_\_\_

**Postmark Here**

**D2 Resources, LLC**  
**PO Box 10187**  
**Midland, TX 79702**

PS Form 3800, April 2011 PSN 7530-02-000-9047

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

CD: 8/3/2021 5:34:40 PM

303 Veterans Airpark Ln, Ste. 1000  
Midland, TX 79705

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)

Article Number (Transfer from service label)

9590 9402 5941 0062 9242 39

1043 1424

4. Agent

☒ Agent

☐ Addressee

5. Priority Mail Express

☐ Registered Mail

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

6. Date of Delivery

7-19-21

7. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

8. Date of Delivery

7-19-21

9. Complete items 1, 2, and 3.

10. Print your name and address on the reverse so that we can return the card to you.

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

12. Signature

☒ Signature

☐ Agent

13. Received by (Printed Name)

AN Bur

14. Date of Delivery

7-19-21

15. 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)

16. Agent

☒ Agent

☐ Addressee

17. Priority Mail Express

☐ Registered Mail

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

18. Date of Delivery

7-19-21

19. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

20. Date of Delivery

7-19-21

21. Complete items 1, 2, and 3.

22. Print your name and address on the reverse so that we can return the card to you.

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

24. Signature

☒ Signature

☐ Agent

25. Received by (Printed Name)

AN Bur

26. Date of Delivery

7-19-21

27. 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)

28. Agent

☒ Agent

☐ Addressee

29. Priority Mail Express

☐ Registered Mail

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

30. Date of Delivery

7-19-21

31. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

32. Date of Delivery

7-19-21

33. Complete items 1, 2, and 3.

34. Print your name and address on the reverse so that we can return the card to you.

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

36. Signature

☒ Signature

☐ Agent

37. Received by (Printed Name)

AN Bur

38. Date of Delivery

7-19-21

39. 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)

40. Agent

☒ Agent

☐ Addressee

41. Priority Mail Express

☐ Registered Mail

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

42. Date of Delivery

7-19-21

43. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

44. Date of Delivery

7-19-21

45. Complete items 1, 2, and 3.

46. Print your name and address on the reverse so that we can return the card to you.

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

48. Signature

☒ Signature

☐ Agent

49. Received by (Printed Name)

AN Bur

50. Date of Delivery

7-19-21

51. 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)

52. Agent

☒ Agent

☐ Addressee

53. Priority Mail Express

☐ Registered Mail

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

54. Date of Delivery

7-19-21

55. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

56. Date of Delivery

7-19-21

57. Complete items 1, 2, and 3.

<p><b>SENDER: COMPLETE THIS SECTION</b></p> <p>1. Article Addressed to:</p> <p>D2 Resources, LLC PO Box 10187 Midland, TX 79702</p>		<p><b>COMPLETE THIS SECTION ON DELIVERY</b></p> <p>A. Signature </p> <p>B. Redelivered by (Printed Name) <u>7/24/15</u></p>	
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 5941 0062 9314 97</p> <p>7020 0640 0000 1043 1431</p>		<p>C. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail</p> <p><input checked="" type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Signature Confirmation</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>		<p><input type="checkbox"/> Agent</p> <p><input type="checkbox"/> Address</p>	
<p>4. Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Return Receipt for Merchandise</p>		<p>Domestic Return Receipt</p>	



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Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark  
Here

Postage \$ 1.71

Total Postage \$ 7.16

Sent To \_\_\_\_\_

Street and Apt. N \_\_\_\_\_

City, State, ZIP+4<sup>®</sup> \_\_\_\_\_

COG Operating, LLC  
 600 West Illinois Avenue  
 Midland, TX 79701

PS Form 3800, April 2015 PSN 7530-02-000-9053 SEE INSTRUCTIONS FOR ADDITIONAL INFORMATION

7020 0640 0000 1043 1448

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Certified Mail Fee \$ 3.60

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark  
Here

Postage \$ 1.71

Total Postage \$ 7.16

Sent To \_\_\_\_\_

Street and Apt. N \_\_\_\_\_

City, State, ZIP+4<sup>®</sup> \_\_\_\_\_

Roy G. Barton Jr Trste Roy G  
 Barton Sr & Opal Barton Trust  
 1919 North Turner Street  
 Hobbs, NM 88240

PS Form 3800, April 2015 PSN 7530-02-000-9053 SEE INSTRUCTIONS FOR ADDITIONAL INFORMATION

7020 0640 0000 1043 1462

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:

COG Operating, LLC  
 600 West Illinois Avenue  
 Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent
- B. Received by (Printed Name) SPILLER, PAUL D ☐ Addressee
- C. Date of Delivery 7-19-21
- D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:



9590 9402 5941 0062 9314 80

Article Number (Transfer from service label)

7020 0640 0000 1043 1448

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

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:

Roy G. Barton Jr Trste Roy G  
 Barton Sr & Opal Barton Trust  
 1919 North Turner Street  
 Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☒ Agent
- B. Received by (Printed Name) COVINO, RETA ☐ Addressee
- C. Date of Delivery 7/19/21
- D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:



9590 9402 5941 0062 9314 66

Article Number (Transfer from service label)

7020 0640 0000 1043 1462

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

Domestic Return Receipt

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Certified Mail Fee

3.60

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

Return Receipt (hardcopy) \$ 4.85

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$ .71

Total Postage at \$ 7.16

Sent To \$

Street and Apt. # \$

City, State, ZIP+4 \$

PS Form 3800, April 2015 PSN 7530-02-000-9053

Read & Stevens, Inc.  
PO Box 1518  
Roswell, NM 88202

Postmark  
Here**SENDER: COMPLETE THIS SECTION**

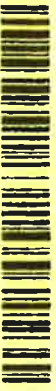
■ Complete items 1, 2, and 3.

■ 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:

Read & Stevens  
PO Box 1518  
Roswell, NM 88202



9590 9402 6367 0296 7974 26

Article Number (Transfer from service label)

0200640000 1043 1479

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X M. O. Stevens

B. Received by (Printed Name)

M. O. Stevens

C. Date of Delivery

JUL 29 2021

D. Is delivery address different from item 1? If YES, enter delivery address below:

Yes ☐ 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 ☐Signature Confirmation™ ☐Signature Confirmation Restricted Delivery ☐Domestic Return Receipt ☐**SENDER: COMPLETE THIS SECTION**

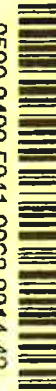
■ Complete items 1, 2, and 3.

■ 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:

Harvard Petroleum Company, LLC  
PO Box 936  
Roswell, NM 88202



9590 9402 5941 0062 9314 42

Article Number (Transfer from service label)

7020 0640 0000 1043 1486

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X M. O. Stevens

B. Received by (Printed Name)

M. O. Stevens

C. Date of Delivery

JUL 29 2021

D. Is delivery address different from item 1? If YES, enter delivery address below:

Yes ☐ 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 ☐Signature Confirmation™ ☐Signature Confirmation Restricted Delivery ☐Domestic Return Receipt ☐

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Certified Mail Fee

3.60

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

Return Receipt (hardcopy) \$ 4.85

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$ .71

Total Postage at \$ 7.16

Sent To \$

Street and Apt. # \$

City, State, ZIP+4 \$

PS Form 3800, April 2015 PSN 7530-02-000-9053

Harvard Petroleum Company, LLC  
PO Box 936  
Roswell, NM 88202

Postmark  
Here

7020 0640 0000 1043 1486

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X M. O. Stevens

B. Received by (Printed Name)

M. O. Stevens

C. Date of Delivery

JUL 29 2021

D. Is delivery address different from item 1? If YES, enter delivery address below:

Yes ☐ 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 ☐Signature Confirmation™ ☐Signature Confirmation Restricted Delivery ☐Domestic Return Receipt ☐



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7020 0640 0000 1043 1493

**Certified Mail Fee** \$ 3.60

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ 1.11

Total Postage and Fees \$ 7.16

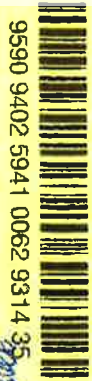
Sent To Slash Exploration, LP  
PO Box 1973  
Roswell, NM 88202  
City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

Slash Exploration, LP  
 PO Box 1973  
 Roswell, NM 88202



9590 9402 5941 0062 9314 35

Article Number (Transfer from service label)

7020 0640 0000 1043 1493

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent ☐ Addressee
- B. Received by (Printed Name) [Signature] C. Date of Delivery \_\_\_\_\_
- D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below: \_\_\_\_\_



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.

OXY USA WTP, LP  
 5 Greenway Plaza, Ste. 110  
 Houston, TX 77046



9590 9402 5941 0062 9314 28

Article Number (Transfer from service label)

7020 0640 0000 1043 1509

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent ☐ Addressee
- B. Received by (Printed Name) [Signature] C. Date of Delivery 7-19-12
- D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below: \_\_\_\_\_

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

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7020 0640 0000 1043 1509

**Certified Mail Fee** \$ 3.60

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ 1.11

Total Postage and Fees \$ 7.16

Sent To OXY USA WTP, LP  
5 Greenway Plaza, Ste. 110  
Houston, TX 77046  
City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

Ex.C-013

7020 0640 0000 1043 1516

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**OFFICIAL USE**

Certified Mail Fee \$ 3.60

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

☐ Return Receipt (hardcopy) \$ 2.85

☐ Return Receipt (electronic) \$ \_\_\_\_\_

☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_

☐ Adult Signature Required \$ \_\_\_\_\_

☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark Here

Postage \$ .71

Total Postage and Fees \$ 4.31

Sent To 7/16

Street and Apt. # 300 N. Marienfeld St., Ste. 1000

City, State, ZIP+4® Midland, TX 79701

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7020 0640 0000 1043 1523

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**OFFICIAL USE**

Certified Mail Fee \$ 3.60

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

☐ Return Receipt (hardcopy) \$ 2.85

☐ Return Receipt (electronic) \$ \_\_\_\_\_

☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_

☐ Adult Signature Required \$ \_\_\_\_\_

☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark Here

Postage \$ .71

Total Postage and Fees \$ 4.31

Sent To 7/16

Street and Apt. # PO Box 2769

City, State, ZIP+4® Hobbs, NM 88241

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

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

CM Resources, LLC  
 300 N. Marienfeld St., Ste. 1000  
 Midland, TX 79701



9590 9402 5941 0062 9314 11

Article Number (Transfer from service label)

7020 0640 0000 1043 1516

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

## COMPLETE THIS SECTION ON DELIVERY

- A. Signature Colgate Energy ☐ Agent
- ☒ Received by (Printed Name) W. A. 7021 ☐ 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 (over \$500)
- ☐ Insured Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery
- ☐ Return Receipt for Merchandise

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.

Penroc Oil Corporation  
 PO Box 2769  
 Hobbs, NM 88241



9590 9402 5941 0062 9314 04

Article Number (Transfer from service label)

7020 0640 0000 1043 1523

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

## COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent
- ☒ Received by (Printed Name) W. A. 7021 ☐ 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 (over \$500)
- ☐ Insured Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery
- ☐ Return Receipt for Merchandise

Domestic Return Receipt



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OFFICIAL USE

7020 0640 0000 1043 1530

Certified Mail Fee \$ 3.60

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

☐ Return Receipt (hardcopy) \$ 2.85

☐ Return Receipt (electronic) \$ \_\_\_\_\_

☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_

☐ Adult Signature Required \$ \_\_\_\_\_

☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ 7.16

Total Postage at \$ 7.16

Sent to Zia Royalty LLC

PO Box 2160

Hobbs, NM 88241-2160

City, State, ZIP+4<sup>®</sup>

PS Form 3800, April 2015 PSN 7530-02-000-9053

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:

Zia Royalty LLC  
PO Box 2160  
Hobbs, NM 88241-2160

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent
- B. Received by (Printed Name) Manuel J Rhoads ☐ Addressee
- C. Date of Delivery 7-19-21
- 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<sup>®</sup>
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail (over \$500)
- ☐ Registered Mail
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation<sup>™</sup>
- ☐ Signature Confirmation Restricted Delivery
- ☐ Signature Restricted Delivery
- ☐ Return Receipt for Merchandise

Domestic Return Receipt

Article Number (Transfer from service label)  
9590 9402 5941 0062 9313 98

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

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OFFICIAL USE

7020 0640 0000 1043 1561

Certified Mail Fee \$ 3.60

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

☐ Return Receipt (hardcopy) \$ 2.85

☐ Return Receipt (electronic) \$ \_\_\_\_\_

☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_

☐ Adult Signature Required \$ \_\_\_\_\_

☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ 7.11

Total Postage at \$ 7.11

Sent to Hanagan Investment, LLC

PO Box 1737

Roswell, NM 88202

City, State, ZIP+4<sup>®</sup>

PS Form 3800, April 2015 PSN 7530-02-000-9053

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.

2. Article Addressed to:

Hanagan Investment, LLC  
PO Box 1737  
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent
- B. Received by (Printed Name) Manuel J Rhoads ☐ Addressee
- C. Date of Delivery 7-19-21
- 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<sup>®</sup>
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail (over \$500)
- ☐ Registered Mail
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation<sup>™</sup>
- ☐ Signature Confirmation Restricted Delivery
- ☐ Signature Restricted Delivery
- ☐ Return Receipt for Merchandise

Domestic Return Receipt

Article Number (Transfer from service label)  
9590 9402 5941 0062 9313 67

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



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OFFICIAL USE

Certified Mail Fee \$ 2.60

Extra Services & Fees (check box, add fee appropriate)  
☐ Return Receipt (hardcopy) \$ 2.15  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark  
Here

Total Postage and Fees \$ 4.75  
 Sent to 7/16 Occidental Permian Ltd  
 P.O. Box 27520  
 Houston, Texas 77227  
 Street and Apt. No.  
 City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:  
 Occidental Permian Ltd  
 P.O. Box 27520  
 Houston, Texas 77227

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent ☐ Addressee
- B. Received by (Printed Name) [Signature] C. Date of Delivery 7-19
- D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

Article Number (Transfer from service label)  
 9590 9402 5941 0062 9311 90  
 Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

# U.S. Postal Service<sup>™</sup>

## CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

Certified Mail Fee \$ 3.40

Extra Services & Fees (check box, add fee appropriate)  
☐ Return Receipt (hardcopy) \$ 2.15  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark  
Here

Total Postage and Fees \$ 5.55  
 Sent to 7/16 Explorers Petroleum Corporation  
 PO Box 1933  
 Roswell, NM 88202  
 Street and Apt. No.  
 City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:  
 Explorers Petroleum Corporation  
 PO Box 1933  
 Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent ☒ Addressee
- B. Received by (Printed Name) [Signature] C. Date of Delivery 7/24/14
- D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

Article Number (Transfer from service label)  
 9590 9402 5941 0062 9315 96  
 Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

Ex.C-016

# U.S. Postal Service<sup>TM</sup>

## CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

OFFICIAL USE

Certified Mail Fee  
\$ 3.60

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
Here

Postage  
\$ 1.71

Total Postage and

Sent To  
\$ 7.16

Street and Apt. N  
City, State, ZIP+4<sup>®</sup>

Spiral, Inc.  
PO Box 1933  
Roswell, NM 88202

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

Article Addressed to:

Spiral, Inc.  
PO Box 1933  
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

Anne Lawrence

C. Date of Delivery

7/24/21

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

ROSWELL, NM  
JUL 23 2021  
88201

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Insured Mail (over \$500)

☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>®</sup>  
☐ Registered Mail Restricted Delivery<sup>®</sup>  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery<sup>™</sup>

Article Number (Transfer from service label)  
7020 0640 0000 1043 1592

Domestic Return Receipt

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

# U.S. Postal Service<sup>TM</sup>

## CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

OFFICIAL USE

Certified Mail Fee  
\$ 3.60

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
Here

Postage  
\$ 1.71

Total Postage and

Sent To  
\$ 7.16

Street and Apt. N  
City, State, ZIP+4<sup>®</sup>

Nadel & Gussman Capitan, LLC  
15 East 5<sup>th</sup> Street, Ste. 3300  
Tulsa, OK 74103-4340

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

Article Addressed to:

Nadel & Gussman Capitan, LLC  
15 East 5<sup>th</sup> Street, Ste. 3300  
Tulsa, OK 74103-4340

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

3/9

C. Date of Delivery

7/20

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

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Insured Mail (over \$500)

☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>®</sup>  
☐ Registered Mail Restricted Delivery<sup>®</sup>  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery<sup>™</sup>

Article Number (Transfer from service label)  
7020 0640 0000 1043 1615

Domestic Return Receipt

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



# U.S. Postal Service<sup>™</sup>

## CERTIFIED MAIL<sup>®</sup> RECEIPT

### Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)**OFFICIAL USE**

Certified Mail Fee \$ 3.60

Extra Services & Fees (check box, add fee to postage)

☐ Return Receipt (hardcopy) \$ 2.85

☐ Return Receipt (electronic) \$ \_\_\_\_\_

☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_

☐ Adult Signature Required \$ \_\_\_\_\_

☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ 7.16

Total Postage and Fees \$ 10.76

Sent to \_\_\_\_\_

Street and Apt. No. \_\_\_\_\_

City, State, ZIP+4<sup>®</sup> \_\_\_\_\_

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

Postmark Here

2020 0640 0000 1043 1622

HEYCO Development Corp.

PO Box 1933

Roswell, NM 88202

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
- 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.

HEYCO Development Corp.  
PO Box 1933  
Roswell, NM 88202

9590 9402 5941 0062 9315 58

Article Number (Transfer from service label)

020 0640 0000 1043 1622

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent
- B. Received by (Printed Name) Anne Conway ☐ Addressee
- C. Date of Delivery 7/24/21
- D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

ROSSELL, NM 88202

7/23/2021

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
- ☐ Signature Confirmation<sup>™</sup>
- ☐ Signature Confirmation Restricted Delivery
- ☐ Priority Mail Express<sup>®</sup>
- ☐ Registered Mail<sup>®</sup>
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation<sup>™</sup>
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

# U.S. Postal Service<sup>™</sup>

## CERTIFIED MAIL<sup>®</sup> RECEIPT

### Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)**OFFICIAL USE**

Certified Mail Fee \$ 3.60

Extra Services & Fees (check box, add fee to postage)

☐ Return Receipt (hardcopy) \$ 2.85

☐ Return Receipt (electronic) \$ \_\_\_\_\_

☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_

☐ Adult Signature Required \$ \_\_\_\_\_

☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ 7.16

Total Postage and Fees \$ 10.76

Sent to \_\_\_\_\_

Street and Apt. No. \_\_\_\_\_

City, State, ZIP+4<sup>®</sup> \_\_\_\_\_

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

Postmark Here

2020 0640 0000 1043 1653

LRW Corporation  
20540 Highway 46W, #115-621  
Spring Branch, TX 78070

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
- 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.

LRW Corporation  
20540 Highway 46W, #115-621  
Spring Branch, TX 78070

9590 9402 5941 0062 9315 27

Article Number (Transfer from service label)

7020 0640 0000 1043 1653

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent
- B. Received by (Printed Name) Michael Hester ☐ Addressee
- C. Date of Delivery 7-19-21
- D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

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
- ☐ Signature Confirmation<sup>™</sup>
- ☐ Signature Confirmation Restricted Delivery
- ☐ Priority Mail Express<sup>®</sup>
- ☐ Registered Mail<sup>®</sup>
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation<sup>™</sup>
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

Ex.C-018



# U.S. Postal Service<sup>TM</sup>

## CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

### Certified Mail Fee

\$ 3.60

Extra Services & Fees (attach box, add fee to postage)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark  
Here

### Postage

\$ 1.71

### Total Postage and

\$ 7.16

Sent To Robert K. Leonard  
PO Box 294928  
Kerrville, TX 78029  
 Street and Apt. No.  
 City, State, ZIP+4<sup>®</sup>

PS Form 3800, April 2015 PSN 7530-02-000-9063

See Reverse for Instructions

7020 0640 0000 1043 1660

7020 0640 0000 1043 1714

# U.S. Postal Service<sup>TM</sup>

## CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

### Certified Mail Fee

\$ 3.60

Extra Services & Fees (attach box, add fee to postage)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark  
Here

### Postage

\$ 1.71

### Total Postage and

\$ 7.16

Sent To J. Phelps White IV  
PO Box 1433  
Roswell, NM 88202  
 Street and Apt. No.  
 City, State, ZIP+4<sup>®</sup>

PS Form 3800, April 2015 PSN 7530-02-000-9063

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:  
 Robert K. Leonard  
 PO Box 294928  
 Kerrville, TX 78029

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent  
Robert K. Leonard  
 B. Received by (Printed Name) ☐ Addressee  
Robert K. Leonard  
 C. Date of Delivery  
7/21/21  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:



9590 9402 5941 0062 9315 10

Article Number (Transfer from service label)

7020 0640 0000 1043 1660

Form 3811, July 2015 PSN 7530-02-000-9063

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:  
 J. Phelps White IV  
 PO Box 1433  
 Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent  
J. Phelps White  
 B. Received by (Printed Name) ☐ Addressee  
J. Phelps White  
 C. Date of Delivery  
7/21/21  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:



9590 9402 5941 0062 9316 19

Article Number (Transfer from service label)

7020 0640 0000 1043 1714

PS Form 3811, July 2015 PSN 7530-02-000-9063



3. Service Type  
☒ Priority Mail Express  
☐ Registered Mail  
☐ Registered Mail Restricted Delivery  
☐ Certified Mail  
☒ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery

Domestic Return Receipt



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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

**Certified Mail Fee** \$ 3.40  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ 0.00  
☐ Certified Mail Restricted Delivery \$ 0.00  
☐ Adult Signature Required \$ 0.00  
☐ Adult Signature Restricted Delivery \$ 0.00  
Postage \$ 1.11  
Total Postage and Fees \$ 4.51  
Sent To Theodore P. White  
PO Box 533  
Roswell, NM 88202  
Street and Apt. No.  
City, State, ZIP+4®  
PS Form 3800, June 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Theodore P. White  
PO Box 533  
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent  
B. Received by (Printed Name) ☐ Addressee  
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  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)

Article Number (Transfer from service label)  
9590 9402 5941 0062 9316 64 220 55  
Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

**Certified Mail Fee** \$ 3.40  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ 0.00  
☐ Certified Mail Restricted Delivery \$ 0.00  
☐ Adult Signature Required \$ 0.00  
☐ Adult Signature Restricted Delivery \$ 0.00  
Postage \$ 1.11  
Total Postage and Fees \$ 4.51  
Sent To Laura Lynn McCampbell  
6023 Weymouth Drive  
Dallas, TX 75252  
Street and Apt. No.  
City, State, ZIP+4®  
PS Form 3800, June 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1.

Laura Lynn McCampbell  
6023 Weymouth Drive  
Dallas, TX 75252

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent  
B. Received by (Printed Name) ☐ Addressee  
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  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)

Article Number (Transfer from service label)  
9590 9402 5941 0062 9231 95 220 55  
Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt



2020 0640 0000 1043 1783

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee 3.40

Extra Services & Fees (attach box, add fee to postage)

<input type="checkbox"/> Return Receipt (hardcopy)	\$ <u>4.05</u>
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage .71

Total Postage and Fees 4.11

Sent to 7/16

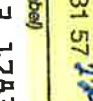
Street and Apt. No. Gilbert J. Eaton  
508 4th Street  
Newark, DE 19711-6745

City, State, ZIP+4

Postmark Here

PS Form 3860, April 2015 PSN 7530-02-000-9004 See Reverse for Instructions

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL® RECEIPT</b> <b>Domestic Mail Only</b>	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a>	
<b>OFFICIAL USE</b>	
Certified Mail Fee <i>\$4.00</i>	Postmark Here
Extra Services & Fees (attach box, add fee amount) <input type="checkbox"/> Return Receipt (hardcopy)      \$ <i>\$1.85</i> <input type="checkbox"/> Return Receipt (electronic)      \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery      \$ _____ <input type="checkbox"/> Adult Signature Required      \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery      \$ _____	
Postage <i>\$11</i>	
Total Postage and \$ <i>7.16</i>	
Sent to Street and Apt. No. City, State, ZIP+4	
Anderson-Malone, LLC PO Box 87 Roswell, NM 86202	

<b>SENDER: COMPLETE THIS SECTION</b>	
<p> <input type="checkbox"/> Complete items 1, 2, and 3.  <input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.  <input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.         </p>	
<p>           1. Article Addressed to:            Gilbert J. Eaton            508 4th Street            Newark, DE 19711-6745         </p>	
<p>           2. Article Number (Transfer from service label)            7020 0640 0000 1043 1783         </p>	
 <p>9590 9402 5941 0062 9231 57</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"/> 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>	
<p>4. Delivery Address (Different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No)</p> <p>           D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No            If YES, enter delivery address below:         </p>	
<p>           A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee            B. Receive for <input type="checkbox"/> Addressee            C. Date of Delivery         </p>	
<p>           5. 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:  
Anderson-Malone, LLC  
PO Box 87  
Roswell, NM 88202

2. Article Number (Transfer from service label)  
7020 0640 0000 1043 1790

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail<sup>SM</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail (over \$500)  
☐ Registered Mail<sup>®</sup>  
☐ Registered Mail Restricted Delivery<sup>®</sup>  
☐ Return Receipt for Merchandise<sup>®</sup>  
☐ Signature Confirmation<sup>®</sup>  
☐ Signature Confirmation Restricted Delivery<sup>®</sup>

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
X [Signature]  
B. Received by (Printed Name)  
David M. Phares  
C. Date of Delivery  
[Blank]  
D. Is delivery address different from item 1? ☒ Yes  
If YES, enter delivery address below: ☐ No

ROSWELL, NM JUL 19 2006

Domestic Return Receipt



U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee

\$ 3.60

Extra Services & Fees (attach box, and fee as appropriate)

☐ Return Receipt (hardcopy) \$ 2.85

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark Here

Postage \$ 1.71

Total Postage on \$ 7.16

Sent to Charles F. Malone, Jr., Trustee of the Charles F. Malone Living Trust

Street and Apt. N 2701 Chrysler Dr.

City, State, ZIP+4 Roswell, NM 88201-5207

PS Form 3810, April 2015 PSN 7530-02-000-9054 See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ X Charles F. Malone, Jr.

☐ Agent

B. Received by (Printed Name) Charles F. Malone, Jr.

C. Date of Delivery 7/19/21

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

If YES, enter delivery address below:

3. Service Type

☐ Adult Signature

☐ Registered Mail

☐ Certified Mail

☒ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail (over \$500)

☐ Signature Confirmation

☐ Restricted Delivery

Article Number (Transfer from service label)

20 0640 0000 1043 1813

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

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee

\$ 3.60

Extra Services & Fees (attach box, and fee as appropriate)

☐ Return Receipt (hardcopy) \$ 2.85

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark Here

Postage \$ 1.71

Total Postage on \$ 7.16

Sent to The Beveridge Company

Street and Apt. N 4305 North Garfield, Suite 235

City, State, ZIP+4 Midland, TX 79705

PS Form 3810, April 2015 PSN 7530-02-000-9054 See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ X Charles F. Malone, Jr.

☐ Agent

B. Received by (Printed Name) Charles F. Malone, Jr.

C. Date of Delivery 7-19-21

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

If YES, enter delivery address below:

3. Service Type

☐ Adult Signature

☐ Registered Mail

☐ Certified Mail

☒ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail (over \$500)

☐ Signature Confirmation

☐ Restricted Delivery

Article Number (Transfer from service label)

7020 0640 0000 1043 1837

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



# U.S. Postal Service<sup>™</sup>

## CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

### OFFICIAL USE

Certified Mail Fee  
\$3.60

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark  
Here

Total Postage at  
\$ 7.16  
 Sent To Columbine II, LP  
PO Box 22854  
Denver, CO 80222  
 Street and Apt. N  
 City, State, ZIP+4<sup>®</sup>

PS Form 3800, April 2015 PSN 7530-02-000-9063 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:  
 Columbine II, LP  
 PO Box 22854  
 Denver, CO 80222



9590 9402 5941 0062 9232 872515

2. Article Number (Transfer from service label)  
 7020 0640 0000-3043 1675

PS Form 3811, July 2015 PSN 7530-02-000-9063

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent 20  
 B. Received by (Printed Name) D. Jones ☐ Addressee  
 C. Date of Delivery 7.20.21  
 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<sup>®</sup>  
☒ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail (over \$500)  
☐ Insured Mail Restricted Delivery  
☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>®</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

# U.S. Postal Service<sup>™</sup>

## CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

### OFFICIAL USE

Certified Mail Fee  
\$4.40

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark  
Here

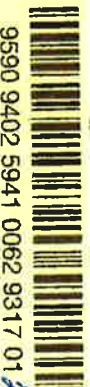
Total Postage at  
\$ 7.17  
 Sent To Nestegg Energy Corporation  
2308 Sierra Vista Rd.  
Artesia, NM 88210  
 Street and Apt. N  
 City, State, ZIP+4<sup>®</sup>

PS Form 3800, April 2015 PSN 7530-02-000-9063

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:  
 Nestegg Energy Corporation  
 2308 Sierra Vista Rd.  
 Artesia, NM 88210



9590 9402 5941 0062 9317 012083

2. Article Number (Transfer from service label)  
 7020 0640 0000 1043 1882

PS Form 3811, July 2015 PSN 7530-02-000-9063

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent 19  
 B. Received by (Printed Name) [Signature] ☐ Addressee  
 C. Date of Delivery 7-19-21  
 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<sup>®</sup>  
☒ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail (over \$500)  
☐ Insured Mail Restricted Delivery  
☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>®</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

Domestic Return Rec

Ex.C-023

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

1929 1043 0000 0640 2020

Certified Mail Fee \$ 3.60

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

☐ Return Receipt (hardcopy) \$ 2.85

☐ Return Receipt (electronic) \$ \_\_\_\_\_

☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_

☐ Adult Signature Required \$ \_\_\_\_\_

☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ 1.71

Total Postage on \$ 7.16

Sent to \_\_\_\_\_

Street and Apt. N \_\_\_\_\_

City, State, ZIP+4 \_\_\_\_\_

Nilo Operating Co.  
1111 Bagby, Sky Lobby 2  
Houston, TX 77002

PS Form 3800, April 2015 PSN 7530-02-000-9053

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

Nilo Operating Co.  
1111 Bagby, Sky Lobby 2  
Houston, TX 77002

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☒ Agent ☐ Addressee
- B. Received by (Printed Name) [Name] C. Date of Delivery [Date]
- D. Is delivery address different from item 1? ☐ Yes ☒ No  
If YES, enter delivery address below:

9590 9402 5941 0062 9232 56 12065

Article Number (Transfer from service label)

20 0640 0000 1043 1929

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

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Insured Mail (over \$500)

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

1936 1043 0000 0640 2020

Certified Mail Fee \$ 3.60

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

☐ Return Receipt (hardcopy) \$ 2.85

☐ Return Receipt (electronic) \$ \_\_\_\_\_

☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_

☐ Adult Signature Required \$ \_\_\_\_\_

☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ 1.71

Total Postage on \$ 7.16

Sent to \_\_\_\_\_

Street and Apt. N \_\_\_\_\_

City, State, ZIP+4 \_\_\_\_\_

Pamela Anne Evans  
7625 Parkview Circle  
Austin, TX 78731

PS Form 3800

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:

Pamela Anne Evans  
7625 Parkview Circle  
Austin, TX 78731

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☒ Agent ☐ Addressee
- B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery \_\_\_\_\_
- D. Is delivery address different from item 1? ☐ Yes ☒ No  
If YES, enter delivery address below:

9590 9402 5941 0062 9232 63 12065

Article Number (Transfer from service label)

20 0640 0000 1043 1936

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

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Insured Mail (over \$500)

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt



7020 0640 0000 1043 1684

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$ 3.40

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

☐ Return Receipt (hardcopy) \$ 2.05

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$ 7.16

Total Postage and Fees \$ 7.16

Sent To Lisa L. Durban  
 PO Box 3194  
 Boulder, CO 80307

Street and Apt. No.  
 City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for instructions

Postmark  
Here

**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 L. Durban  
 PO Box 3194  
 Boulder, CO 80307

2. Article Number (Transfer from service label)  
 7020 0640 0000 1043 1684

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

4. Domestic Return Receipt

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

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Lisa L. Durban

## C. Date of Delivery

7-31-21

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

# U.S. Postal Service<sup>™</sup>

## CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee	\$ 3.60
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.85
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 1.71
Total Postage and	\$ 7.16
Sent To	
Street and Apt. No.	Solis Energy, LLC PO Box 51451 Midland, TX 79710
City, State, ZIP+4	

Postmark  
Here

Solis Energy, LLC  
PO Box 51451  
Midland, TX 79710

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

# U.S. Postal Service<sup>™</sup>

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Domestic Mail Only

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**OFFICIAL USE**

Certified Mail Fee	\$ 3.60
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.85
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 1.71
Total Postage and	\$ 7.16
Sent To	
Street and Apt. No.	Anne S. Johnson 6529 Highway 42 South Fort Valley, GA 31030
City, State, ZIP+4	

Postmark  
Here

Anne S. Johnson  
6529 Highway 42 South  
Fort Valley, GA 31030

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

# U.S. Postal Service<sup>™</sup>

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Domestic Mail Only

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**OFFICIAL USE**

Certified Mail Fee	\$ 3.60
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.85
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 1.71
Total Postage and	\$ 7.16
Sent To	
Street and Apt. No.	Hanaco LLC PO Box 750 Big Horn, WY 82833
City, State, ZIP+4	

Postmark  
Here

Hanaco LLC  
PO Box 750  
Big Horn, WY 82833

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

# U.S. Postal Service<sup>™</sup>

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Domestic Mail Only

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**OFFICIAL USE**

Certified Mail Fee	\$ 3.60
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.85
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 1.71
Total Postage and	\$ 7.16
Sent To	
Street and Apt. No.	MYJA Trust, James E. Geigey, Trustee 6804 Island Circle Midland, TX 79707
City, State, ZIP+4	

Postmark  
Here

MYJA Trust, James E. Geigey, Trustee  
6804 Island Circle  
Midland, TX 79707

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

# U.S. Postal Service<sup>™</sup>

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**OFFICIAL USE**

Certified Mail Fee	\$ 3.60
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.85
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 1.71
Total Postage and	\$ 7.16
Sent To	
Street and Apt. No.	Jared Partners, Ltd. 6804 Island Circle Midland, TX 79707
City, State, ZIP+4	

Postmark  
Here

Jared Partners, Ltd.  
6804 Island Circle  
Midland, TX 79707

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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**OFFICIAL USE**

Certified Mail Fee	\$ 3.60
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.85
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 1.71
Total Postage and	\$ 7.16
Sent To	
Street and Apt. No.	Dan M. Leonard, Trustee of the DML Revocable Trust dated January 10, 2007. PO Box 3422 Midland, TX 79702
City, State, ZIP+4	

Postmark  
Here

Dan M. Leonard, Trustee of the DML  
Revocable Trust dated January 10, 2007.  
PO Box 3422  
Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



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**OFFICIAL USE**

Certified Mail Fee \$ 3.40

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark Here

Postage \$ .71

Total Postage and Fees \$ 4.11

Sent to Lisa L. Durban  
PO Box 3194  
Boulder, CO 80307  
 Street and Apt. No.  
 City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$ 3.40

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark Here

Postage \$ .71

Total Postage and Fees \$ 4.11

Sent to Elizabeth White Kanaly f/k/a  
Elizabeth White Nelson  
1022 Potomac Drive  
Houston, TX 77057  
 Street and Apt. No.  
 City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service<sup>TM</sup>  
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For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$ 3.40

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark Here

Postage \$ .71

Total Postage and Fees \$ 4.11

Sent to William J. Derrick, Trustee Gretchen S.  
White TTrust f/b/o Cheryl White Derrick  
6006 Balcones Ct., Apt. 20  
El Paso, TX 79912-3340  
 Street and Apt. No.  
 City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Ex.C-027

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For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$ 3.40

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark Here

Postage \$ .71

Total Postage and Fees \$ 4.11

Sent to Constance Ann White f/k/a Constance  
White Lloyd  
7007 Lawler Ridge  
Houston, TX 77055  
 Street and Apt. No.  
 City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service<sup>TM</sup>  
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 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$ 3.40

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark Here

Postage \$ .71

Total Postage and Fees \$ 4.11

Sent to Cheryl White Derrick  
6006 Balcones Ct., Apt. 20  
El Paso, TX 79912-3340  
 Street and Apt. No.  
 City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service<sup>TM</sup>  
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 Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$ 3.40

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$ 2.85  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postmark Here

Postage \$ .71

Total Postage and Fees \$ 4.11

Sent to Elizabeth Eaton  
5870 S. Curcie Street  
Littleton, CO 80120  
 Street and Apt. No.  
 City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



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

 For delivery information, visit our website at [www.usps.com](http://www.usps.com)
**OFFICIAL USE**

<b>Certified Mail Fee</b>	\$ <u>3.60</u>
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.85</u>
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
<b>Postage</b>	\$ <u>.71</u>
<b>Total Postage on</b>	\$ <u>4.31</u>
<b>Sent to</b>	<u>7/16</u>
<b>Street and Apt. N</b>	<u>324 W. Ramona</u>
<b>City, State, ZIP+4</b>	<u>Colorado Springs, CO 80906</u>

 Postmark  
Here

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

 For delivery information, visit our website at [www.usps.com](http://www.usps.com)
**OFFICIAL USE**

<b>Certified Mail Fee</b>	\$ <u>3.60</u>
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.85</u>
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
<b>Postage</b>	\$ <u>.71</u>
<b>Total Postage on</b>	\$ <u>4.31</u>
<b>Sent to</b>	<u>7/16</u>
<b>Street and Apt. N</b>	<u>6006 Balcones Ct., Apt. 20</u>
<b>City, State, ZIP+4</b>	<u>El Paso, TX 79912-3340</u>

 Postmark  
Here

 Cheryl White Derrick  
 6006 Balcones Ct., Apt. 20  
 El Paso, TX 79912-3340

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<b>Postage</b>	\$ <u>.71</u>
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<b>City, State, ZIP+4</b>	<u>Midland, TX 79705</u>

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<b>Postage</b>	\$ <u>.71</u>
<b>Total Postage on</b>	\$ <u>4.31</u>
<b>Sent to</b>	<u>7/16</u>
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<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
<b>Postage</b>	\$ <u>.71</u>
<b>Total Postage on</b>	\$ <u>4.31</u>
<b>Sent to</b>	<u>7/16</u>
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<b>City, State, ZIP+4</b>	<u>Artesia, NM 88210</u>

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 Artesia, NM 88210

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R. Gebel Revocable Living Trust  
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Padilla Law Firm, P.A.  
Ernest L. Padilla  
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Roswell, NM 88202-1738

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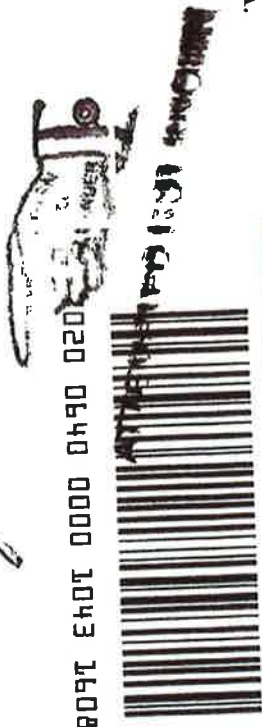
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Ernest L. Padilla  
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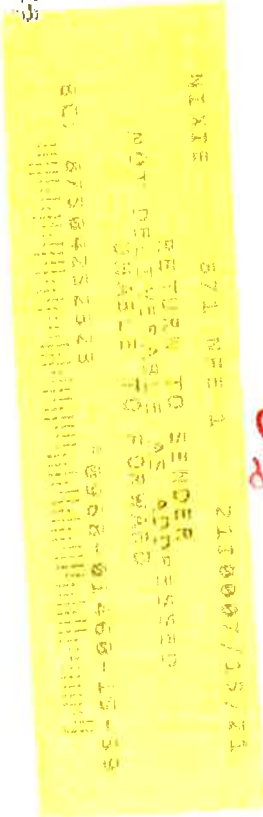
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Santa Fe, NM 87504

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PO Box 1738  
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Midland, Texas 79702

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City, State, ZIP+

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Santa Fe, NM 87504



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Marathon Oil Company  
P.O. Box 552  
Midland, Texas 79702

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<b>COMPULSORY POOLING APPLICATION CHECKLIST</b>	
<b>ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS</b>	
<b>Case: 22085</b>	<b>Applicant's Response</b>
<b>Date</b>	8/3/2021
<b>Applicant</b>	Colgate Operating, LLC
<b>Designated Operator &amp; OGRID (affiliation if applicable)</b>	371449
<b>Applicant's Counsel</b>	Ernest L. Padilla
<b>Case Title:</b>	Application of Colgate Operating, LLC for compulsory pooling in Eddy County, New Mexico
<b>Entries of Appearance/Intervenors</b>	None
<b>Well Family</b>	Klondike 9 State Com
<b>Formation/Pool</b>	
<b>Formation Name(s) or Verticle Extent</b>	West Winchester Bone Spring
<b>Primary Product (Oil or Gas)</b>	Oil
<b>Pooling this verticle extent</b>	Bone Spring Formation
<b>Pool Name and Pool Code</b>	West Winchester Bone Spring - Pool Code 97569
<b>Well Location Setback Rules</b>	Standard
<b>Spacing Unit Size</b>	320
<b>Spacing Unit</b>	
<b>Type (Horizontal/Verticle)</b>	Horizontal
<b>Size (acres)</b>	320
<b>Building Blocks</b>	160
<b>Orientation</b>	E/W
<b>Description: TRS/County</b>	S/2 of Section 9, 19S, 28E, Eddy County, NM
<b>Description: TRS/County</b>	Eddy
<b>Standard Horizontal Well Spacing Unit</b>	Yes
<b>Other Situations</b>	
<b>Depth Severance: No</b>	NO
<b>Proximity Tracts: If yes, description</b>	NO
<b>Proximity Defining Well: If yes, description</b>	NO
<b>Applicant's Ownership in Each Tract</b>	Ex. 9 pgs. 5-6
<b>Well(s)</b>	
<b>Name &amp; API (if assigned), surface and bottom hole location</b>	
<b>footages, completion target, orientation, completion status</b>	
<b>(standard or non-standard)</b>	
	<p><b>Klondike 9 State Com 123H</b> This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2nd Bone Spring.</p> <p><b>Klondike 9 State Com 124H</b> This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit M of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2nd Bone Spring.</p> <p><b>Klondike 9 State Com 133H</b> This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3rd Bone Spring.</p> <p><b>Klondike 9 State Com 134H</b> This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit M Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3rd Bone Spring.</p>
<b>Horizontal Well First and Last Take Points</b>	Ex.1 through 4
<b>Completion Target (Formation, TVD and MD)</b>	Bone Spring
	<b>Identify the Exhibit and Page for Information below this line</b>
<b>AFE Capex and Operating Costs</b>	
<b>Drilling Supervision/Month \$</b>	\$8000/\$800
<b>Production Supervision/Month \$</b>	

<b>Justification for Supervision Costs</b>	Standard in area
<b>Request Risk Charge</b>	200%
<b>Notice of Hearing</b>	
<b>Proposed Notice of Hearing</b>	Exhibit C pgs. 2-9
<b>Proof of Mailed Notice of Hearing (20 days before hearing)</b>	Exhibit C pgs. 10-33
<b>Proof of Published Notice of Hearing (10 days before hearing)</b>	None
<b>Ownership Determination</b>	
<b>Land Ownership Schematic of the Spacing Unit</b>	Exhibit A pgs. 5-6
<b>Tract List (including lease numbers and owners)</b>	Exhibit A pgs. 5-6
<b>Pooled Parties (including ownership type)</b>	Exhibit A pgs. 5-6
<b>Unlocatable Parties to be Pooled</b>	None
<b>Ownership Depth Severance (including percentage above &amp; below)</b>	None
<b>Joinder</b>	
<b>Sample Copy of Proposed Letter</b>	Exhibit A pgs. 8-10
<b>List of Interest Owners (ie Exhibit A of JOA)</b>	Exhibit A pgs. 5-6
<b>Chronology of Contact with Non-Joined Working Interests</b>	Exhibit A pg. 7
<b>Overhead Rates in Proposal Letter</b>	Exhibit A pgs. 8-10
<b>Cost Estimates to Drill and Complete</b>	Exhibit A pgs. 11-14
<b>Cost Estimate to Equip Well</b>	Exhibit A pgs. 11-14
<b>Cost Estimate for Production Facilities</b>	
<b>Geology</b>	
<b>Summary (including special considerations)</b>	Exhibit B pgs. 1-4
<b>Spacing Unit Schematic</b>	Exhibit B1.2 pg. 7
<b>Gunbarrel/Lateral Trajectory Schematic</b>	Exhibit B1.3 pg. 8
<b>Well Orientation (with rationale)</b>	East West
<b>Target Formation</b>	Exhibit B1.8, B1.9, B1.10 pgs. 13-15
<b>HSU Cross Section</b>	Exhibit B1.10 pgs. 13, 14, 15
<b>Depth Severance Discussion</b>	
<b>Forms, Figures and Tables</b>	
<b>C-102</b>	will be supplemented
<b>Tracts</b>	Exhibit A-9-10 pgs. 5-6 and 15-16
<b>Summary of Interests, Unit Recapitulation (Tracts)</b>	Exhibit A-9-10 pgs. 5-6 and 15-16
<b>General Location Map (including basin)</b>	Exhibit B1.1 pg. 6
<b>Well Orientation (with rationale)</b>	area preference
<b>Structure Contour Map - Subsea Depth</b>	Exhibit B1.4 pg. 9, and B.1.6 pg. 11
<b>Cross Section Location Map (including wells)</b>	Exhibit B1.2 pg. 7
<b>Cross Section (including Landing Zone)</b>	Exhibits B1.8, B1.9, B1.10 pgs. 13, 14, 15
<b>Additional Information</b>	
<b>CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.</b>	
<b>Printed Name: (Attorney or Party Representative):</b>	Ernest L. Padilla
<b>Signed Name: (Attorney or Party Representative):</b>	
<b>Date:</b>	8/3/2021

COMPULSORY POOLING APPLICATION CHECKLIST	
ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS	
Case: 22086	<b>Applicant's Response</b>
Date	8/3/2021
Applicant	Colgate Operating, LLC
Designated Operator & OGRID (affiliation if applicable)	371449
Applicant's Counsel	Ernest L. Padilla
Case Title:	Application of Colgate Operating, LLC for compulsory pooling in Eddy County, New Mexico
Entries of Appearance/Intervenors	None
Well Family	Madera 9 State Com
Formation/Pool	
Formation Name(s) or Verticle Extent	West Winchester Bone Spring
Primary Product (Oil or Gas)	Oil
Pooling this verticle extent	Bone Spring Formation
Pool Name and Pool Code	West Winchester Bone Spring - Pool Code 97569
Well Location Setback Rules	Standard
Spacing Unit Size	320
Spacing Unit	
Type (Horizontal/Verticle)	Horizontal
Size (acres)	320
Building Blocks	160
Orientation	E/W
Description: TRS/County	N/2 of Section 9, 19S, 28E, Eddy County, NM
Description: TRS/County	Eddy
Standard Horizontal Well Spacing Unit	Yes
Other Situations	
Depth Severance: No	NO
Proximity Tracts: If yes, description	NO
Proximity Defining Well: If yes, description	NO
Applicant's Ownership in Each Tract	
Well(s)	
Name & API (if assigned), surface and bottom hole location	
footages, completion target, orientation, completion status	
(standard or non-standard)	
	<b>Madera 9 State Com 121H</b> This proposed well is a horizontal well with a legal surface location in Units I/P of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2nd Bone Spring.
	<b>Madera 9 State Com 122H</b> This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit D of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 7,000 feet and TMD of approximately 12,080 feet, and will target the 2 <sup>nd</sup> Bone Spring.
	<b>Madera 9 State Com 131H</b> This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit L1 of Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3 <sup>rd</sup> Bone Spring.
	<b>Madera 9 State Com 132H</b> This proposed well is a horizontal well with a legal surface location in Units A/H of Section 9, T19S, R28E, and an intended legal bottom hole location in Unit E Section 9, T19S, R28E, Eddy County, New Mexico. It will have a TVD of approximately 8,150 feet and TMD of approximately 13,230 feet, and will target the 3rd Bone Spring.
Horizontal Well First and Last Take Points	
Completion Target (Formation, TVD and MD)	
	Identify the Exhibit and Page for Information below this line
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$8000/\$800
Production Supervision/Month \$	

Justification for Supervision Costs	Standard in area
Request Risk Charge	200%
<b>Notice of Hearing</b>	
Proposed Notice of Hearing	Exhibit C pgs. 2-9
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit C pgs. 10-33
Proof of Published Notice of Hearing (10 days before hearing)	None
<b>Ownership Determination</b>	
Land Ownership Schematic of the Spacing Unit	Exhibit A pgs. 15-16
Tract List (including lease numbers and owners)	Exhibit A pgs. 15-16
Pooled Parties (including ownership type)	Exhibit A pgs. 15-16
Unlocatable Parties to be Pooled	None
Ownership Depth Severance (including percentage above & below)	None
<b>Joinder</b>	
Sample Copy of Proposed Letter	Exhibit A pgs. 18-20
List of Interest Owners (ie Exhibit A of JOA)	Exhibit A pgs. 15-16
Chronology of Contact with Non-Joined Working Interests	Exhibit A pg. 17
Overhead Rates in Proposal Letter	Exhibit A pgs. 18-20
Cost Estimates to Drill and Complete	Exhibit A pgs. 21-24
Cost Estimate to Equip Well	Exhibit A pgs. 21-24
Cost Estimate for Production Facilities	
<b>Geology</b>	
Summary (including special considerations)	Exhibit B pgs. 1-4
Spacing Unit Schematic	Exhibit B1.2 pg. 7
Gunbarrel/Lateral Trajectory Schematic	Exhibit B1.3 pg. 8
Well Orientation (with rationale)	East West
Target Formation	Exhibit B1.8, B1.9, B1.10 pgs. 13-15
HSU Cross Section	Exhibit B1.8, B1.9, B1.10 pgs. 13-15
Depth Severance Discussion	
Forms, Figures and Tables	
C-102	will be supplemented
Tracts	Exhibit A-10 pgs. 15-16
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit A-10 pgs. 15-16
General Location Map (including basin)	Exhibit B1.2 pg. 7
Well Orientation (with rationale)	East West
Structure Contour Map - Subsea Depth	Exhibit B1.4 pg9, and B1.6 pg. 11
Cross Section Location Map (including wells)	Exhibit B1.2 pg. 7
Cross Section (including Landing Zone)	Exhibits B1.8, B1.9, B1.10 pgs. 13-15
<b>Additional Information</b>	
<b>CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.</b>	
Printed Name: (Attorney or Party Representative):	Ernest L. Padilla
Signed Name: (Attorney or Party Representative):	
Date:	8/3/2021