

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

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

**CASE NO. 23643**

**HEARING EXHIBITS**

Compulsory Pooling Checklist

- |           |   |
|-----------|---|
| Exhibit A | Self-Affirmed Statement of Mark Hajdik  |
| A-1       | Application & Proposed Notice of Hearing  |
| A-2       | C-102s  |
| A-3       | Plat of Tracts, Tract Ownership, Applicable Lease Numbers, Parties to Pool, Unit Recapitulation |
| A-4       | Sample Well Proposal Letter & AFEs  |
| A-5       | Chronology of Contact   |
| Exhibit B | Self-Affirmed Statement of Christopher Cantin   |
| B-1       | Regional Locator Map  |
| B-2       | Cross-Section Location Map of the Koala 9 Fed Com 111H-114H, 121H-124H, and 131H-134H wells     |
| B-3       | First Bone Spring Subsea Structure Map  |
| B-4       | Second Bone Spring Subsea Structure Map   |
| B-5       | Third Bone Spring Subsea Structure Map  |
| B-6       | Bone Spring Stratigraphic Cross-Section   |
| B-7       | Gun Barrel Diagram of the Koala 9 Fed Com 111H-114H, 121H-124H, and 131H-134H wells             |
| B-8       | Cross-Section Location Map of the Koala 9 Fed Com 201H-204H wells                               |
| B-9       | Wolfcamp Subsea Structure Map   |
| B-10      | Wolfcamp Stratigraphic Cross-Section  |

- B-11 Gun Barrel Diagram of the Koala 9 Fed Com 201H-204H wells
- Exhibit C Self-Affirmed Statement of Dana S. Hardy
- C-1 Sample Notice Letter to All Interested Parties
- C-2 Chart of Notice to All Interested Parties
- C-3 Copies of Certified Mail Receipts and Returns
- C-4 Affidavit of Publication for July 06, 2023

# COMPULSORY POOLING APPLICATION CHECKLIST

**ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS**

<b>Case: 23643</b>	<b>APPLICANT'S RESPONSE</b>
<b>Date</b>	<b>July 20, 2023</b>
Applicant	Colgate Production, LLC
Designated Operator & OGRID (affiliation if applicable)	Permian Resources Operating, LLC (OGRID No. 372165)
Applicant's Counsel:	Hinkle Shanor LLP
Case Title:	Application of Colgate Production, LLC for Compulsory Pooling, Eddy County, New Mexico
Entries of Appearance/Intervenors:	Avant Operating, LLC
Well Family	Koala
<b>Formation/Pool</b>	
Formation Name(s) or Vertical Extent:	Bone Spring
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Bone Spring
Pool Name and Pool Code:	Burton Flat, Morrow (Pro Gas) (Code 73280)
Well Location Setback Rules:	Statewide
<b>Spacing Unit</b>	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	320-acre
Building Blocks:	Quarter-Quarter
Orientation:	West to East
Description: TRS/County	S/2 S/2 of Sections 9 and 10, Township 20 South, Range 28 East, Eddy County, New Mexico
Standard Horizontal Well Spacing Unit (Y/N), If No, describe and is approval of non-standard unit requested in this application?	Yes
<b>Other Situations</b>	
Depth Severance: Y/N. If yes, description	No
Proximity Tracts: If yes, description	N/A
Proximity Defining Well: if yes, description	N/A
Applicant's Ownership in Each Tract	Exhibit A-3
<b>Well(s)</b>	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	Add wells as needed
Well #1	Koala 9 Fed Com 114H (API # ---) SHL: 1144' FSL & 105' FEL (Unit P), Section 8, T20S, R28E BHL: 330' FSL & 10' FEL (Unit P), Section 10, T20S, R28E Completion Target: First Bone Spring (6,304' TVD)
Well #2	Koala 9 Fed Com 124H (API # ---) SHL: 1144' FSL & 165' FEL (Unit P), Section 8, T20S, R28E BHL: 330' FSL & 10' FEL (Unit P), Section 10, T20S, R28E Completion Target: Second Bone Spring (7,329' TVD)

Well #2 <i>Received by OCD: 7/18/2023 4:45:46 PM</i>	Koala 9 Fed Com 134H (API # ---) SHL: 1144' FSL & 225' FEL (Unit P), Section 8, T20S, R28E BHL: 330' FSL & 10' FEL (Unit P), Section 10, T20S, R28E Completion Target: Third Bone Spring (8,524' TVD)	<i>Page 4 of 138</i>
Horizontal Well First and Last Take Points	Exhibit A-2	
Completion Target (Formation, TVD and MD)	Exhibit A-4	
<b>AFE Capex and Operating Costs</b>		
Drilling Supervision/Month \$	\$8,000.00	
Production Supervision/Month \$	\$800.00	
Justification for Supervision Costs	Exhibit A	
Requested Risk Charge	200%	
<b>Notice of Hearing</b>		
Proposed Notice of Hearing	Exhibit A-1	
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit C-1, Exhibit C-2, Exhibit C-3	
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit C-4	
<b>Ownership Determination</b>		
Land Ownership Schematic of the Spacing Unit	Exhibit A-3	
Tract List (including lease numbers and owners)	Exhibit A-3	
If approval of Non-Standard Spacing Unit is requested, Tract List (including lease numbers and owners) of Tracts subject to notice requirements.	N/A	
Pooled Parties (including ownership type)	Exhibit A-3	
Unlocatable Parties to be Pooled	N/A	
Ownership Depth Severance (including percentage above & below)	N/A	
<b>Joinder</b>		
Sample Copy of Proposal Letter	Exhibit A-4	
List of Interest Owners (ie Exhibit A of JOA)	Exhibit A-3	
Chronology of Contact with Non-Joined Working Interests	Exhibit A-5	
Overhead Rates In Proposal Letter	Exhibit A-4	
Cost Estimate to Drill and Complete	Exhibit A-4	
Cost Estimate to Equip Well	Exhibit A-4	
Cost Estimate for Production Facilities	Exhibit A-4	
<b>Geology</b>		
Summary (including special considerations)	Exhibit B	
Spacing Unit Schematic	Exhibit B-1	
Gunbarrel/Lateral Trajectory Schematic	Exhibit B-7	
Well Orientation (with rationale)	Exhibit B	
Target Formation	Exhibit B	
HSU Cross Section	Exhibit B-2	
Depth Severance Discussion	N/A	
<b>Forms, Figures and Tables</b>		
C-102	Exhibit A-2	
Tracts	Exhibit A-3	
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit A-3	
General Location Map (including basin)	Exhibit B-1	

Well Bore Location Map	Exhibit B-2	Received by: OCD, 7/18/2023 4:45:46 PM	Page 5 of 138
Structure Contour Map - Subsea Depth	Exhibits B-3, B-4, B-5		
Cross Section Location Map (including wells)	Exhibit B-6		
Cross Section (including Landing Zone)	Exhibit B-6		
<b>Additional Information</b>			
Special Provisions/Stipulations	N/A		
<b>CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.</b>			
<b>Printed Name</b> (Attorney or Party Representative):	Dana S. Hardy		
<b>Signed Name</b> (Attorney or Party Representative):	/s/ Dana S. Hardy		
<b>Date:</b>			7/18/2023

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

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

**CASE NO. 23643**

**SELF-AFFIRMED STATEMENT  
OF MARK HAJDIK**

1. I am a Senior Landman with Permian Resources Operating, LLC (“Permian”). I and am over 18 years of age. I have personal knowledge of the matters addressed herein and am competent to provide this Self-Affirmed Statement. I have previously testified before the New Mexico Oil Conservation Division (“Division”) and my credentials as an expert in petroleum land matters were accepted and made a matter of record.

2. Prior to the merger of Centennial Resources Development and Colgate Energy in September 2022, I was a Landman with Colgate Operating, LLC. Colgate Operating, LLC (“Colgate”) is the applicant and is a working interest owner in the matter addressed herein and seeks to designate Permian as the operator of the spacing unit.

3. Copies of Colgate’s application and proposed hearing notice are attached as **Exhibit A-1**.

4. None of the parties proposed to be pooled in this case indicated opposition to this matter proceeding by affidavit; therefore I do not expect any opposition at hearing.

5. Permian Resources seeks an order pooling all uncommitted interests in the Bone Spring formation underlying a 320-acre, more or less, standard horizontal spacing unit comprised of the S/2 S/2 of Sections 9 and 10, Township 20 South, Range 28 East, Eddy County, New Mexico (“Unit”).

**Colgate Production, LLC  
Case No. 23643  
Exhibit A**

6. The Unit will be dedicated to the **Koala 9 Fed Com 114H, Koala 9 Fed Com 124H, and Koala 9 Fed Com 134H** wells (“Wells”), which will be completed in the Old Millman Ranch Bone Spring (Code 48035). The Wells will be drilled from surface hole locations in the SE/4 SE/4 (Unit P) of Section 8 to bottom hole locations in the SE/4 SE/4 (Unit P) of Section 10.

7. The completed intervals of the Wells will be orthodox.

8. **Exhibit A-2** contains the C-102s for the Wells.

9. **Exhibit A-3** contains a plat identifying ownership by tract in the Unit. This exhibit also includes any applicable lease numbers, a unit recapitulation, and the interests Colgate seeks to pool highlighted in yellow. All of the parties are locatable in that Colgate believes it located valid addresses for them.

10. Colgate has conducted a diligent search of all county public records, including phone directories and computer databases, as well as internet searches ,to locate the interest owners it seeks to pool.

11. **Exhibit A-4** contains a sample well proposal letter and AFEs sent to working interest owners for the Wells. The estimated costs reflected on the AFEs are fair and reasonable and comparable to the cost of other wells of similar depth and length drilled in the subject formation in the area.

12. In my opinion, Colgate made a good-faith effort to reach voluntary joinder of uncommitted interests in the Wells as indicated by the chronology of contact described in **Exhibit A-5**.

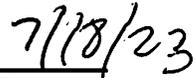
13. Colgate requests overhead and administrative rates of \$10,000 per month while the Wells are being drilled and \$1,000 per month while the Wells are producing. These rates are fair and are comparable to the rates charged by Colgate and other operators in the vicinity.

14. The attached exhibits were either prepared by me or under my supervision or were compiled from company business records.

15. In my opinion, the granting of Colgate's application would serve the interests of conservation, the protection of correlative rights, and the prevention of waste.

16. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date next to my electronic signature below.

  
\_\_\_\_\_  
Mark Hajdik

  
\_\_\_\_\_  
Date

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

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

**CASE NO. 23643**

**APPLICATION**

Pursuant to NMSA § 70-2-17, Colgate Operating, LLC (“Applicant”) applies for an order pooling all uncommitted interests in the Bone Spring formation underlying a 320-acre, more or less, standard horizontal spacing unit comprised of the S/2 S/2 of Sections 9 and 10, Township 20 South, Range 28 East, Eddy County, New Mexico (“Unit”). In support of its application, Applicant states the following:

1. Applicant is a working interest owner in the Unit and has the right to drill wells thereon.
2. Applicant seeks to designate Permian Resources Operating, LLC (OGRID No. 372165) as operator of the Unit.
3. The Unit will be dedicated to the **Koala 9 Fed Com 114H, Koala 9 Fed Com 124H, and Koala 9 Fed Com 134H** wells (“Wells”), which will be drilled from surface hole locations in the SE/4 SE/4 (Unit P) of Section 8 to bottom hole locations in the SE/4 SE/4 (Unit P) of Section 10.
4. The completed intervals of the Wells will be orthodox.
5. Applicant has undertaken diligent, good faith efforts to obtain voluntary agreements from all interest owners to participate in the drilling of the Wells but has been unable to obtain voluntary agreements from all interest owners.

**Colgate Production, LLC  
Case No. 23643  
Exhibit A-1**

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

7. In order to allow Applicant to obtain its just and fair share of the oil and gas underlying the subject lands, all uncommitted interests in the Unit should be pooled and Permian Resources Operating, LLC should be designated the operator of the Wells and the Unit.

WHEREFORE, Applicant requests that this application be set for hearing before an Examiner of the Oil Conservation Division on July 6, 2023, and, after notice and hearing as required by law, the Division enter an order:

- A. Pooling all uncommitted interests in the Unit;
- B. Approving the Wells in the Unit;
- C. Designating Permian Resources Operating, LLC as the operator of the Unit and the 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 completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and
- F. Imposing a 200% charge for the 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.

Respectfully submitted,

HINKLE SHANOR LLP

/s/ Dana S. Hardy

Dana S. Hardy

Jaclyn M. McLean

Yarithza Peña

P.O. Box 2068

Santa Fe, NM 87504-2068

Phone: (505) 982-4554

dhardy@hinklelawfirm.com

jmclean@hinklelawfirm.com

ypena@hinklelawfirm.com

*Counsel for Colgate Operating, LLC*

**Application of Colgate Production, LLC for Compulsory Pooling, Eddy County, New Mexico.** Applicant applies for an order pooling all uncommitted interests in the Bone Spring formation underlying a 320-acre, more or less, standard horizontal spacing unit comprised of the S/2 S/2 of Sections 9 and 10, Township 20 South, Range 28 East, Eddy County, New Mexico (“Unit”). The Unit will be dedicated to the **Koala 9 Fed Com 114H, Koala 9 Fed Com 124H, and Koala 9 Fed Com 134H** wells (“Wells”), which will be drilled from surface hole locations in the SE/4 SE/4 (Unit P) of Section 8 to bottom hole locations in the SE/4 SE/4 (Unit P) of Section 10. The completed intervals of the Wells will be orthodox. Also to be considered will be the cost of drilling and completing the Wells and the allocation of the costs, the designation of Permian Resources Operating, LLC (OGRID No. 372165) as the operator of the Wells, and a 200% charge for the risk involved in drilling and completing the Wells. The Wells are located approximately 12 miles northeast of Carlsbad, New Mexico.

**District I**  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

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

**District III**  
1000 Rio Brazos Road, Aztec, NM 87410  
Phone: (505) 334-6178 Fax: (505) 334-6170

**District IV**  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Revised August 1, 2011  
Submit one copy to appropriate  
District Office

AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<b>1 API Number</b>		<b>2 Pool Code</b> 73280		<b>3 Pool Name</b> BURTON FLAT, MORROW (PRO GAS)			
<b>4 Property Code</b>		<b>5 Property Name</b> KOALA 9 FED COM			<b>6 Well Number</b> 114H		
<b>7 OGRID No.</b> 372165		<b>8 Operator Name</b> PERMIAN RESOURCES OPERATING, LLC			<b>9 Elevation</b> 3274.06'		

**10 Surface Location**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	8	20-S	28-E		1144'	SOUTH	105'	EAST	EDDY

**11 Bottom Hole Location If Different From Surface**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	10	20-S	28-E		330'	SOUTH	10'	EAST	EDDY

<b>12 Dedicated Acres</b> 320	<b>13 Joint or Infill</b>	<b>14 Consolidation Code</b>	<b>15 Order No.</b>
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

**17 OPERATOR CERTIFICATION**

*I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

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

E-mail Address \_\_\_\_\_

**18 SURVEYOR CERTIFICATION**

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

Date of Survey 01/18/2023

Signature and Seal of Professional Surveyor

Certificate Number \_\_\_\_\_

<p><b>SURFACE HOLE LOCATION (SHL)</b> NEW MEXICO EAST - NAD 83 X=585013.28 LAT.= 32.58396830° N Y=576207.48 LONG.= 104.19153225° W NEW MEXICO EAST - NAD 27 X=543833.09 LAT.= 32.58385106° N Y=576146.07 LONG.= 104.19102480° W 1144' FSL, 105' FEL - SECTION 8</p>	<p><b>FIRST TAKE POINT (FTP)</b> NEW MEXICO EAST - NAD 83 X=585204.76 LAT.= 32.58173336° N Y=575394.66 LONG.= 104.19091412° W NEW MEXICO EAST - NAD 27 X=544024.55 LAT.= 32.58161609° N Y=575333.27 LONG.= 104.19040675° W 330' FSL, 100' FWL - SECTION 9</p>	<p><b>CORNER DATA</b> NEW MEXICO EAST - NAD 83 A - FOUND IRON PIPE W/BRASS CAP N:580356.62° E:585185.65° B - FOUND 1" IRON PIPE N:580373.68° E:587849.16° C - FOUND 1" IRON PIPE N:580391.30° E:590513.47° D - FOUND 1" IRON PIPE N:580412.62° E:593168.80° E - FOUND 1" IRON PIPE N:580433.88° E:595824.69° F - FOUND IRON PIPE W/ BRASS CAP N:577783.78° E:595789.28° G - FOUND IRON PIPE W/ BRASS CAP N:575134.28° E:595753.43° H - FOUND IRON PIPE W/ BRASS CAP N:575115.45° E:593094.38° I - FOUND 2" IRON PIPE N:575097.10° E:590435.59° J - FOUND 1 1/4" IRON PIPE N:575080.69° E:587767.05° K - FOUND IRON PIPE W/BRASS CAP N:575063.99° E:585099.23° L - FOUND IRON PIPE W/ BRASS CAP N:577711.68° E:585143.38° M - FOUND 1" IRON PIPE N:577744.14° E:590473.87°</p>
<p><b>LAST TAKE POINT (LTP)</b> NEW MEXICO EAST - NAD 83 X=595657.87 LAT.= 32.58187985° N Y=575402.14 LONG.= 104.15697685° W NEW MEXICO EAST - NAD 27 X=554477.63 LAT.= 32.58176222° N Y=575402.14 LONG.= 104.15647035° W 330' FSL, 100' FEL - SECTION 10</p>	<p><b>BOTTOM HOLE LOCATION (BHL)</b> NEW MEXICO EAST - NAD 83 X=595747.89 LAT.= 32.58188120° N Y=575464.25 LONG.= 104.15668460° W NEW MEXICO EAST - NAD 27 X=554567.65 LAT.= 32.58176356° N Y=575402.77 LONG.= 104.15617811° W 330' FSL, 10' FEL - SECTION 10</p>	
<p><b>PENETRATION POINT 1 (PP1)</b> NEW MEXICO EAST - NAD 83 X=587772.17 LAT.= 32.58176742° N Y=575410.59 LONG.= 104.18257873° W NEW MEXICO EAST - NAD 27 X=546591.95 LAT.= 32.58165006° N Y=575349.18 LONG.= 104.18207157° W 330' FSL, 2667' FWL - SECTION 9</p>	<p><b>PENETRATION POINT 2 (PP2)</b> NEW MEXICO EAST - NAD 83 X=590440.36 LAT.= 32.58180223° N Y=575427.14 LONG.= 104.17391614° W NEW MEXICO EAST - NAD 27 X=549260.14 LAT.= 32.58168478° N Y=575365.71 LONG.= 104.17340921° W 330' FSL, 0' FEL - SECTION 9</p>	

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Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised August 1, 2011  
Submit one copy to appropriate  
District Office

AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<b>1 API Number</b>		<b>2 Pool Code</b> 73280		<b>3 Pool Name</b> BURTON FLAT, MORROW (PRO GAS)	
<b>4 Property Code</b>		<b>5 Property Name</b> KOALA 9 FED COM			<b>6 Well Number</b> 124H
<b>7 OGRID No.</b> 372165		<b>8 Operator Name</b> PERMIAN RESOURCES OPERATING, LLC			<b>9 Elevation</b> 3274.09'

**10 Surface Location**

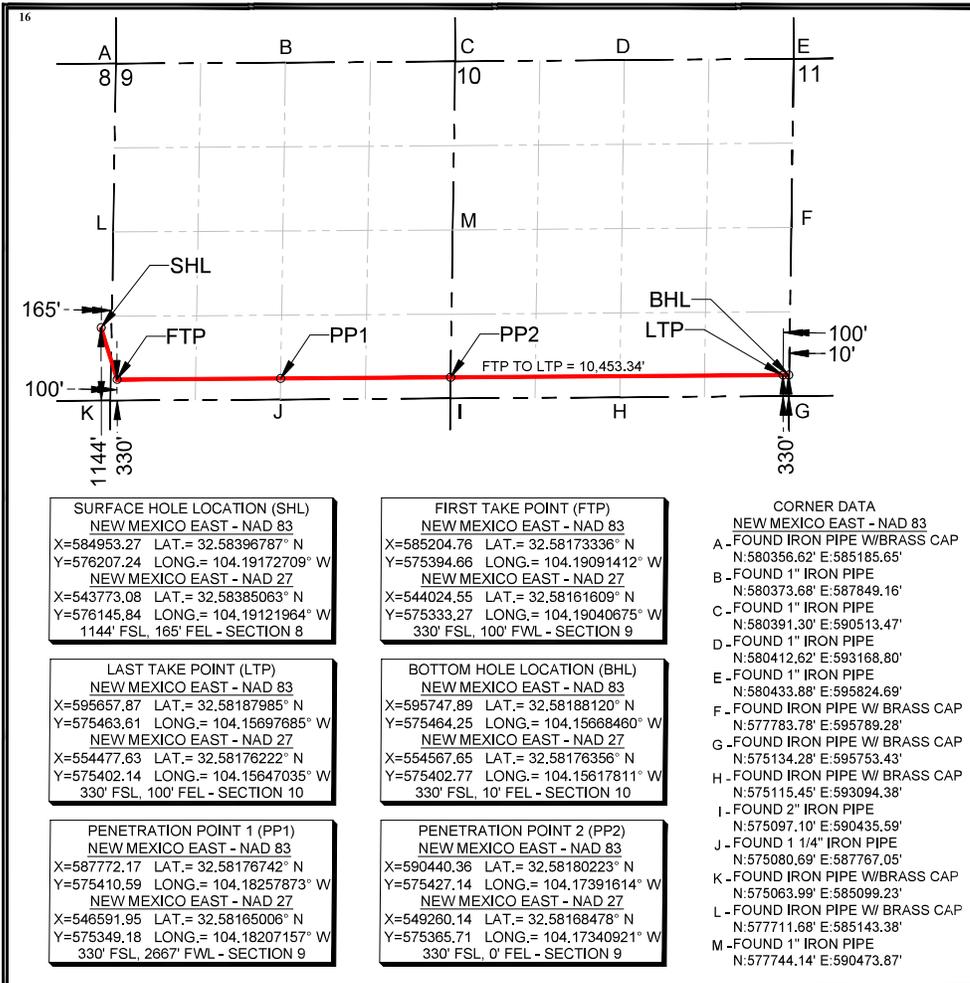
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	8	20-S	28-E		1144'	SOUTH	165'	EAST	EDDY

**11 Bottom Hole Location If Different From Surface**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	10	20-S	28-E		330'	SOUTH	10'	EAST	EDDY

<b>12 Dedicated Acres</b> 320	<b>13 Joint or Infill</b>	<b>14 Consolidation Code</b>	<b>15 Order No.</b>
----------------------------------	---------------------------	------------------------------	---------------------

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



**SURFACE HOLE LOCATION (SHL)**  
NEW MEXICO EAST - NAD 83  
X=584953.27 LAT.= 32.58396787° N  
Y=576207.24 LONG.= 104.19172709° W  
NEW MEXICO EAST - NAD 27  
X=543773.08 LAT.= 32.58385063° N  
Y=576145.84 LONG.= 104.19121964° W  
1144' FSL, 165' FEL - SECTION 8

**FIRST TAKE POINT (FTP)**  
NEW MEXICO EAST - NAD 83  
X=585204.76 LAT.= 32.58173336° N  
Y=575394.66 LONG.= 104.19091412° W  
NEW MEXICO EAST - NAD 27  
X=544024.55 LAT.= 32.58161609° N  
Y=575333.27 LONG.= 104.19040675° W  
330' FSL, 100' FWL - SECTION 9

**CORNER DATA**  
NEW MEXICO EAST - NAD 83  
A - FOUND IRON PIPE W/BRASS CAP  
N:580356.62° E:585185.65°  
B - FOUND 1" IRON PIPE  
N:580373.68° E:587849.16°  
C - FOUND 1" IRON PIPE  
N:580391.30° E:590513.47°  
D - FOUND 1" IRON PIPE  
N:580412.62° E:593168.80°  
E - FOUND 1" IRON PIPE  
N:580433.88° E:595824.69°  
F - FOUND IRON PIPE W/ BRASS CAP  
N:577783.78° E:595769.28°  
G - FOUND IRON PIPE W/ BRASS CAP  
N:575134.28° E:595753.43°  
H - FOUND IRON PIPE W/ BRASS CAP  
N:575115.45° E:593094.38°  
I - FOUND 2" IRON PIPE  
N:575097.10° E:590435.59°  
J - FOUND 1 1/4" IRON PIPE  
N:575080.69° E:587767.05°  
K - FOUND IRON PIPE W/BRASS CAP  
N:575063.99° E:585099.23°  
L - FOUND IRON PIPE W/ BRASS CAP  
N:577711.68° E:585143.38°  
M - FOUND 1" IRON PIPE  
N:577744.14° E:590473.87°

**LAST TAKE POINT (LTP)**  
NEW MEXICO EAST - NAD 83  
X=596567.87 LAT.= 32.58187985° N  
Y=575402.14 LONG.= 104.15697685° W  
NEW MEXICO EAST - NAD 27  
X=554477.63 LAT.= 32.58176222° N  
Y=575402.14 LONG.= 104.15647035° W  
330' FSL, 100' FEL - SECTION 10

**BOTTOM HOLE LOCATION (BHL)**  
NEW MEXICO EAST - NAD 83  
X=595747.89 LAT.= 32.58188120° N  
Y=575464.25 LONG.= 104.15668460° W  
NEW MEXICO EAST - NAD 27  
X=554567.65 LAT.= 32.58176356° N  
Y=575402.77 LONG.= 104.15617811° W  
330' FSL, 10' FEL - SECTION 10

**PENETRATION POINT 1 (PP1)**  
NEW MEXICO EAST - NAD 83  
X=587772.17 LAT.= 32.58176742° N  
Y=575410.59 LONG.= 104.18257873° W  
NEW MEXICO EAST - NAD 27  
X=546591.95 LAT.= 32.58165006° N  
Y=575349.18 LONG.= 104.18207157° W  
330' FSL, 2667' FWL - SECTION 9

**PENETRATION POINT 2 (PP2)**  
NEW MEXICO EAST - NAD 83  
X=590440.36 LAT.= 32.58180223° N  
Y=575427.14 LONG.= 104.17391614° W  
NEW MEXICO EAST - NAD 27  
X=549260.14 LAT.= 32.58168478° N  
Y=575365.71 LONG.= 104.17340921° W  
330' FSL, 0' FEL - SECTION 9

**17 OPERATOR CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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

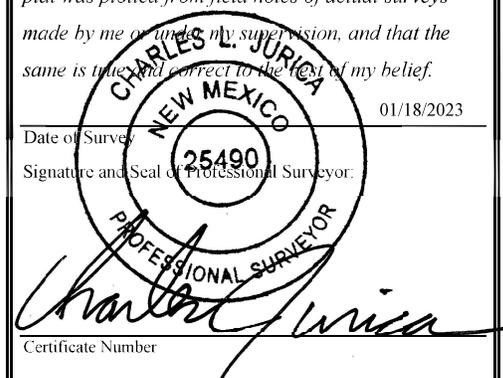
E-mail Address \_\_\_\_\_

**18 SURVEYOR CERTIFICATION**

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

Date of Survey 01/18/2023

Signature and Seal of Professional Surveyor: \_\_\_\_\_



Certificate Number \_\_\_\_\_

**District I**  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720  
**District II**  
811 S. First St., Artesia, NM 88210  
Phone: (575) 748-1283 Fax: (575) 748-9720  
**District III**  
1000 Rio Brazos Road, Aztec, NM 87410  
Phone: (505) 334-6178 Fax: (505) 334-6170  
**District IV**  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102  
Revised August 1, 2011  
Submit one copy to appropriate  
District Office

AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<b>1 API Number</b>		<b>2 Pool Code</b> 73280		<b>3 Pool Name</b> BURTON FLAT, MORROW (PRO GAS)	
<b>4 Property Code</b>		<b>5 Property Name</b> KOALA 9 FED COM			<b>6 Well Number</b> 134H
<b>7 OGRID No.</b> 372165		<b>8 Operator Name</b> PERMIAN RESOURCES OPERATING, LLC			<b>9 Elevation</b> 3273.70'

**10 Surface Location**

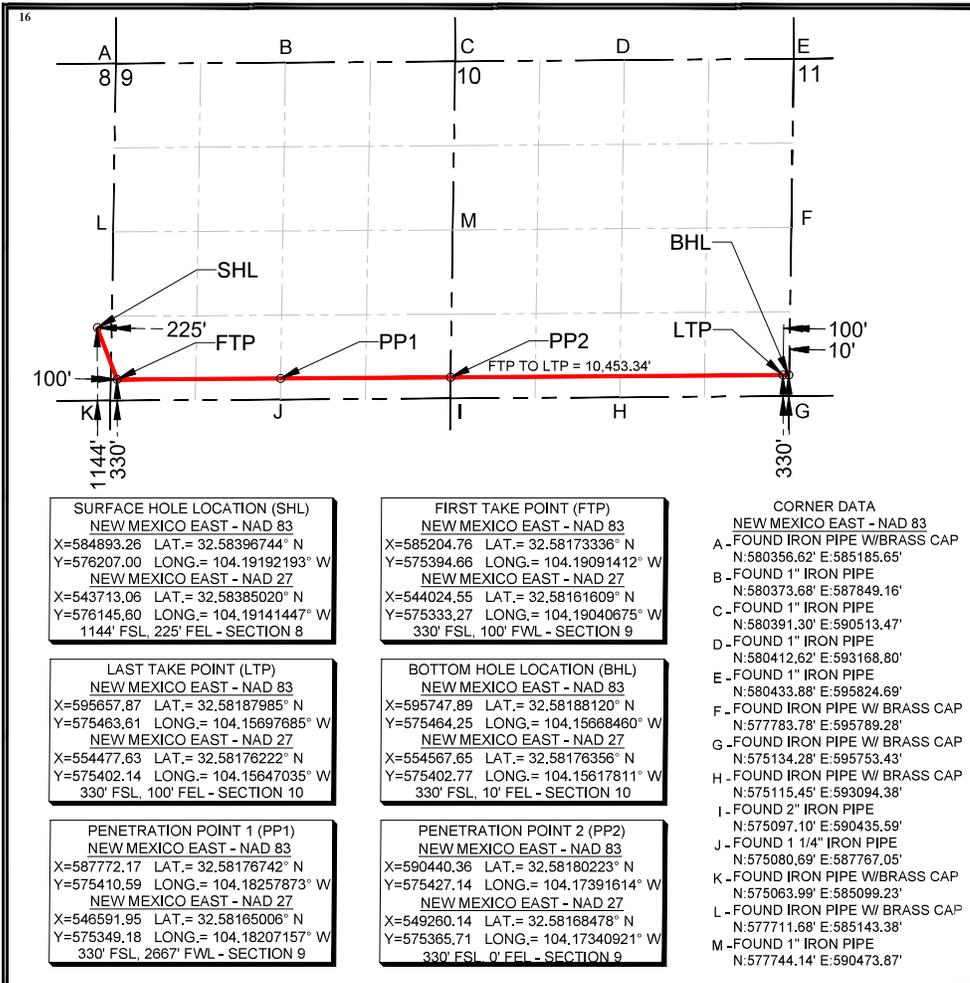
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	8	20-S	28-E		1144'	SOUTH	225'	EAST	EDDY

**11 Bottom Hole Location If Different From Surface**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	10	20-S	28-E		330'	SOUTH	10'	EAST	EDDY

<b>12 Dedicated Acres</b> 320	<b>13 Joint or Infill</b>	<b>14 Consolidation Code</b>	<b>15 Order No.</b>
----------------------------------	---------------------------	------------------------------	---------------------

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



**17 OPERATOR CERTIFICATION**  
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature \_\_\_\_\_ Date \_\_\_\_\_

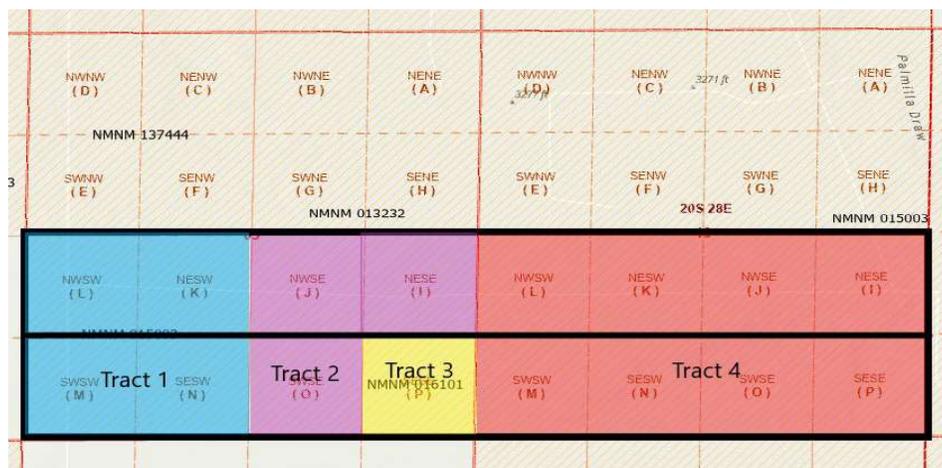
Printed Name \_\_\_\_\_

E-mail Address \_\_\_\_\_

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

CHARLES L. JURICA  
NEW MEXICO  
PROFESSIONAL SURVEYOR  
25490  
01/18/2023  
Date of Survey  
Signature and Seal of Professional Surveyor  
Certificate Number

KOALA 9 FED COM 114H, 124H, 134H (S/2 S/2)				
WI OWNER	TRACT	NET	WI	FORCE POOL INTEREST
Colgate Production, LLC	1, 2, 3, 4	310.69	97.09%	Operator - Permian Resources Operating, LLC
James H. Barnett	2	0.4	0.13%	Yes
Bonefish, LLC	2	1.6	0.50%	Yes
Lepakast Properties, LP	2	1.6	0.50%	Yes
Avant Operating, LLC	2	0.32	0.10%	Yes
Legion Production Partners, LLC	2	1.12	0.35%	Yes
Double Cabin Minerals, LLC	2	0.16	0.05%	Yes
Daniel Energy, Inc.	2	0.4	0.13%	Yes
Pocahontas Oil Co., Inc.	2	1.6	0.50%	Yes
Rutter & Wilbanks Corporation	2	1.6	0.50%	Subject to JOA
Shepherd Oil & Gas, LLC	2	0.2550016	0.08%	Yes
Charles W. Seltzer Trust	2	0.2549984	0.08%	Yes
		320.00	100.00%	



LESSEE OF RECORD	FORCE POOL	TRACT
Chi Energy, Inc.	Yes	2
Dexter Resources	Yes	2
NRM 84-D INCOME LTD	Yes	2
NRM Operating Co	Yes	3

OVERRIDING ROYALTY INTERESTS
Elizabeth S. Shelton Living Trust
Prescott A. Sherman Grandchildren's Trust f/b/o Cristina Elizabeth Shelton
Prescott A. Sherman Grandchildren's Trust f/b/o Amy Shelton Murrell
Katherine A. Swaney
Chi Energy, Inc.
Elise A. Lambuth
Estate of Katherine E. Carlisle
Eloise R. Carlisle, Estate

**Colgate Production, LLC**  
**Case No. 23643**  
**Exhibit A-3**

Anna E. Alford  
Frances K. Alford  
Adam C. Swaney  
Ann E. Lambuth  
James B. Lambuth  
John Warner Alford  
John A. Lambuth  
Emily A. Carlisle  
Gene H. Davis  
Chi Energy, Inc. f/b/o Chi Royalty Pool  
The Wright NM Partners, LP  
V. W. Adams and wife, Joan Adams  
Estate of Benjamin I. Cooksey  
Estate of Suzanne Mitchell  
Russell C. Williams  
Robert J. Behme  
Fred A. Sullivan  
Colburn Oil, LP  
Anthracite Energy Partners, LLC  
Tailwag Resources, LLC

**\*Parties to be pooled are highlighted in yellow.**



300 N. MARIENFELD STREET, SUITE 1000  
MIDLAND, TX 79701

OFFICE 432.695.4222  
FAX 432.695.4063

June 28, 2023

*Via Certified Mail*

Great Western Drilling Ltd.  
700 W Louisiana Ave  
Midland, TX 79701

**RE: Koala 9 Fed Com – Well Proposals**  
Section 9: All, Section 10: All, T20S-R28E, Bone Spring and Wolfcamp Formations  
Eddy County, New Mexico

To Whom It May Concern:

Permian Resources Operating, LLC (“Permian”), hereby proposes the drilling and completion of the following eleven (16) wells, the Koala 9 Fed Com 111H, 112H, 113H, 114H, 121H, 122H, 123H, 124H, 131H, 132H, 133H, 134H, 201H, 202H, 203H, & 204H at the following approximate locations within Township 20 South, Range 28 East:

**1. Koala 9 Fed Com 111H**

SHL: At a legal location in the NE/4NE/4 of Section 8  
BHL: At a legal location in Lot A of Section 10  
FTP: At a legal location in Lot D of Section 9  
LTP: At a legal location in Lot A of Section 10  
TVD: 6,218’  
TMD: Approximately 16,887’  
Proration Unit: N2N2 of Sections 9 and 10  
Targeted Interval: 1<sup>st</sup> Bone Spring  
Total Cost: See attached AFE

**2. Koala 9 Fed Com 112H**

SHL: At a legal location in the NE/4NE/4 of Section 8  
BHL: At a legal location in Lot H of Section 10  
FTP: At a legal location in Lot E of Section 9  
LTP: At a legal location in Lot H of Section 10  
TVD: 6,218’  
TMD: Approximately 16,887’  
Proration Unit: S2N2 of Sections 9 and 10  
Targeted Interval: 1<sup>st</sup> Bone Spring  
Total Cost: See attached AFE

**3. Koala 9 Fed Com 113H**

SHL: At a legal location in the SE/4 of Section 8  
BHL: At a legal location in Lot I of Section 10  
FTP: At a legal location in Lot L of Section 9  
LTP: At a legal location in Lot I of Section 10  
TVD: 6,304’  
TMD: Approximately 16,887’  
Proration Unit: N2S2 of Sections 9 and 10  
Targeted Interval: 1<sup>st</sup> Bone Spring  
Total Cost: See attached AFE

**Colgate Production, LLC**  
**Case No. 23643**  
**Exhibit A-4**

Koala 9 Fed Com Well Proposal

**4. Koala 9 Fed Com 114H**

SHL: At a legal location in the SE/4 of Section 8

BHL: At a legal location in Lot P of Section 10

FTP: At a legal location in Lot M of Section 9

LTP: At a legal location in Lot P of Section 10

TVD: 6,304'

TMD: Approximately 16,887'

Proration Unit: S2S2 of Sections 9 and 10

Targeted Interval: 1<sup>st</sup> Bone Spring

Total Cost: See attached AFE

**5. Koala 9 Fed Com 121H**

SHL: At a legal location in the NE/4NE/4 of Section 8

BHL: At a legal location in Lot A of Section 10

FTP: At a legal location in Lot D of Section 9

LTP: At a legal location in Lot A of Section 10

TVD: 7,293'

TMD: Approximately 17982'

Proration Unit: N2N2 of Sections 9 and 10

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

Total Cost: See attached AFE

**6. Koala 9 Fed Com 122H**

SHL: At a legal location in the NE/4NE/4 of Section 8

BHL: At a legal location in Lot H of Section 10

FTP: At a legal location in Lot E of Section 9

LTP: At a legal location in Lot H of Section 10

TVD: 7293'

TMD: Approximately 17982'

Proration Unit: S2N2 of Sections 9 and 10

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

Total Cost: See attached AFE

**7. Koala 9 Fed Com 123H**

SHL: At a legal location in the SE/4 of Section 8

BHL: At a legal location in Lot I of Section 10

FTP: At a legal location in Lot L of Section 9

LTP: At a legal location in Lot I of Section 10

TVD: 7,329'

TMD: Approximately 17,982'

Proration Unit: N2S2 of Sections 9 and 10

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

Total Cost: See attached AFE

**8. Koala 9 Fed Com 124H**

Koala 9 Fed Com Well Proposal

SHL: At a legal location in the SE/4 of Section 8  
BHL: At a legal location in Lot P of Section 10  
FTP: At a legal location in Lot M of Section 9  
LTP: At a legal location in Lot P of Section 10  
TVD: 7329'  
TMD: Approximately 17982'  
Proration Unit: S2S2 of Sections 9 and 10  
Targeted Interval: 2<sup>nd</sup> Bone Spring  
Total Cost: See attached AFE

**9. Koala 9 Fed Com 131H**

SHL: At a legal location the NE/4NE/4 of Section 8  
BHL: At a legal location in Lot A of Section 10  
FTP: At a legal location in Lot D of Section 9  
LTP: At a legal location in Lot A of Section 10  
TVD: 8498'  
TMD: Approximately 19207'  
Proration Unit: N2N2 of Sections 9 and 10  
Targeted Interval: 3<sup>rd</sup> Bone Spring  
Total Cost: See attached AFE

**10. Koala 9 Fed Com 132H**

SHL: At a legal location the NE/4NE/4 of Section 8  
BHL: At a legal location in Lot H of Section 10  
FTP: At a legal location in Lot E of Section 9  
LTP: At a legal location in Lot H of Section 10  
TVD: 8498'  
TMD: Approximately 19207'  
Proration Unit: S2N2 of Sections 9 and 10  
Targeted Interval: 3<sup>rd</sup> Bone Spring  
Total Cost: See attached AFE

**11. Koala 9 Fed Com 133H**

SHL: At a legal location the SE/4 of Section 8  
BHL: At a legal location in Lot I of Section 10  
FTP: At a legal location in Lot L of Section 9  
LTP: At a legal location in Lot I of Section 10  
TVD: 8524'  
TMD: Approximately 19207'  
Proration Unit: N2S2 of Sections 9 and 10  
Targeted Interval: 3<sup>rd</sup> Bone Spring  
Total Cost: See attached AFE

**12. Koala 9 Fed Com 134H**

SHL: At a legal location in the SE/4 of Section 8  
BHL: At a legal location in Lot P of Section 10  
FTP: At a legal location in Lot M of Section 9  
LTP: At a legal location in Lot P of Section 10  
TVD: 8524'  
TMD: Approximately 19207'  
Proration Unit: S2S2 of Sections 9 and 10  
Targeted Interval: 3<sup>rd</sup> Bone Spring  
Total Cost: See attached AFE

Koala 9 Fed Com Well Proposal

**13. Koala 9 Fed Com 201H**

SHL: At a legal location in the NE/4NE/4 of Section 8  
BHL: At a legal location in Lot A of Section 10  
FTP: At a legal location in Lot D of Section 9  
LTP: At a legal location in Lot A of Section 10  
TVD: 8844'  
TMD: Approximately 19552'  
Targeted Interval: Wolfcamp XY  
Total Cost: See attached AFE

**14. Koala 9 Fed Com 202H**

SHL: At a legal location in the SE/4 of Section 8  
BHL: At a legal location in Lot H of Section 10  
FTP: At a legal location in Lot E of Section 9  
LTP: At a legal location in Lot H of Section 10  
TVD: 8844'  
TMD: Approximately 19552'  
Targeted Interval: Wolfcamp XY  
Total Cost: See attached AFE

**15. Koala 9 Fed Com 203H**

SHL: At a legal location in the SE/4SE/4 of Section 8  
BHL: At a legal location in Lot I of Section 10  
FTP: At a legal location in Lot L of Section 9  
LTP: At a legal location in Lot I of Section 10  
TVD: 8854'  
TMD: Approximately 19552'  
Targeted Interval: Wolfcamp XY  
Total Cost: See attached AFE

**16. Koala 9 Fed Com 204H**

SHL: At a legal location in the SE/4SE/4 of Section 8  
BHL: At a legal location in Lot P of Section 10  
FTP: At a legal location in Lot M of Section 9  
LTP: At a legal location in Lot P of Section 10  
TVD: 8854'  
TMD: Approximately 19552'  
Targeted Interval: Wolfcamp XY  
Total Cost: See attached AFE

The locations, TVDs, and targets are approximate and subject to change dependent on surface or subsurface issues encountered. Permian is proposing to drill these wells under the modified terms of the 1989 AAPL Operating Agreement and a form of said Operating Agreement is available upon request. The Operating Agreement has the following general provisions:

- 100%/300%/300% non-consent provisions
- \$10,000/\$1,000 drilling and producing rates
- Permian Resources 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 proposed AFE, a signed copy of the insurance declaration and your geologic well requirements.

Koala 9 Fed Com Well Proposal

In the interest of time, should we not reach an agreement within thirty (30) days of the date of your receipt of this letter, Permian will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well. If you do not wish to participate, Permian would be interested in acquiring your interest in the subject lands which is subject to further negotiation.

Thank you for your time and consideration, if you have any questions at all, please don't hesitate to contact me at 432.257.3886 or by email at [mark.hajdik@permianres.com](mailto:mark.hajdik@permianres.com).

Respectfully,

A handwritten signature in blue ink that reads "Mark Hajdik".

Mark Hajdik  
Senior Staff Landman  
*Enclosures*

Koala 9 Fed Com Well Proposal

<b>Well Elections:</b> <i>(Please indicate your responses in the spaces below)</i>		
Well(s)	Elect to Participate	Elect to <u>NOT</u> Participate
Koala 9 Fed Com 111H		
Koala 9 Fed Com 112H		
Koala 9 Fed Com 113H		
Koala 9 Fed Com 114H		
Koala 9 Fed Com 121H		
Koala 9 Fed Com 122H		
Koala 9 Fed Com 123H		
Koala 9 Fed Com 124H		
Koala 9 Fed Com 131H		
Koala 9 Fed Com 132H		
Koala 9 Fed Com 133H		
Koala 9 Fed Com 134H		
Koala 9 Fed Com 201H		
Koala 9 Fed Com 202H		
Koala 9 Fed Com 203H		
Koala 9 Fed Com 204H		

Company Name (If Applicable):

\_\_\_\_\_

By: \_\_\_\_\_

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

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

Koala 9 Fed Com Well Proposal

**Participate / Rejection Declaration**

Please return this page to Permian by the date specified in the letter, signed indicating your election to either participate in or reject this insurance program. If you reject the insurance coverage arranged by Permian, then, to the extent that Permian has an obligation to secure any such insurance on your behalf under any applicable agreements or otherwise, Permian will be relieved of such obligation, and Permian will assume that you maintain appropriate levels of insurance and will provide a current Certificate of Insurance upon request. If you fail to make an election within 30 days from receipt of this notice, you will be deemed a participant in the program as detailed on the attached and billed for your percentage participation as such.

- I hereby elect to participate in the insurance coverage arranged by Permian Resources Operating, LLC and understand that I will be charged for such participation.
- I hereby elect to reject the insurance coverage arranged by Permian Resources Operating, LLC.

Agreed this \_\_\_\_\_ day of \_\_\_\_\_, 2023 by:

*Company Name (If Applicable):*

\_\_\_\_\_

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Title



# Authorization for Expenditure

<b>AFE Number</b>	-
<b>Drilling Total (\$)</b>	\$3,590,000
<b>Completion Total (\$)</b>	\$4,701,336
<b>Facilities Total (\$)</b>	\$717,342
<b>Flowback Total (\$)</b>	\$905,000
<b>AFE Total (\$)</b>	\$9,913,678

**AFE Description**

9500' Lateral

**Property Name** Koala 9 Fed Com 114H **State** NM

**AFE Type** Drill and Complete

**Operator** Permian Resources Operating, LLC **Field** Delaware Basin - NM

**Scheduled Spud Date** **Estimated TVD (ft)** See Proposal

**Target Zone** See Proposal **Estimated MD (ft)** See Proposal

**Sub-Target Zone**

**Non Operator Approval**

Company \_\_\_\_\_

Approved By \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

**Cost Estimate**

Account	Description	Total (\$)	Account	Description	Total (\$)
8015.1000	IDC - PERMITS,LICENSES,ETC	\$15,000.00	8015.1100	IDC - STAKING & SURVEYING	\$15,000.00
8015.1200	IDC - LEGAL, TITLE SERVICES	\$13,000.00	8015.1300	IDC - SURFACE DAMAGE / ROW	\$35,000.00
8015.1310	IDC - PERMANENT EASEMENT	\$12,000.00	8015.1400	IDC - ROAD, LOCATIONS, PITS	\$108,333.33
8015.1500	IDC - RIG MOB / TRUCKING	\$100,000.00	8015.1600	IDC - RIG MOB / STANDBY RATE	\$30,000.00
8015.1700	IDC - DAYWORK CONTRACT	\$608,000.00	8015.1800	IDC - FOOTAGE CONTRACT	\$0.00
8015.1900	IDC - DIRECTNL DRILL & SURVEY	\$264,000.00	8015.1950	IDC - Lost in hole	\$0.00
8015.2000	IDC - CONDUCTOR HOLE & SERVICE	\$45,000.00	8015.2100	IDC - WIRELINE SVCS CASED&OPEN	\$0.00
8015.2150	IDC - Drill Bit	\$87,500.00	8015.2200	IDC - TOOLS, STABILIZERS	\$70,000.00
8015.2300	IDC - FUEL / POWER	\$120,250.00	8015.2350	IDC - Fuel/Mud	\$84,000.00
8015.2400	IDC - RIG WATER	\$10,000.00	8015.2500	IDC - MUD/CHEMICALS/ACIDIZING	\$150,000.00
8015.2600	IDC - MUD LOGGING	\$0.00	8015.2700	IDC - INSPECTION, TESTING & REPAIR	\$45,000.00
8015.2800	IDC - CORE ANALYSIS	\$0.00	8015.2900	IDC - OPEN/CASED HOLE LOGGING	\$0.00
8015.3000	IDC - CEMENT SERV/FLOAT EQUIP	\$160,000.00	8015.3100	IDC - CASING CREW & TOOLS	\$50,000.00
8015.3200	IDC - CONTRACT LABOR/ROUSTABOUT	\$15,000.00	8015.3400	IDC - MATERIALS & SUPPLIES	\$5,000.00
8015.3500	IDC - TRUCKING/VACUUM/ TRANSP	\$28,000.00	8015.3600	IDC - SOLIDS CONTROL/ CLOSED LOOP SYSTEM	\$57,200.00
8015.3700	IDC - DISPOSAL	\$117,500.00	8015.3800	IDC - WELLHEAD PREPARE/REPAIR	\$30,500.00
8015.3900	IDC - FISHING TOOLS & SERVICES	\$0.00	8015.4100	IDC - RENTAL EQUIPMENT	\$38,000.00
8015.4200	IDC - MANCAMP	\$38,000.00	8015.4300	IDC - WELLSITE SUPERVISION	\$96,000.00
8015.4400	IDC - SUPERVISION/ENGINEERING	\$0.00	8015.4600	IDC - SAFETY / ENVIRONMENTAL	\$13,400.00
8015.4800	IDC - OVERHEAD	\$0.00	8015.5000	IDC - WELL CONTROL INSURANCE	\$12,521.67
8015.5200	IDC - CONTINGENCY	\$138,663.63			
Account	Description	Total (\$)	Account	Description	Total (\$)
8020.1000	TDC - CASING - CONDUCTOR	\$0.00	8020.1100	TDC - CASING - SURFACE	\$33,834.25
8020.1200	TDC - CASING - INTERMEDIATE - 1	\$177,697.81	8020.1300	TDC - CASING - INTERMEDIATE 2	\$0.00
8020.1400	TDC - CASING - PRODUCTION	\$700,724.06	8020.1500	TDC - WELLHEAD EQUIPMENT	\$65,875.00
8020.1700	TDC - PACKER/DOWNHOLE TOOLS	\$0.00	8020.1800	TDC - CONTINGENCY	\$0.00
Account	Description	Total (\$)	Account	Description	Total (\$)
8025.1000	ICC - STAKING & SURVEYING	\$0.00	8025.1100	ICC - ROAD, LOCATIONS, PITS	\$10,500.00
8025.1200	ICC - COMPLETION RIG	\$0.00	8025.1400	ICC - WIRELINE OPEN/CASED HOLE	\$40,000.00
8025.1500	ICC - FUEL / POWER	\$577,500.00	8025.1600	ICC - COILED TUBING	\$202,346.67
8025.1700	ICC - CEMENTING & SERVICES	\$0.00	8025.1800	ICC - WATER DISPOSAL/VACUUM TRUCK	\$16,747.50
8025.1900	ICC - INSPECTION & TESTING	\$0.00	8025.2000	ICC - TRUCKING	\$14,375.00
8025.2200	ICC - ELECTRIC LOGGING / PERFORATING	\$492,476.25	8025.2300	ICC - COMPLETION FLUIDS	\$10,000.00
8025.2400	ICC - CASING CREW AND TOOLS	\$0.00	8025.2500	ICC - WELL STIMULATION/FRACTUR	\$2,608,020.00
8025.2600	ICC - CONTRACT LABOR/ROUSTABOUT	\$15,000.00	8025.3000	ICC - WATER HANDLING	\$128,571.43
8025.3100	ICC - WELLHEAD/FRACTURE REPAIR	\$40,000.00	8025.3200	ICC - FISHING TOOLS & SERVICES	\$0.00

8025.3300	ICC - COMMUNICATIONS	\$ .00
8025.3500	ICC - WELLSITE SUPERVISION	\$51,300.00
8025.3700	ICC - SAFETY / ENVIRONMENTAL	\$15,000.00
8025.4000	ICC - WELL CONTROL INSURANCE	\$ .00
8025.3050	ICC - SOURCE WATER	\$230,571.43

8025.3400	ICC - RENTAL EQUIPMENT	\$186,678.00
8025.3600	ICC - SUPERVISION/ENGINEERING	\$5,000.00
8025.3800	ICC - OVERHEAD	\$10,000.00
8025.4200	ICC - CONTINGENCY	\$ .00
8025.4400	ICC - COMPANY LABOR	\$ .00

Account	Description	Total (\$)
8030.1000	TCC - CASING - PRODUCTION	
8030.1700	TCC - PACKER/DOWNHOLE TOOLS	

Account	Description	Total (\$)
8030.1600	TCC - PROD LINER & EQUIPMENT	
8030.2000	TCC - WELLHEAD EQUIPMENT	\$47,250.00

Account	Description	Total (\$)
8035.1400	FAC - ROAD LOCATIONS PITS	\$41,666.67
8035.2200	FAC - CONTRACT LABOR / ROUSTAB	\$91,666.67
8035.2700	FAC - P-LINE F-LINE LINEPIPE	\$ .00
8035.3000	FAC - HEATER TREATER/SEPARATOR	\$135,608.33
8035.3300	FAC - CIRCULATING TRNSFER PUMP	\$7,500.00
8035.3600	FAC - ELECTRICAL	\$55,000.00
8035.3800	FAC - FLARE/COMBUSTER	\$15,833.33
8035.1300	FAC - SURFACE DAMAGE / ROW	\$5,000.00
8035.1700	FAC - RENTAL EQUIPMENT	\$4,166.67
8035.1900	FAC - WATER DISPOSAL / SWD	\$ .00
8035.2100	FAC - INSPECTION & TESTING	\$1,000.00
8035.2500	FAC - CONSULTING SERVICES	\$ .00
8035.3100	FAC - DEHYDRATOR EQUIPMENT	\$ .00
8035.4000	FAC - SAFETY / ENVIRONMENTAL	\$733.33
8035.4300	FAC - INSURANCE	\$ .00
8035.4400	FAC - COMPANY LABOR	\$ .00

Account	Description	Total (\$)
8035.1600	FAC - TRANSPORTATION TRUCKING	\$5,000.00
8035.2400	FAC - SUPERVISION	\$5,833.33
8035.2900	FAC - TANK BATTERY	\$70,000.00
8035.3200	FAC - VALVES FITTINGS & PIPE	\$108,333.33
8035.3400	FAC - METER & LACT	\$70,000.00
8035.3700	FAC - COMM TELEMETRY & AUTOMAT	\$55,000.00
8035.4500	FAC - CONTINGENCY	\$ .00
8035.1500	FAC - MATERIALS & SUPPLIES	\$ .00
8035.1800	FAC - FUEL / POWER	\$ .00
8035.2000	FAC - WASTE DISPOSAL	\$ .00
8035.2300	FAC - FRAC TANK RENTAL	\$ .00
8035.2600	FAC - INJECTION PUMP	\$ .00
8035.3500	FAC - COMPRESSOR	\$ .00
8035.4100	FAC - OVERHEAD	\$ .00
8035.1310	FAC - PERMANENT EASEMENT	\$ .00

Account	Description	Total (\$)
8036.1000	PLN - PERMITS LICENSES ETC	\$ .00
8036.1200	PLN - LEGAL TITLE SERVICES	\$ .00
8036.1310	PLN - PERMANENT EASEMENT	\$ .00
8036.1500	PLN - MATERIALS & SUPPLIES	\$ .00
8036.1700	PLN - RENTAL EQUIPMENT	\$ .00
8036.2000	PLN - WASTE DISPOSAL	\$ .00
8036.2200	PLN - CONTRACT LABOR	\$ .00
8036.2400	PLN - SUPERVISION	\$ .00
8036.2700	PLN - PIPELINE	\$ .00
8036.2900	PLN - TANK BATTERY	\$ .00
8036.3100	PLN - TREATING EQUIPMENT	\$ .00
8036.3300	PLN - PUMP	\$ .00
8036.3500	PLN - COMPRESSOR	\$ .00
8036.3610	PLN - POWER DISTRIBUTION MATERIAL	\$ .00
8036.3700	PLN - AUTOMATION	\$ .00
8036.4300	PLN - INSURANCE	\$ .00
8036.4500	PLN - CONTINGENCY	\$ .00

Account	Description	Total (\$)
8036.1100	PLN - STAKING & SURVEYING	\$ .00
8036.1300	PLN - SURFACE DAMAGE / ROW	\$5,000.00
8036.1400	PLN - ROAD LOCATIONS PITS	\$ .00
8036.1600	PLN - TRANSPORTATION TRUCKING	\$ .00
8036.1900	PLN - WATER DISPOSAL / SWD	\$ .00
8036.2100	PLN - INSPECTION & TESTING	\$ .00
8036.2300	PLN - FRAC TANK RENTAL	\$ .00
8036.2500	PLN - CONSULTING SERVICES	\$ .00
8036.2800	PLN - FLOWLINE	\$40,000.00
8036.3000	PLN - SEPARATOR / SCRUBBER	\$ .00
8036.3200	PLN - VALVES FITTINGS & PIPE	\$ .00
8036.3400	PLN - METER	\$ .00
8036.3600	PLN - ELECTRICAL SUPPLIES	\$ .00
8036.3620	PLN - POWER DISTRIBUTION LABOR	\$ .00
8036.4000	PLN - SAFETY / ENVIRONMENTAL	\$ .00
8036.4400	PLN - COMPANY LABOR	\$ .00

Account	Description	Total (\$)
8040.1100	IFC - ROADS LOCATIONS / PITS	\$ .00
8040.1400	IFC - WIRELINE OPEN/CASED HOLE	\$ .00
8040.1600	IFC - COILED TUBING	\$ .00
8040.1899	IFC - FRAC WATER RECOVERY	\$250,000.00
8040.2000	IFC - TRUCKING/VACUUM/TRANSP	\$20,000.00
8040.2300	IFC - COMPLETION FLUID	\$20,000.00
8040.2600	IFC - CONTRACT LABOR/ROUSTABOUT	\$20,000.00
8040.2900	IFC - WELL TESTING / FLOWBACK	\$150,000.00
8040.3200	IFC - FISHING TOOLS & SERVICES	\$ .00
8040.3500	IFC - WELLSITE SUPERVISION	\$20,000.00
8040.4200	IFC - CONTINGENCY	\$ .00
8040.4500	IFC - SWABBING	\$ .00

Account	Description	Total (\$)
8040.1200	IFC - COMPLETION RIG	\$30,000.00
8040.1500	IFC - FUEL / POWER	\$ .00
8040.1700	IFC - CEMENTING & SERVICES	\$ .00
8040.1900	IFC - INSPECTION & TESTING	\$5,000.00
8040.2200	IFC - ELECTRIC LOGGING/PERFORATING	\$ .00
8040.2400	IFC - CASING CREW AND TOOLS	\$ .00
8040.2800	IFC - MATERIAL & SUPPLIES	\$ .00
8040.3100	IFC - WELLHEAD/FAC TREE REPAIR	\$ .00
8040.3400	IFC - RENTAL EQUIPMENT	\$50,000.00
8040.3700	IFC - SAFETY / ENVIRONMENTAL	\$5,000.00
8040.4400	IFC - COMPANY LABOR	\$ .00
8040.2500	IFC - WELL STIMULATION/FRACTURE	\$ .00

Account	Description	Total (\$)
8045.1100	TFC - TUBING	\$120,000.00
8045.1300	TFC - DOWNHOLE ARTIFICIAL LIFT EQPT	\$25,000.00
8045.1600	TFC - PROD LINER & EQUIPMENT	\$ .00
8045.1900	TFC - PUMPING UNITS /SURFACE LIFT EQUIPMENT	\$ .00
8045.2500	TFC - VALVES / CONNECTIONS / FITINGS	\$80,000.00
8045.3200	TFC - COMM, TELEMETRY & AUTOMATION	\$ .00
8045.3500	TFC - CONTINGENCY	\$ .00

Account	Description	Total (\$)
8045.1200	TFC - SUCKER RODS & ACCESSORY	\$ .00
8045.1500	TFC - SUBSURFACE PUMPS	\$ .00
8045.1700	TFC - PACKER/DOWNHOLE TOOLS	\$10,000.00
8045.2000	TFC - WELLHEAD EQUIPMENT	\$40,000.00
8045.3100	TFC - MEASUREMENT EQUIPMENT	\$30,000.00
8045.3400	TFC - CONTRACTOR LABOR INSTALL	\$30,000.00
8045.4400	TFC - COMPANY LABOR	\$ .00



# Authorization for Expenditure

<b>AFE Number</b>	-
<b>Drilling Total (\$)</b>	\$3,590,000
<b>Completion Total (\$)</b>	\$4,701,336
<b>Facilities Total (\$)</b>	\$717,342
<b>Flowback Total (\$)</b>	\$905,000
<b>AFE Total (\$)</b>	\$9,913,678

**AFE Description**

<b>Property Name</b>	9500' Lateral	<b>State</b>	NM
<b>AFE Type</b>	Koala 9 Fed Com 124H	<b>Field</b>	Delaware Basin - NM
<b>Operator</b>	Drill and Complete	<b>Estimated TVD (ft)</b>	See Proposal
<b>Scheduled Spud Date</b>	Permian Resources Operating, LLC	<b>Estimated MD (ft)</b>	See Proposal
<b>Target Zone</b>	See Proposal		
<b>Sub-Target Zone</b>			

**Non Operator Approval**

Company	
Approved By	
Title	
Date	

**Cost Estimate**

Account	Description	Total (\$)	Account	Description	Total (\$)
8015.1000	IDC - PERMITS,LICENSES,ETC	\$15,000.00	8015.1100	IDC - STAKING & SURVEYING	\$15,000.00
8015.1200	IDC - LEGAL, TITLE SERVICES	\$13,000.00	8015.1300	IDC - SURFACE DAMAGE / ROW	\$35,000.00
8015.1310	IDC - PERMANENT EASEMENT	\$12,000.00	8015.1400	IDC - ROAD, LOCATIONS, PITS	\$108,333.33
8015.1500	IDC - RIG MOB / TRUCKING	\$100,000.00	8015.1600	IDC - RIG MOB / STANDBY RATE	\$30,000.00
8015.1700	IDC - DAYWORK CONTRACT	\$608,000.00	8015.1800	IDC - FOOTAGE CONTRACT	\$0.00
8015.1900	IDC - DIRECTNL DRILL & SURVEY	\$264,000.00	8015.1950	IDC - Lost in hole	\$0.00
8015.2000	IDC - CONDUCTOR HOLE & SERVICE	\$45,000.00	8015.2100	IDC - WIRELINE SVCS CASED&OPEN	\$0.00
8015.2150	IDC - Drill Bit	\$87,500.00	8015.2200	IDC - TOOLS, STABILIZERS	\$70,000.00
8015.2300	IDC - FUEL / POWER	\$120,250.00	8015.2350	IDC - Fuel/Mud	\$84,000.00
8015.2400	IDC - RIG WATER	\$10,000.00	8015.2500	IDC - MUD/CHEMICALS/ACIDIZING	\$150,000.00
8015.2600	IDC - MUD LOGGING	\$0.00	8015.2700	IDC - INSPECTION, TESTING & REPAIR	\$45,000.00
8015.2800	IDC - CORE ANALYSIS	\$0.00	8015.2900	IDC - OPEN/CASED HOLE LOGGING	\$0.00
8015.3000	IDC - CEMENT SERV/FLOAT EQUIP	\$160,000.00	8015.3100	IDC - CASING CREW & TOOLS	\$50,000.00
8015.3200	IDC - CONTRACT LABOR/ROUSTABOUT	\$15,000.00	8015.3400	IDC - MATERIALS & SUPPLIES	\$5,000.00
8015.3500	IDC - TRUCKING/VACUUM/ TRANSP	\$28,000.00	8015.3600	IDC - SOLIDS CONTROL/ CLOSED LOOP SYSTEM	\$57,200.00
8015.3700	IDC - DISPOSAL	\$117,500.00	8015.3800	IDC - WELLHEAD PREPARE/REPAIR	\$30,500.00
8015.3900	IDC - FISHING TOOLS & SERVICES	\$0.00	8015.4100	IDC - RENTAL EQUIPMENT	\$38,000.00
8015.4200	IDC - MANCAMP	\$38,000.00	8015.4300	IDC - WELLSITE SUPERVISION	\$96,000.00
8015.4400	IDC - SUPERVISION/ENGINEERING	\$0.00	8015.4600	IDC - SAFETY / ENVIRONMENTAL	\$13,400.00
8015.4800	IDC - OVERHEAD	\$0.00	8015.5000	IDC - WELL CONTROL INSURANCE	\$12,521.67
8015.5200	IDC - CONTINGENCY	\$138,663.63			
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8020.1000	TDC - CASING - CONDUCTOR	\$0.00	8020.1100	TDC - CASING - SURFACE	\$33,834.25
8020.1200	TDC - CASING - INTERMEDIATE - 1	\$177,697.81	8020.1300	TDC - CASING - INTERMEDIATE 2	\$0.00
8020.1400	TDC - CASING - PRODUCTION	\$700,724.06	8020.1500	TDC - WELLHEAD EQUIPMENT	\$65,875.00
8020.1700	TDC - PACKER/DOWNHOLE TOOLS	\$0.00	8020.1800	TDC - CONTINGENCY	\$0.00
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8025.1000	ICC - STAKING & SURVEYING	\$0.00	8025.1100	ICC - ROAD, LOCATIONS, PITS	\$10,500.00
8025.1200	ICC - COMPLETION RIG	\$0.00	8025.1400	ICC - WIRELINE OPEN/CASED HOLE	\$40,000.00
8025.1500	ICC - FUEL / POWER	\$577,500.00	8025.1600	ICC - COILED TUBING	\$202,346.67
8025.1700	ICC - CEMENTING & SERVICES	\$0.00	8025.1800	ICC - WATER DISPOSAL/VACUUM TRUCK	\$16,747.50
8025.1900	ICC - INSPECTION & TESTING	\$0.00	8025.2000	ICC - TRUCKING	\$14,375.00
8025.2200	ICC - ELECTRIC LOGGING / PERFORATING	\$492,476.25	8025.2300	ICC - COMPLETION FLUIDS	\$10,000.00
8025.2400	ICC - CASING CREW AND TOOLS	\$0.00	8025.2500	ICC - WELL STIMULATION/FRACTUR	\$2,608,020.00
8025.2600	ICC - CONTRACT LABOR/ROUSTABOUT	\$15,000.00	8025.3000	ICC - WATER HANDLING	\$128,571.43
8025.3100	ICC - WELLHEAD/FRACTREE REPAIR	\$40,000.00	8025.3200	ICC - FISHING TOOLS & SERVICES	\$0.00

8025.3300	ICC - COMMUNICATIONS	\$ .00	8025.3400	ICC - RENTAL EQUIPMENT	\$186,678.00
8025.3500	ICC - WELLSITE SUPERVISION	\$51,300.00	8025.3600	ICC - SUPERVISION/ENGINEERING	\$5,000.00
8025.3700	ICC - SAFETY / ENVIRONMENTAL	\$15,000.00	8025.3800	ICC - OVERHEAD	\$10,000.00
8025.4000	ICC - WELL CONTROL INSURANCE	\$ .00	8025.4200	ICC - CONTINGENCY	\$ .00
8025.3050	ICC - SOURCE WATER	\$230,571.43	8025.4400	ICC - COMPANY LABOR	\$ .00
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8030.1000	TCC - CASING - PRODUCTION		8030.1600	TCC - PROD LINER & EQUIPMENT	
8030.1700	TCC - PACKER/DOWNHOLE TOOLS		8030.2000	TCC - WELLHEAD EQUIPMENT	\$47,250.00
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8035.1400	FAC - ROAD LOCATIONS PITS	\$41,666.67	8035.1600	FAC - TRANSPORTATION TRUCKING	\$5,000.00
8035.2200	FAC - CONTRACT LABOR / ROUSTAB	\$91,666.67	8035.2400	FAC - SUPERVISION	\$5,833.33
8035.2700	FAC - P-LINE F-LINE LINEPIPE	\$ .00	8035.2900	FAC - TANK BATTERY	\$70,000.00
8035.3000	FAC - HEATER TREATER/SEPARATOR	\$135,608.33	8035.3200	FAC - VALVES FITTINGS & PIPE	\$108,333.33
8035.3300	FAC - CIRCULATING TRNSFER PUMP	\$7,500.00	8035.3400	FAC - METER & LACT	\$70,000.00
8035.3600	FAC - ELECTRICAL	\$55,000.00	8035.3700	FAC - COMM TELEMETRY & AUTOMAT	\$55,000.00
8035.3800	FAC - FLARE/COMBUSTER	\$15,833.33	8035.4500	FAC - CONTINGENCY	\$ .00
8035.1300	FAC - SURFACE DAMAGE / ROW	\$5,000.00	8035.1500	FAC - MATERIALS & SUPPLIES	\$ .00
8035.1700	FAC - RENTAL EQUIPMENT	\$4,166.67	8035.1800	FAC - FUEL / POWER	\$ .00
8035.1900	FAC - WATER DISPOSAL / SWD	\$ .00	8035.2000	FAC - WASTE DISPOSAL	\$ .00
8035.2100	FAC - INSPECTION & TESTING	\$1,000.00	8035.2300	FAC - FRAC TANK RENTAL	\$ .00
8035.2500	FAC - CONSULTING SERVICES	\$ .00	8035.2600	FAC - INJECTION PUMP	\$ .00
8035.3100	FAC - DEHYDRATOR EQUIPMENT	\$ .00	8035.3500	FAC - COMPRESSOR	\$ .00
8035.4000	FAC - SAFETY / ENVIRONMENTAL	\$733.33	8035.4100	FAC - OVERHEAD	\$ .00
8035.4300	FAC - INSURANCE	\$ .00	8035.1310	FAC - PERMANENT EASEMENT	\$ .00
8035.4400	FAC - COMPANY LABOR	\$ .00			
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8036.1000	PLN - PERMITS LICENSES ETC	\$ .00	8036.1100	PLN - STAKING & SURVEYING	\$ .00
8036.1200	PLN - LEGAL TITLE SERVICES	\$ .00	8036.1300	PLN - SURFACE DAMAGE / ROW	\$5,000.00
8036.1310	PLN - PERMANENT EASEMENT	\$ .00	8036.1400	PLN - ROAD LOCATIONS PITS	\$ .00
8036.1500	PLN - MATERIALS & SUPPLIES	\$ .00	8036.1600	PLN - TRANSPORTATION TRUCKING	\$ .00
8036.1700	PLN - RENTAL EQUIPMENT	\$ .00	8036.1900	PLN - WATER DISPOSAL / SWD	\$ .00
8036.2000	PLN - WASTE DISPOSAL	\$ .00	8036.2100	PLN - INSPECTION & TESTING	\$ .00
8036.2200	PLN - CONTRACT LABOR	\$ .00	8036.2300	PLN - FRAC TANK RENTAL	\$ .00
8036.2400	PLN - SUPERVISION	\$ .00	8036.2500	PLN - CONSULTING SERVICES	\$ .00
8036.2700	PLN - PIPELINE	\$ .00	8036.2800	PLN - FLOWLINE	\$40,000.00
8036.2900	PLN - TANK BATTERY	\$ .00	8036.3000	PLN - SEPARATOR / SCRUBBER	\$ .00
8036.3100	PLN - TREATING EQUIPMENT	\$ .00	8036.3200	PLN - VALVES FITTINGS & PIPE	\$ .00
8036.3300	PLN - PUMP	\$ .00	8036.3400	PLN - METER	\$ .00
8036.3500	PLN - COMPRESSOR	\$ .00	8036.3600	PLN - ELECTRICAL SUPPLIES	\$ .00
8036.3610	PLN - POWER DISTRIBUTION MATERIAL	\$ .00	8036.3620	PLN - POWER DISTRIBUTION LABOR	\$ .00
8036.3700	PLN - AUTOMATION	\$ .00	8036.4000	PLN - SAFETY / ENVIRONMENTAL	\$ .00
8036.4300	PLN - INSURANCE	\$ .00	8036.4400	PLN - COMPANY LABOR	\$ .00
8036.4500	PLN - CONTINGENCY	\$ .00			
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8040.1100	IFC - ROADS LOCATIONS / PITS	\$ .00	8040.1200	IFC - COMPLETION RIG	\$30,000.00
8040.1400	IFC - WIRELINE OPEN/CASED HOLE	\$ .00	8040.1500	IFC - FUEL / POWER	\$ .00
8040.1600	IFC - COILED TUBING	\$ .00	8040.1700	IFC - CEMENTING & SERVICES	\$ .00
8040.1899	IFC - FRAC WATER RECOVERY	\$250,000.00	8040.1900	IFC - INSPECTION & TESTING	\$5,000.00
8040.2000	IFC - TRUCKING/VACUUM/TRANSP	\$20,000.00	8040.2200	IFC - ELECTRIC LOGGING/PERFORATING	\$ .00
8040.2300	IFC - COMPLETION FLUID	\$20,000.00	8040.2400	IFC - CASING CREW AND TOOLS	\$ .00
8040.2600	IFC - CONTRACT LABOR/ROUSTABOUT	\$20,000.00	8040.2800	IFC - MATERIAL & SUPPLIES	\$ .00
8040.2900	IFC - WELL TESTING / FLOWBACK	\$150,000.00	8040.3100	IFC - WELLHEAD/FAC TREE REPAIR	\$ .00
8040.3200	IFC - FISHING TOOLS & SERVICES	\$ .00	8040.3400	IFC - RENTAL EQUIPMENT	\$50,000.00
8040.3500	IFC - WELLSITE SUPERVISION	\$20,000.00	8040.3700	IFC - SAFETY / ENVIRONMENTAL	\$5,000.00
8040.4200	IFC - CONTINGENCY	\$ .00	8040.4400	IFC - COMPANY LABOR	\$ .00
8040.4500	IFC - SWABBING	\$ .00	8040.2500	IFC - WELL STIMULATION/FRACTURE	\$ .00
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8045.1100	TFC - TUBING	\$120,000.00	8045.1200	TFC - SUCKER RODS & ACCESSORY	\$ .00
8045.1300	TFC - DOWNHOLE ARTIFICIAL LIFT EQPT	\$25,000.00	8045.1500	TFC - SUBSURFACE PUMPS	\$ .00
8045.1600	TFC - PROD LINER & EQUIPMENT	\$ .00	8045.1700	TFC - PACKER/DOWNHOLE TOOLS	\$10,000.00
8045.1900	TFC - PUMPING UNITS /SURFACE LIFT EQUIPMENT	\$ .00	8045.2000	TFC - WELLHEAD EQUIPMENT	\$40,000.00
8045.2500	TFC - VALVES / CONNECTIONS / FITINGS	\$80,000.00	8045.3100	TFC - MEASUREMENT EQUIPMENT	\$30,000.00
8045.3200	TFC - COMM, TELEMETRY & AUTOMATION	\$ .00	8045.3400	TFC - CONTRACTOR LABOR INSTALL	\$30,000.00
8045.3500	TFC - CONTINGENCY	\$ .00	8045.4400	TFC - COMPANY LABOR	\$ .00



# Authorization for Expenditure

<b>AFE Number</b>	-
<b>Drilling Total (\$)</b>	\$3,590,000
<b>Completion Total (\$)</b>	\$4,701,336
<b>Facilities Total (\$)</b>	\$717,342
<b>Flowback Total (\$)</b>	\$905,000
<b>AFE Total (\$)</b>	\$9,913,678

<b>AFE Description</b>	9500' Lateral		
<b>Property Name</b>	Koala 9 FEEd Com 134H	<b>State</b>	NM
<b>AFE Type</b>	Drill and Complete		
<b>Operator</b>	Permian Resources Operating, LLC	<b>Field</b>	Delaware Basin - NM
<b>Scheduled Spud Date</b>		<b>Estimated TVD (ft)</b>	See Proposal
<b>Target Zone</b>	See Proposal	<b>Estimated MD (ft)</b>	See Proposal
<b>Sub-Target Zone</b>			

**Non Operator Approval**

Company	
Approved By	
Title	
Date	

**Cost Estimate**

Account	Description	Total (\$)	Account	Description	Total (\$)
8015.1000	IDC - PERMITS,LICENSES,ETC	\$15,000.00	8015.1100	IDC - STAKING & SURVEYING	\$15,000.00
8015.1200	IDC - LEGAL, TITLE SERVICES	\$13,000.00	8015.1300	IDC - SURFACE DAMAGE / ROW	\$35,000.00
8015.1310	IDC - PERMANENT EASEMENT	\$12,000.00	8015.1400	IDC - ROAD, LOCATIONS, PITS	\$108,333.33
8015.1500	IDC - RIG MOB / TRUCKING	\$100,000.00	8015.1600	IDC - RIG MOB / STANDBY RATE	\$30,000.00
8015.1700	IDC - DAYWORK CONTRACT	\$608,000.00	8015.1800	IDC - FOOTAGE CONTRACT	\$0.00
8015.1900	IDC - DIRECTNL DRILL & SURVEY	\$264,000.00	8015.1950	IDC - Lost in hole	\$0.00
8015.2000	IDC - CONDUCTOR HOLE & SERVICE	\$45,000.00	8015.2100	IDC - WIRELINE SVCS CASED&OPEN	\$0.00
8015.2150	IDC - Drill Bit	\$87,500.00	8015.2200	IDC - TOOLS, STABILIZERS	\$70,000.00
8015.2300	IDC - FUEL / POWER	\$120,250.00	8015.2350	IDC - Fuel/Mud	\$84,000.00
8015.2400	IDC - RIG WATER	\$10,000.00	8015.2500	IDC - MUD/CHEMICALS/ACIDIZING	\$150,000.00
8015.2600	IDC - MUD LOGGING	\$0.00	8015.2700	IDC - INSPECTION, TESTING & REPAIR	\$45,000.00
8015.2800	IDC - CORE ANALYSIS	\$0.00	8015.2900	IDC - OPEN/CASED HOLE LOGGING	\$0.00
8015.3000	IDC - CEMENT SERV/FLOAT EQUIP	\$160,000.00	8015.3100	IDC - CASING CREW & TOOLS	\$50,000.00
8015.3200	IDC - CONTRACT LABOR/ROUSTABOUT	\$15,000.00	8015.3400	IDC - MATERIALS & SUPPLIES	\$5,000.00
8015.3500	IDC - TRUCKING/VACUUM/ TRANSP	\$28,000.00	8015.3600	IDC - SOLIDS CONTROL/ CLOSED LOOP SYSTEM	\$57,200.00
8015.3700	IDC - DISPOSAL	\$117,500.00	8015.3800	IDC - WELLHEAD PREPARE/REPAIR	\$30,500.00
8015.3900	IDC - FISHING TOOLS & SERVICES	\$0.00	8015.4100	IDC - RENTAL EQUIPMENT	\$38,000.00
8015.4200	IDC - MANCAMP	\$38,000.00	8015.4300	IDC - WELLSITE SUPERVISION	\$96,000.00
8015.4400	IDC - SUPERVISION/ENGINEERING	\$0.00	8015.4600	IDC - SAFETY / ENVIRONMENTAL	\$13,400.00
8015.4800	IDC - OVERHEAD	\$0.00	8015.5000	IDC - WELL CONTROL INSURANCE	\$12,521.67
8015.5200	IDC - CONTINGENCY	\$138,663.63			
Account	Description	Total (\$)	Account	Description	Total (\$)
8020.1000	TDC - CASING - CONDUCTOR	\$0.00	8020.1100	TDC - CASING - SURFACE	\$33,834.25
8020.1200	TDC - CASING - INTERMEDIATE - 1	\$177,697.81	8020.1300	TDC - CASING - INTERMEDIATE 2	\$0.00
8020.1400	TDC - CASING - PRODUCTION	\$700,724.06	8020.1500	TDC - WELLHEAD EQUIPMENT	\$65,875.00
8020.1700	TDC - PACKER/DOWNHOLE TOOLS	\$0.00	8020.1800	TDC - CONTINGENCY	\$0.00
Account	Description	Total (\$)	Account	Description	Total (\$)
8025.1000	ICC - STAKING & SURVEYING	\$0.00	8025.1100	ICC - ROAD, LOCATIONS, PITS	\$10,500.00
8025.1200	ICC - COMPLETION RIG	\$0.00	8025.1400	ICC - WIRELINE OPEN/CASED HOLE	\$40,000.00
8025.1500	ICC - FUEL / POWER	\$577,500.00	8025.1600	ICC - COILED TUBING	\$202,346.67
8025.1700	ICC - CEMENTING & SERVICES	\$0.00	8025.1800	ICC - WATER DISPOSAL/VACUUM TRUCK	\$16,747.50
8025.1900	ICC - INSPECTION & TESTING	\$0.00	8025.2000	ICC - TRUCKING	\$14,375.00
8025.2200	ICC - ELECTRIC LOGGING / PERFORATING	\$492,476.25	8025.2300	ICC - COMPLETION FLUIDS	\$10,000.00
8025.2400	ICC - CASING CREW AND TOOLS	\$0.00	8025.2500	ICC - WELL STIMULATION/FRACTUR	\$2,608,020.00
8025.2600	ICC - CONTRACT LABOR/ROUSTABOUT	\$15,000.00	8025.3000	ICC - WATER HANDLING	\$128,571.43
8025.3100	ICC - WELLHEAD/FRACTREE REPAIR	\$40,000.00	8025.3200	ICC - FISHING TOOLS & SERVICES	\$0.00

8025.3300	ICC - COMMUNICATIONS	\$ .00	8025.3400	ICC - RENTAL EQUIPMENT	\$186,678.00
8025.3500	ICC - WELLSITE SUPERVISION	\$51,300.00	8025.3600	ICC - SUPERVISION/ENGINEERING	\$5,000.00
8025.3700	ICC - SAFETY / ENVIRONMENTAL	\$15,000.00	8025.3800	ICC - OVERHEAD	\$10,000.00
8025.4000	ICC - WELL CONTROL INSURANCE	\$ .00	8025.4200	ICC - CONTINGENCY	\$ .00
8025.3050	ICC - SOURCE WATER	\$230,571.43	8025.4400	ICC - COMPANY LABOR	\$ .00
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8030.1000	TCC - CASING - PRODUCTION		8030.1600	TCC - PROD LINER & EQUIPMENT	
8030.1700	TCC - PACKER/DOWNHOLE TOOLS		8030.2000	TCC - WELLHEAD EQUIPMENT	\$47,250.00
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8035.1400	FAC - ROAD LOCATIONS PITS	\$41,666.67	8035.1600	FAC - TRANSPORTATION TRUCKING	\$5,000.00
8035.2200	FAC - CONTRACT LABOR / ROUSTAB	\$91,666.67	8035.2400	FAC - SUPERVISION	\$5,833.33
8035.2700	FAC - P-LINE F-LINE LINEPIPE	\$ .00	8035.2900	FAC - TANK BATTERY	\$70,000.00
8035.3000	FAC - HEATER TREATER/SEPARATOR	\$135,608.33	8035.3200	FAC - VALVES FITTINGS & PIPE	\$108,333.33
8035.3300	FAC - CIRCULATING TRNSFER PUMP	\$7,500.00	8035.3400	FAC - METER & LACT	\$70,000.00
8035.3600	FAC - ELECTRICAL	\$55,000.00	8035.3700	FAC - COMM TELEMETRY & AUTOMAT	\$55,000.00
8035.3800	FAC - FLARE/COMBUSTER	\$15,833.33	8035.4500	FAC - CONTINGENCY	\$ .00
8035.1300	FAC - SURFACE DAMAGE / ROW	\$5,000.00	8035.1500	FAC - MATERIALS & SUPPLIES	\$ .00
8035.1700	FAC - RENTAL EQUIPMENT	\$4,166.67	8035.1800	FAC - FUEL / POWER	\$ .00
8035.1900	FAC - WATER DISPOSAL / SWD	\$ .00	8035.2000	FAC - WASTE DISPOSAL	\$ .00
8035.2100	FAC - INSPECTION & TESTING	\$1,000.00	8035.2300	FAC - FRAC TANK RENTAL	\$ .00
8035.2500	FAC - CONSULTING SERVICES	\$ .00	8035.2600	FAC - INJECTION PUMP	\$ .00
8035.3100	FAC - DEHYDRATOR EQUIPMENT	\$ .00	8035.3500	FAC - COMPRESSOR	\$ .00
8035.4000	FAC - SAFETY / ENVIRONMENTAL	\$733.33	8035.4100	FAC - OVERHEAD	\$ .00
8035.4300	FAC - INSURANCE	\$ .00	8035.1310	FAC - PERMANENT EASEMENT	\$ .00
8035.4400	FAC - COMPANY LABOR	\$ .00			
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8036.1000	PLN - PERMITS LICENSES ETC	\$ .00	8036.1100	PLN - STAKING & SURVEYING	\$ .00
8036.1200	PLN - LEGAL TITLE SERVICES	\$ .00	8036.1300	PLN - SURFACE DAMAGE / ROW	\$5,000.00
8036.1310	PLN - PERMANENT EASEMENT	\$ .00	8036.1400	PLN - ROAD LOCATIONS PITS	\$ .00
8036.1500	PLN - MATERIALS & SUPPLIES	\$ .00	8036.1600	PLN - TRANSPORTATION TRUCKING	\$ .00
8036.1700	PLN - RENTAL EQUIPMENT	\$ .00	8036.1900	PLN - WATER DISPOSAL / SWD	\$ .00
8036.2000	PLN - WASTE DISPOSAL	\$ .00	8036.2100	PLN - INSPECTION & TESTING	\$ .00
8036.2200	PLN - CONTRACT LABOR	\$ .00	8036.2300	PLN - FRAC TANK RENTAL	\$ .00
8036.2400	PLN - SUPERVISION	\$ .00	8036.2500	PLN - CONSULTING SERVICES	\$ .00
8036.2700	PLN - PIPELINE	\$ .00	8036.2800	PLN - FLOWLINE	\$40,000.00
8036.2900	PLN - TANK BATTERY	\$ .00	8036.3000	PLN - SEPARATOR / SCRUBBER	\$ .00
8036.3100	PLN - TREATING EQUIPMENT	\$ .00	8036.3200	PLN - VALVES FITTINGS & PIPE	\$ .00
8036.3300	PLN - PUMP	\$ .00	8036.3400	PLN - METER	\$ .00
8036.3500	PLN - COMPRESSOR	\$ .00	8036.3600	PLN - ELECTRICAL SUPPLIES	\$ .00
8036.3610	PLN - POWER DISTRIBUTION MATERIAL	\$ .00	8036.3620	PLN - POWER DISTRIBUTION LABOR	\$ .00
8036.3700	PLN - AUTOMATION	\$ .00	8036.4000	PLN - SAFETY / ENVIRONMENTAL	\$ .00
8036.4300	PLN - INSURANCE	\$ .00	8036.4400	PLN - COMPANY LABOR	\$ .00
8036.4500	PLN - CONTINGENCY	\$ .00			
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8040.1100	IFC - ROADS LOCATIONS / PITS	\$ .00	8040.1200	IFC - COMPLETION RIG	\$30,000.00
8040.1400	IFC - WIRELINE OPEN/CASED HOLE	\$ .00	8040.1500	IFC - FUEL / POWER	\$ .00
8040.1600	IFC - COILED TUBING	\$ .00	8040.1700	IFC - CEMENTING & SERVICES	\$ .00
8040.1899	IFC - FRAC WATER RECOVERY	\$250,000.00	8040.1900	IFC - INSPECTION & TESTING	\$5,000.00
8040.2000	IFC - TRUCKING/VACUUM/TRANSP	\$20,000.00	8040.2200	IFC - ELECTRIC LOGGING/PERFORATING	\$ .00
8040.2300	IFC - COMPLETION FLUID	\$20,000.00	8040.2400	IFC - CASING CREW AND TOOLS	\$ .00
8040.2600	IFC - CONTRACT LABOR/ROUSTABOUT	\$20,000.00	8040.2800	IFC - MATERIAL & SUPPLIES	\$ .00
8040.2900	IFC - WELL TESTING / FLOWBACK	\$150,000.00	8040.3100	IFC - WELLHEAD/FAC TREE REPAIR	\$ .00
8040.3200	IFC - FISHING TOOLS & SERVICES	\$ .00	8040.3400	IFC - RENTAL EQUIPMENT	\$50,000.00
8040.3500	IFC - WELLSITE SUPERVISION	\$20,000.00	8040.3700	IFC - SAFETY / ENVIRONMENTAL	\$5,000.00
8040.4200	IFC - CONTINGENCY	\$ .00	8040.4400	IFC - COMPANY LABOR	\$ .00
8040.4500	IFC - SWABBING	\$ .00	8040.2500	IFC - WELL STIMULATION/FRACTURE	\$ .00
<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>	<b>Account</b>	<b>Description</b>	<b>Total (\$)</b>
8045.1100	TFC - TUBING	\$120,000.00	8045.1200	TFC - SUCKER RODS & ACCESSORY	\$ .00
8045.1300	TFC - DOWNHOLE ARTIFICIAL LIFT EQPT	\$25,000.00	8045.1500	TFC - SUBSURFACE PUMPS	\$ .00
8045.1600	TFC - PROD LINER & EQUIPMENT	\$ .00	8045.1700	TFC - PACKER/DOWNHOLE TOOLS	\$10,000.00
8045.1900	TFC - PUMPING UNITS /SURFACE LIFT EQUIPMENT	\$ .00	8045.2000	TFC - WELLHEAD EQUIPMENT	\$40,000.00
8045.2500	TFC - VALVES / CONNECTIONS / FITINGS	\$80,000.00	8045.3100	TFC - MEASUREMENT EQUIPMENT	\$30,000.00
8045.3200	TFC - COMM, TELEMETRY & AUTOMATION	\$ .00	8045.3400	TFC - CONTRACTOR LABOR INSTALL	\$30,000.00
8045.3500	TFC - CONTINGENCY	\$ .00	8045.4400	TFC - COMPANY LABOR	\$ .00

### Koala Communication Timeline

**March 2023** – Initial proposals sent for the Koala Wells

**March - July 2023** – Exchanged correspondence and phone calls with various parties providing JOA drafts, interest calculations, and overall development plan updates.

**July 2023** – Provided Great Western Drilling their interest and a copy of the requested JOA, have not received feedback or signatures to date. Provided Pocahontas Oil a copy of the JOA. They submitted paperwork intended to participate but have not signed the JOA to date.

**July 17, 2023** – Rutter and Wilbanks submitted their executed copy of the JOA

**July 2023 to present** – Several parties have not responded to the proposals that were received or were planning to participate via the pooling order.

**Colgate Production, LLC  
Case No. 23643  
Exhibit A-5**

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

APPLICATION OF COLGATE PRODUCTION,  
LLC FOR COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO.

CASE NO. 23640 - 23643

APPLICATION OF COLGATE PRODUCTION,  
LLC FOR COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO.

CASE NO. 23644 & 23645

**SELF-AFFIRMED STATEMENT  
OF CHRISTOPHER CANTIN**

1. I am a geologist with Permian Resources Operating, LLC (“Permian Resources”). I am over 18 years of age, have personal knowledge of the matters addressed herein, and am competent to provide this Self-Affirmed Statement.

2. I am familiar with the geological matters that pertain to the above-referenced case.

3. **Exhibit B-1** is a regional locator map that identifies the Koala project area, in proximity to the Capitan Reef within the Delaware Basin, for the Bone Spring & Wolfcamp horizontal spacing units that are the subject of these applications.

4. **Exhibit B-2** is a cross section location map for the proposed horizontal spacing units within the Bone Spring formation. The approximate wellbore paths for the proposed **Koala 9 Fed Com 111H-114H, Koala 9 Fed Com 121H-124H, and Koala 9 Fed Com 131H-134H** wells (“Wells”) are represented by black dashed lines. Existing producing wells in the targeted interval are represented by solid lines. This map identifies the cross-section running from A-A’ with the cross-section wells’ names and a black line in proximity to the proposed Wells. The individual spacing units are outlined in blue boxes and are identified with their respective case numbers.

**Colgate Production, LLC  
Case No. 23643  
Exhibit B**

5. **Exhibit B-3** is a Subsea Structure map on the First Bone Spring formation in TVD subsea with a contour interval of 50 ft. The map identifies the approximate wellbore paths for the proposed First Bone Spring Wells with a Black dashed line. It also identifies the location of the cross-section running from A-A' in proximity to the proposed Wells. The data points are indicated by red triangles. The map demonstrates the formation is gently dipping to the east-southeast in this area. I do not observe any faulting, pinch-outs, or geologic impediments to developing the targeted intervals with horizontal wells.

6. **Exhibit B-4** is a Subsea Structure map on the Base of the Second Bone Spring formation in TVD subsea with a contour interval of 50 ft. The map identifies the approximate wellbore paths for the proposed Second Bone Spring Wells with an orange dashed line. It also identifies the location of the cross-section running from A-A' in proximity to the proposed Wells. The data points are indicated by red triangles. The map demonstrates the formation is gently dipping to the east-southeast in this area. I do not observe any faulting, pinch-outs, or geologic impediments to developing the targeted intervals with horizontal wells.

7. **Exhibit B-5** is a Subsea Structure map on the Third Bone Spring formation in TVD subsea with a contour interval of 50 ft. The map identifies the approximate wellbore paths for the proposed Third Bone Spring Wells with a red dashed line. It also identifies the location of the cross-section running from A-A' in proximity to the proposed Wells. The data points are indicated by red triangles. The map demonstrates the formation is gently dipping to the east-southeast in this area. I do not observe any faulting, pinch-outs, or geologic impediments to developing the targeted intervals with horizontal wells.

8. **Exhibit B-6** identifies two wells penetrating the targeted intervals I used to construct a stratigraphic cross-section from A to A' using the representative wells identified on

Exhibit B-2. It contains gamma ray, resistivity, and porosity logs. The cross section is oriented from west to east and is flattened on top of the Wolfcamp formation. The proposed landing zones for the Wells are labeled on the exhibit. The approximate well-paths for the proposed Wells are indicated by dashed lines to be drilled from east to west across the units. This cross-section demonstrates the target intervals are continuous across the Unit.

9. **Exhibit B-7** is a gun barrel diagram that shows the Koala 9 Fed Com 111H-114H, Koala 9 Fed Com 121H-124H, and Koala 9 Fed Com 131H-134H wells in the Bone Spring formation. The individual spacing units are outlined in blue boxes and include their respective case numbers.

10. **Exhibit B-8** is a cross section location map for the proposed horizontal spacing units within the Wolfcamp formation. The approximate wellbore paths for the proposed **Koala 9 Fed Com 201H-204H** wells (“Wells”) are represented by black dashed lines. Existing producing wells in the targeted interval are represented by solid lines. This map identifies the cross-section running from A-A’ with the cross-section wells name and a black line in proximity to the proposed Wells. The individual spacing units are outlined in blue boxes and include their respective case numbers.

11. **Exhibit B-9** is a Subsea Structure map on the Wolfcamp formation in TVD subsea with a contour interval of 50 ft. The map identifies the approximate wellbore paths for the proposed Wolfcamp Wells with a purple dashed line. It also identifies the location of the cross-section running from A-A’ in proximity to the proposed Wells. The data points are indicated by red triangles. The map demonstrates the formation is gently dipping to the east-southeast in this area. I do not observe any faulting, pinch-outs, or geologic impediments to developing the targeted intervals with horizontal wells.

12. **Exhibit B-10** identifies two wells penetrating the targeted interval I used to construct a stratigraphic cross-section from A to A' using the representative wells identified on Exhibit B-8. It contains gamma ray, resistivity, and porosity logs. The cross section is oriented from west to east and is flattened on top of the Wolfcamp formation. The proposed landing zone for the wells are labeled on the exhibit. The approximate well-paths for the proposed Wells are indicated by dashed lines to be drilled from east to west across the units. This cross-section demonstrates the target intervals are continuous across the Unit.

13. **Exhibit B-11** is a gun barrel diagram that shows the Koala 9 Fed Com 201H-204H wells in the Wolfcamp formation. The individual spacing units are outlined in blue boxes and include their respective case numbers.

14. In my opinion, a lay down orientation for the Wells is appropriate to properly develop the subject acreage because of consistent rock properties throughout the units and is the preferred fracture orientation in this portion of the trend.

15. Based on my geologic study of the area, the targeted interval underlying the units is suitable for development by horizontal wells and the tracts comprising the units will contribute more or less equally to the production of the Wells.

16. In my opinion, the granting of Colgate's application will serve the interests of conservation, the protection of correlative rights, and the prevention of waste.

17. The exhibits attached hereto were either prepared by me or under my supervision or were compiled from company business records.

18. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm my testimony above is true and correct and is made under penalty of perjury under

the laws of the State of New Mexico. My testimony is made as of the date identified next to my signature below.



Christopher Cantin

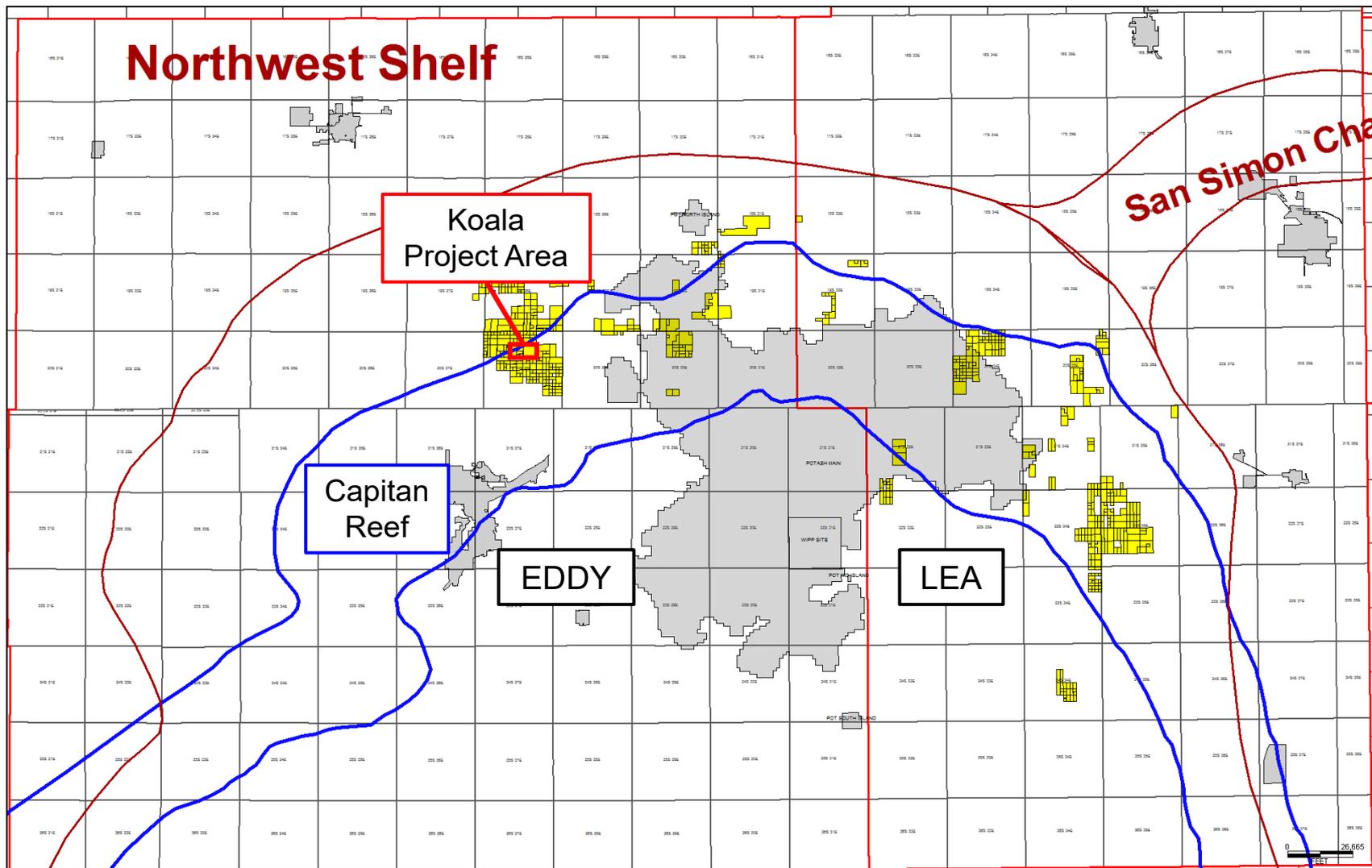
07/17/2023

Date

# Regional Locator Map

## Koala 9 Fed Com

Colgate Production, LLC  
Case No. 23643  
Exhibit B-1



 Permian Resources

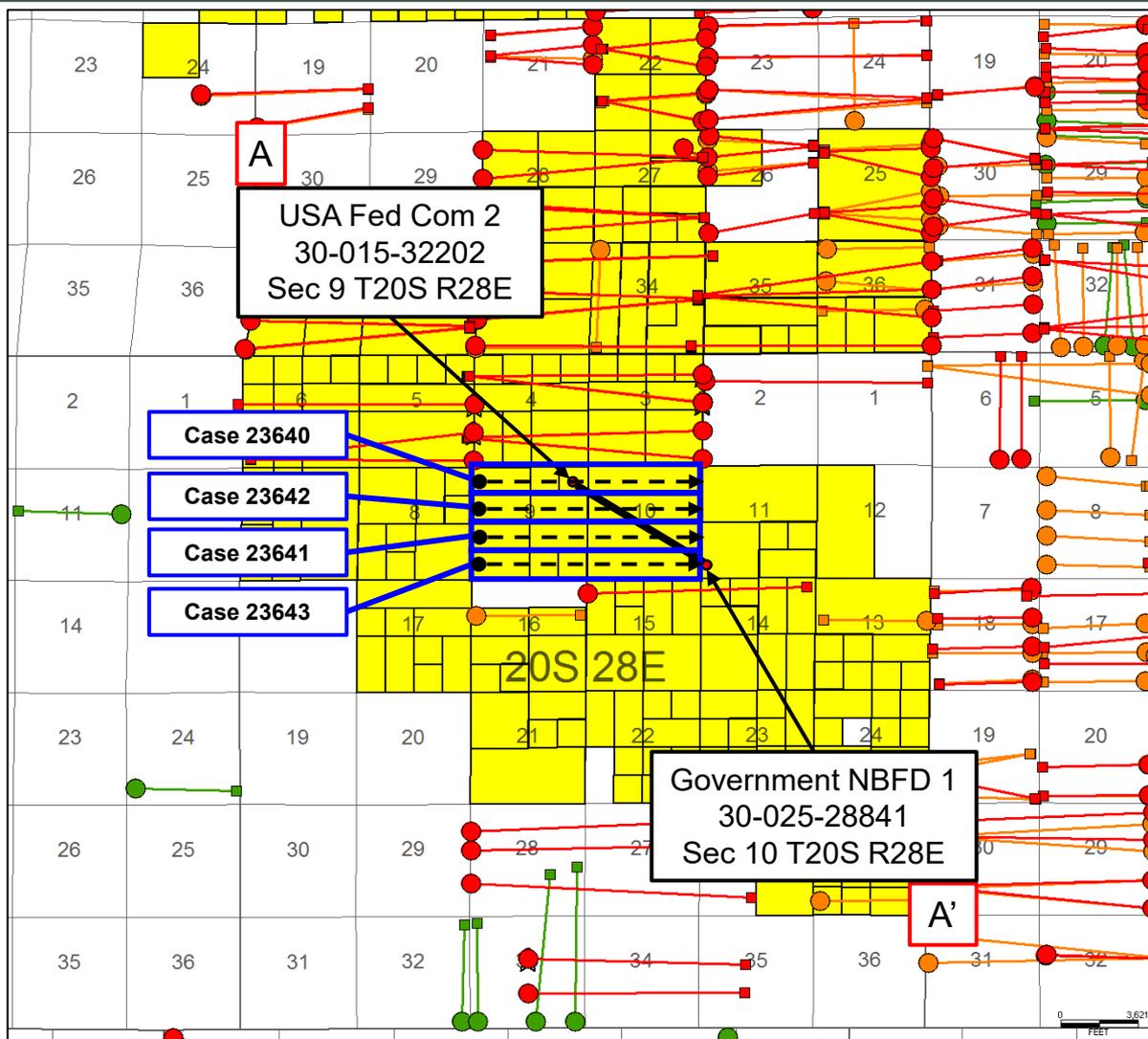


# Koala Bone Spring

# Cross-Section Locator Map

## Koala 9 Fed Com Bone Spring

Colgate Production, LLC  
Case No. 23643  
Exhibit B-2



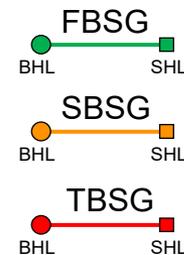
Permian Resources



Approximate Wellbore paths



Producing Wells



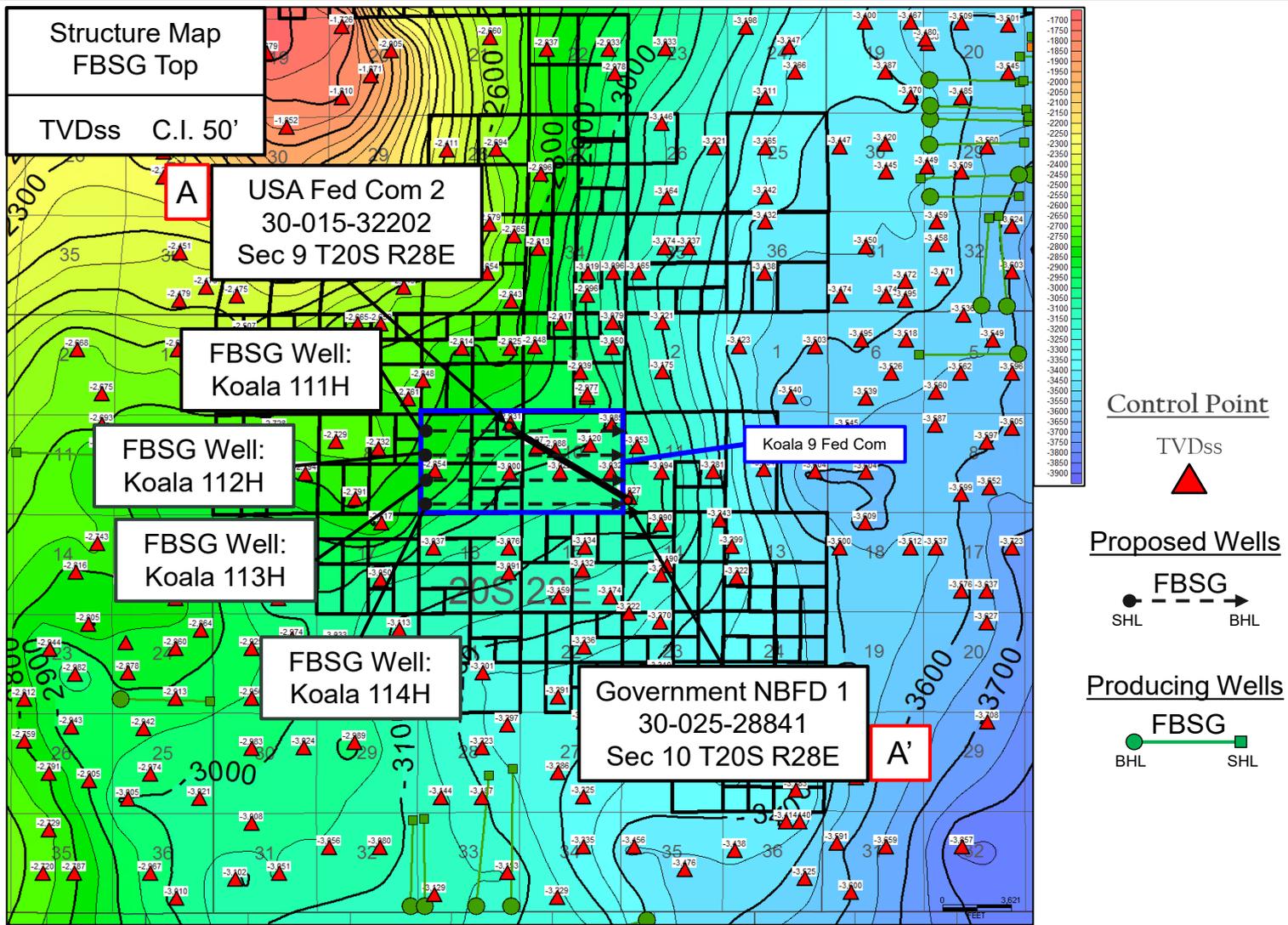
0 3,621 FEET



# First Bone Spring – Structure Map

Koala 9 Fed Com 111H, 112H, 113H and 114H

Colgate Production, LLC  
Case No. 23643  
Exhibit B-3



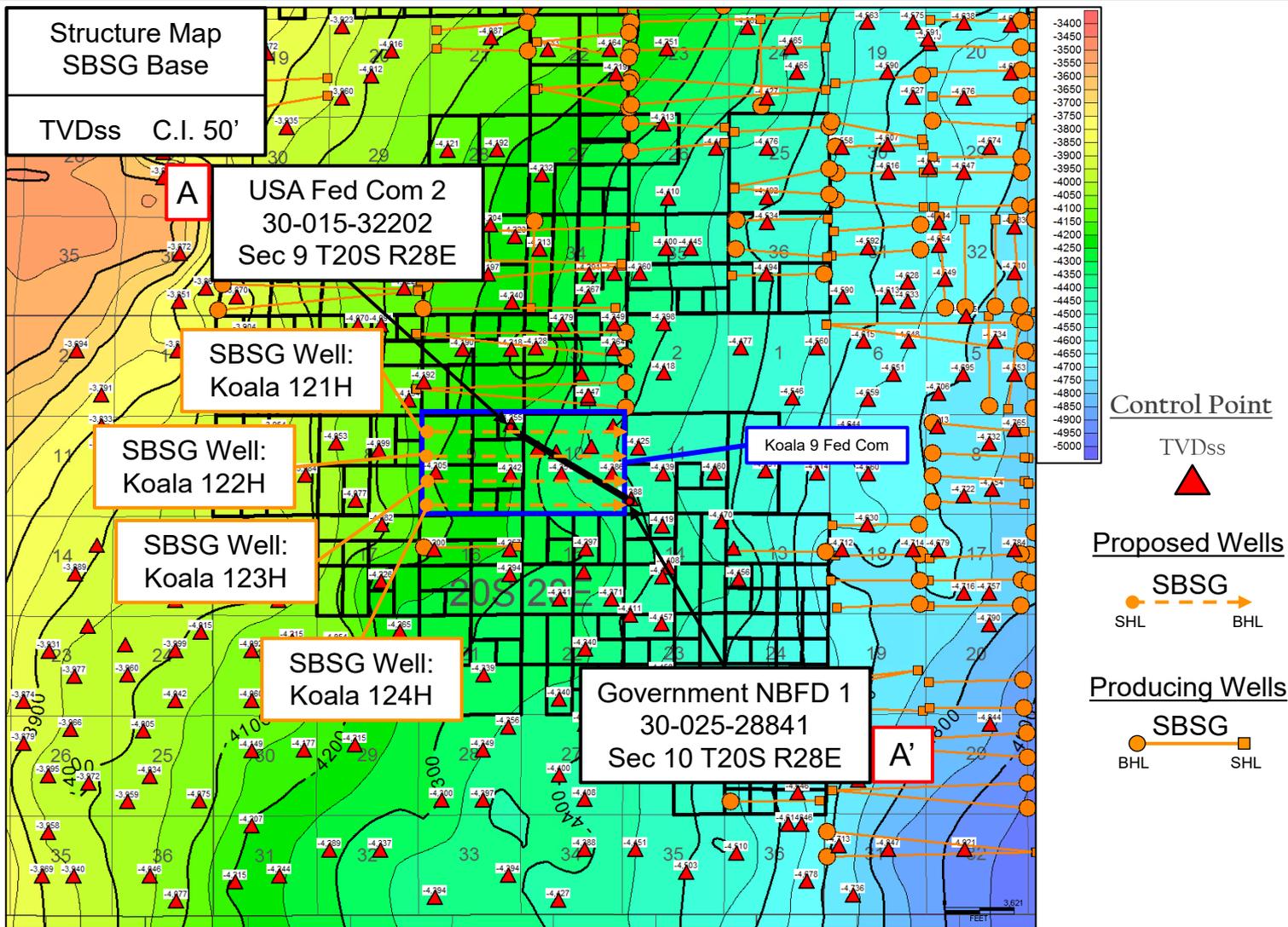
Permian Resources



# Second Bone Spring – Structure Map

Koala 9 Fed Com 121H, 122H, 123H, 124H

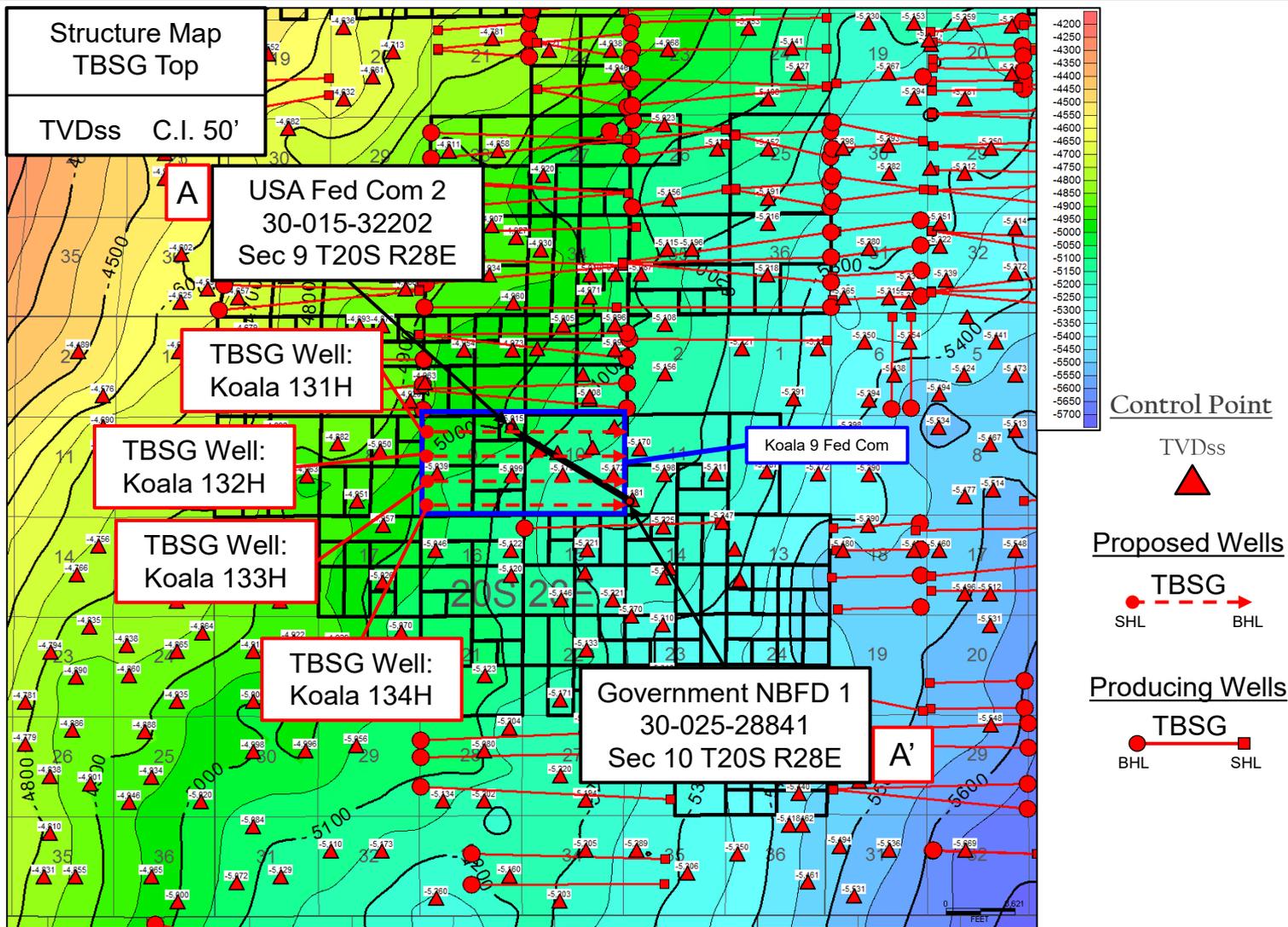
Colgate Production, LLC  
Case No. 23643  
Exhibit B-4



# Third Bone Spring – Structure Map

Koala 9 Fed Com 131H, 132H, 133H & 134H

Colgate Production, LLC  
Case No. 23643  
Exhibit B-5

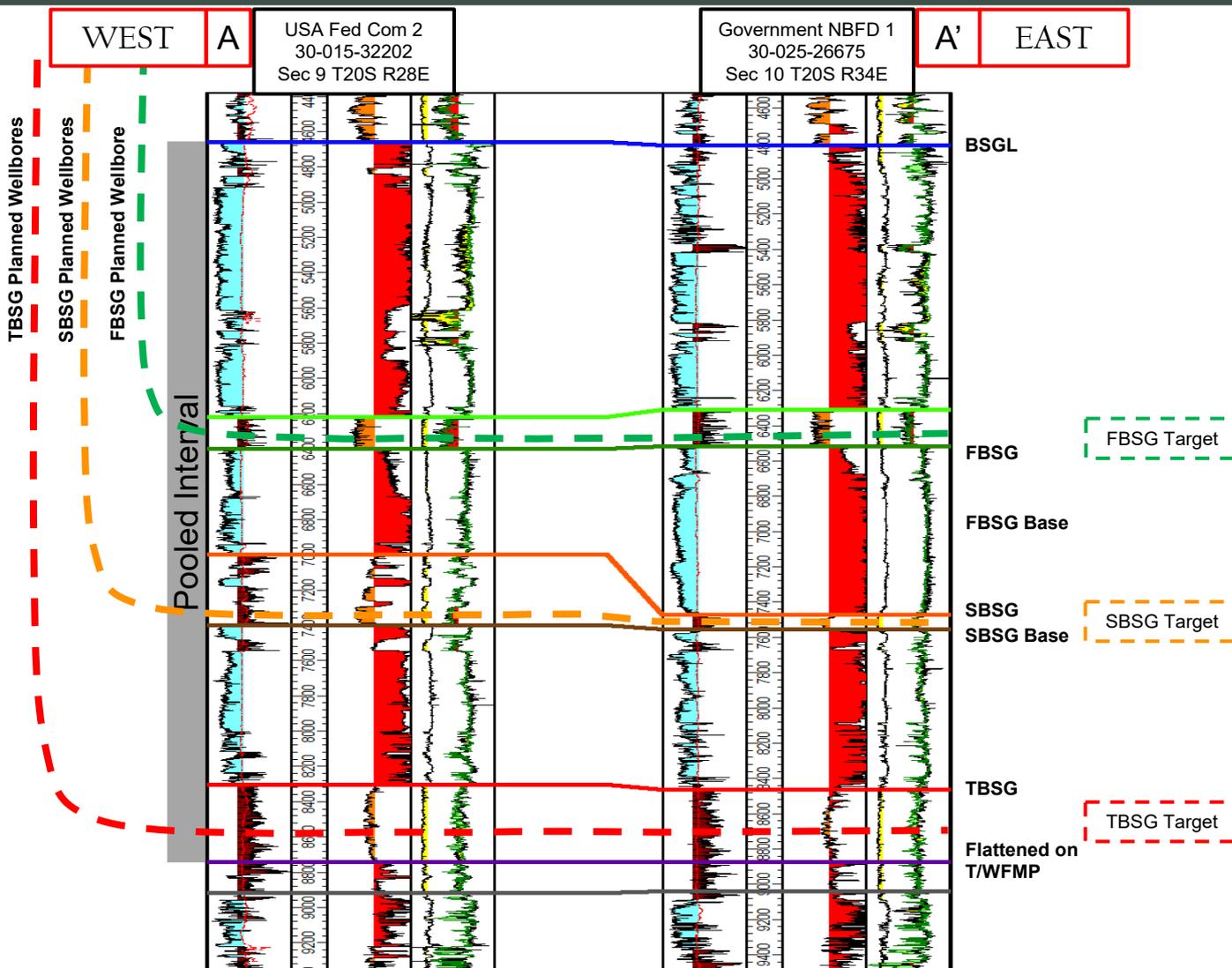




# Stratigraphic Cross-Section A-A'

Koala 9 Fed Com Bone Spring

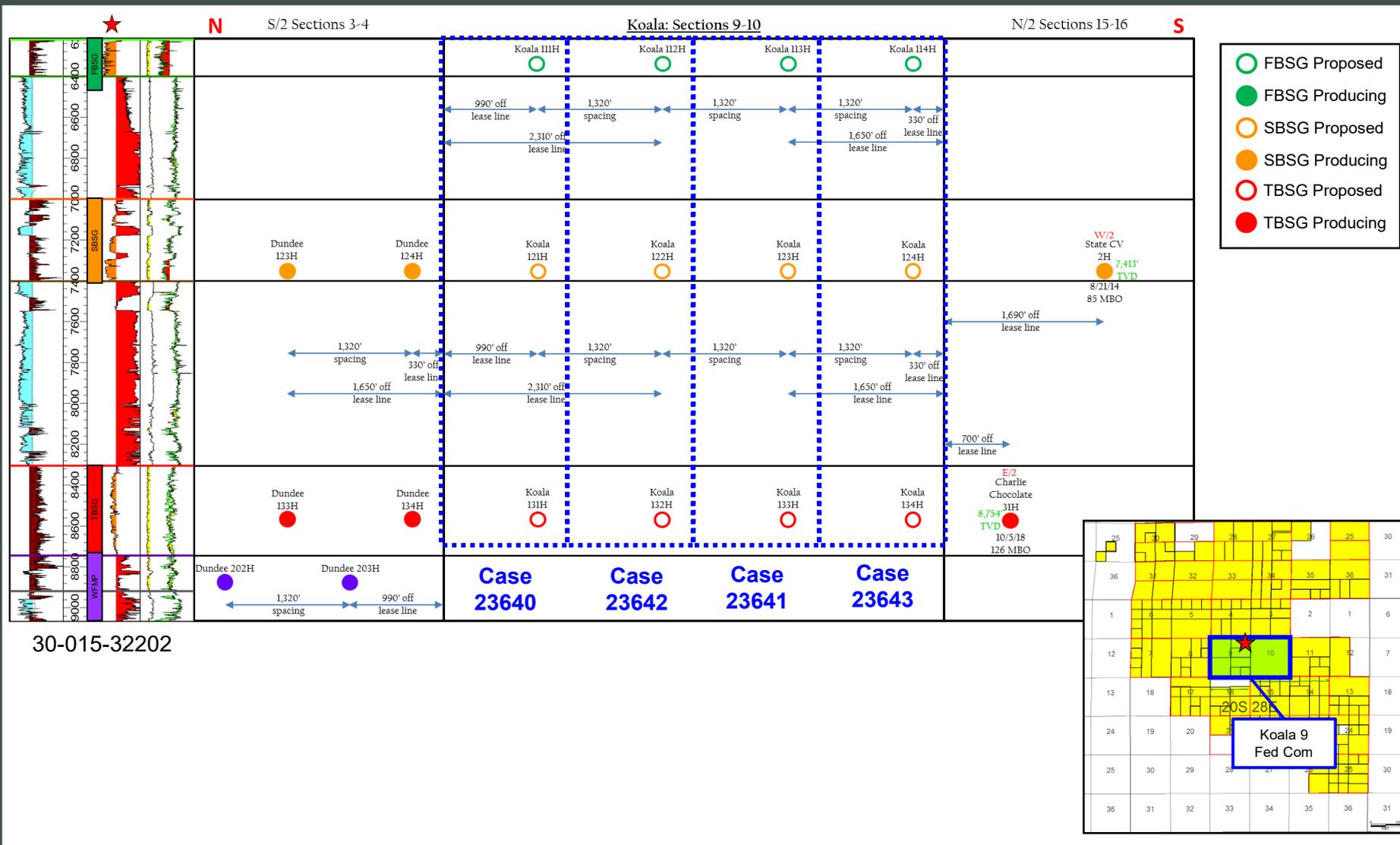
Colgate Production, LLC  
Case No. 23643  
Exhibit B-6



# Gun Barrel Development Plan

## Koala 9 Fed Com Bone Spring

Colgate Production, LLC  
Case No. 23643  
Exhibit B-7



30-015-32202



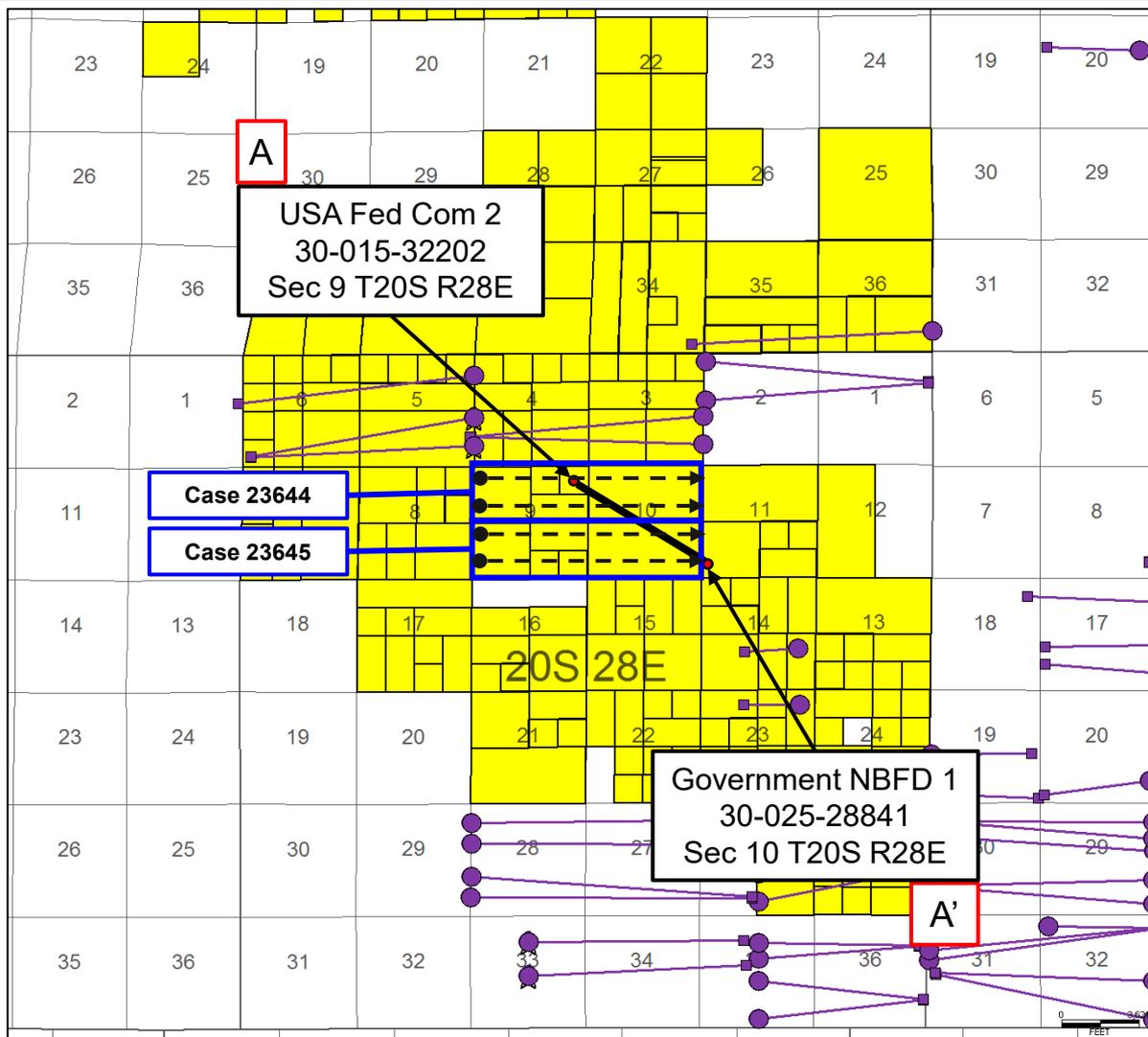
# Koala Wolfcamp



# Cross-Section Locator Map

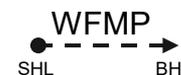
Koala 9 Fed Com Wolfcamp

Colgate Production, LLC  
Case No. 23643  
Exhibit B-8



Permian Resources

### Proposed Wells



### Producing Wells

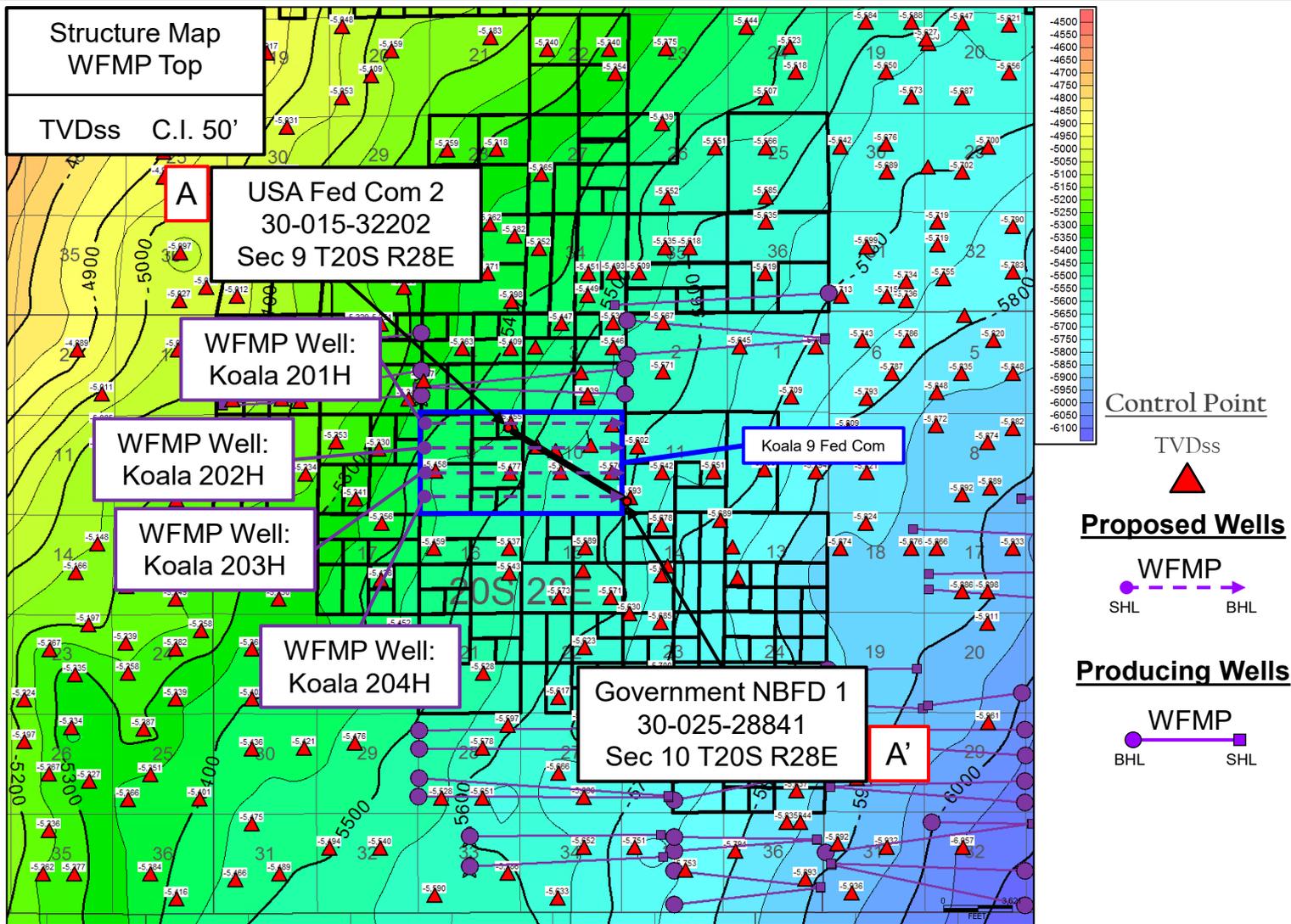




# Wolfcamp – Structure Map

Koala 9 Fed Com 201H, 202H, 203H & 204H

Colgate Production, LLC  
Case No. 23643  
Exhibit B-9

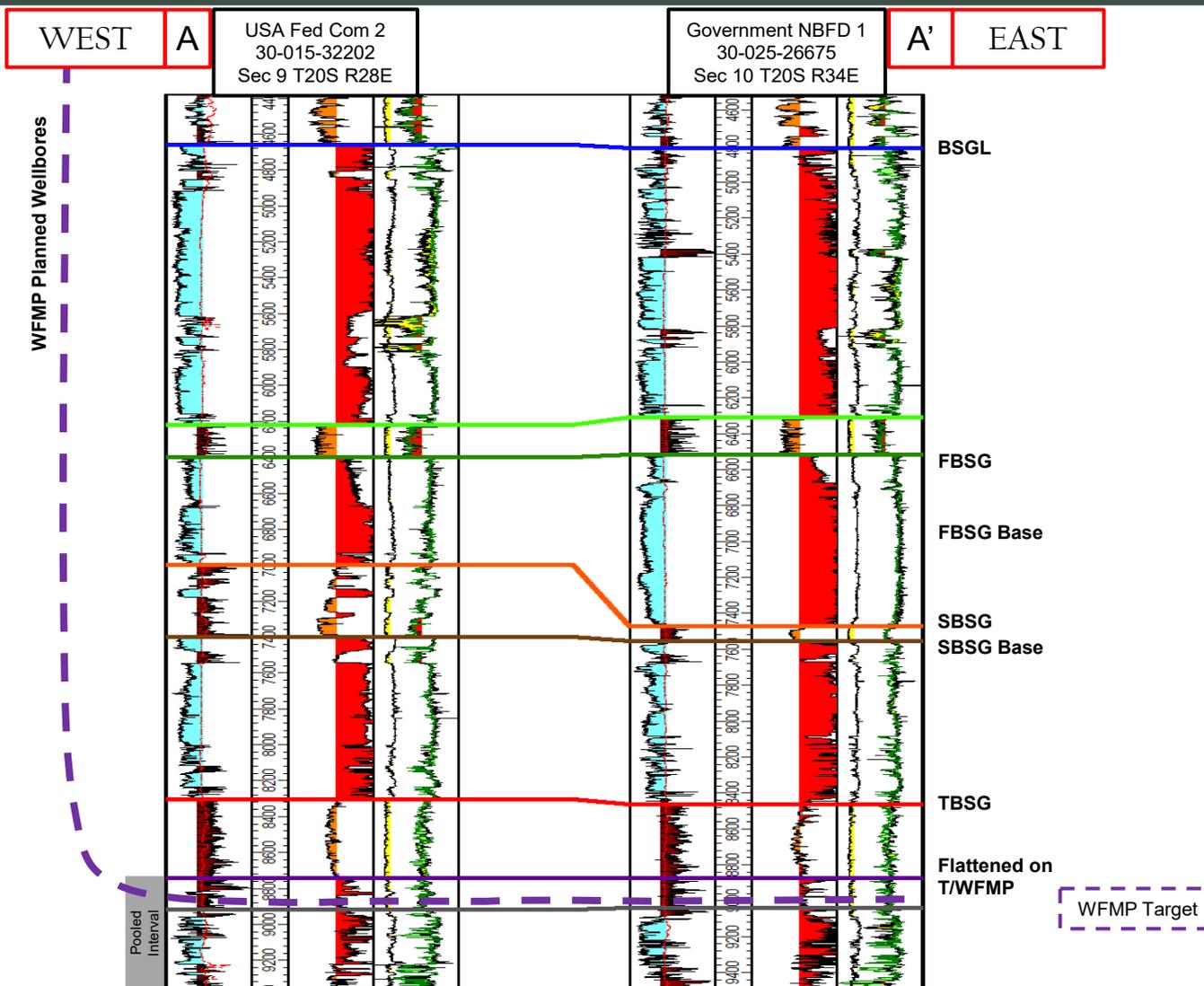




# Stratigraphic Cross-Section A-A'

Koala 9 Fed Com Wolfcamp

Colgate Production, LLC  
Case No. 23643  
Exhibit B-10

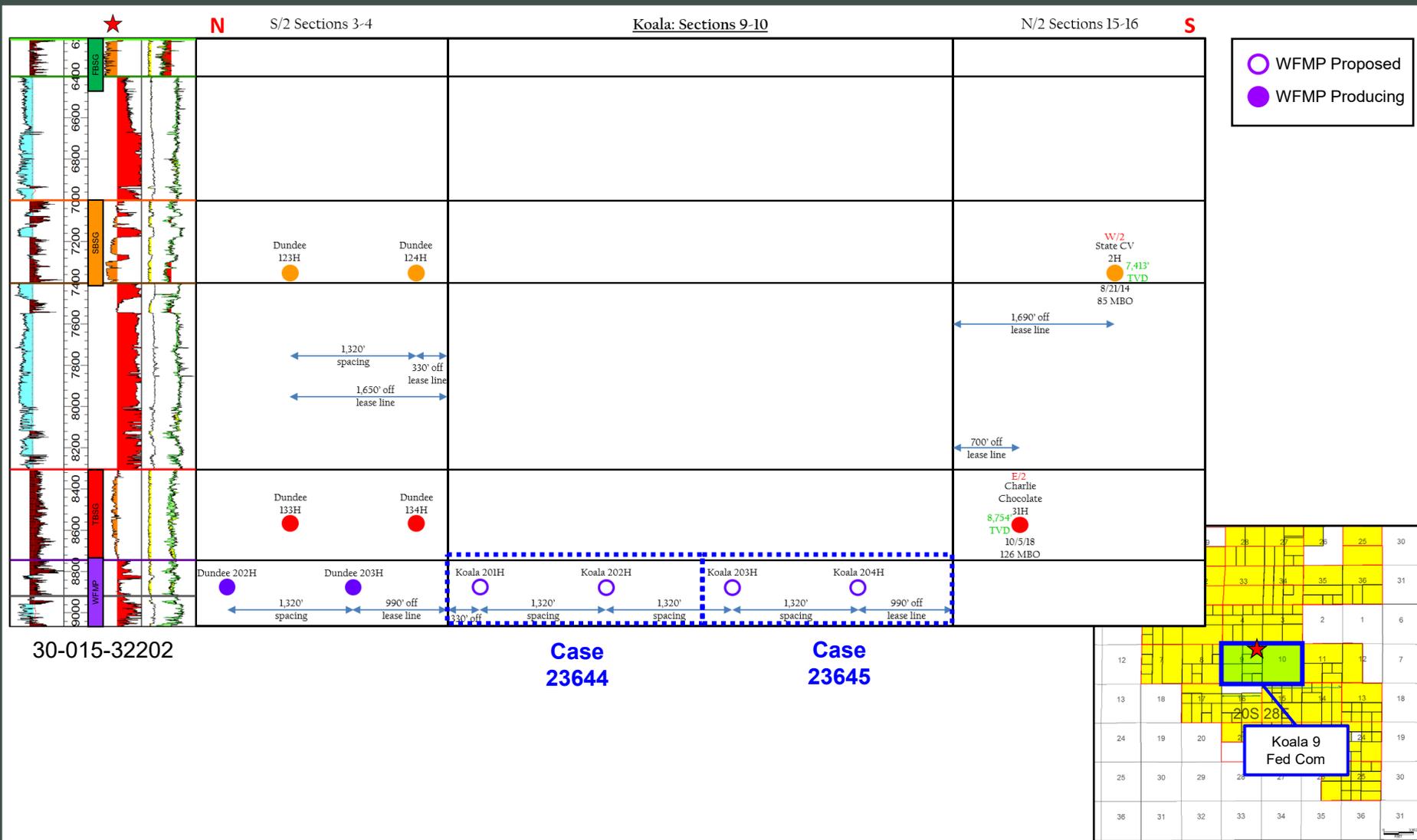




# Gun Barrel Development Plan

## Koala 9 Fed Com Bone Spring

Colgate Production, LLC  
Case No. 23643  
Exhibit B-11



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

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

**CASE NO. 23643**

**SELF-AFFIRMED STATEMENT  
OF DANA S. HARDY**

1. I am attorney in fact and authorized representative of Colgate Operating, LLC, the Applicant herein.

2. I am familiar with the Notice Letter attached as **Exhibit C-1** and caused the Notice Letter, along with the Application in this case, to be sent to the parties set out in the chart attached as **Exhibit C-2**.

3. Exhibit C-2 also provides the date each Notice Letter was sent and the date each return was received.

4. Copies of the certified mail green cards and white slips are attached as **Exhibit C-3** as supporting documentation for proof of mailing and the information provided on Exhibit C-2.

5. On July 6, 2023, I caused a notice to be published to all interested parties in the Carlsbad Current Argus. An Affidavit of Publication from the Legal Clerk of the Carlsbad Current Argus, along with a copy of the notice publication, is attached as **Exhibit C-4**.

6. I understand this Self-Affirmed Statement will be used as written testimony in the subject cases. I affirm that my testimony above is true and correct and it made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

/s/ Dana S. Hardy  
Dana S. Hardy

July 18, 2023  
Date

**Colgate Operating, LLC  
Case No. 23643  
Exhibit C**



hinklelawfirm.com

# HINKLE SHANOR LLP

ATTORNEYS AT LAW

P.O. BOX 2068

SANTA FE, NEW MEXICO 87504

505-982-4554 (FAX) 505-982-8623

WRITER:  
Dana S. Hardy, Partner  
dhardy@hinklelawfirm.com

June 29, 2023

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

## TO ALL PARTIES ENTITLED TO NOTICE

**Re: Case Nos. 23640 - 23645 – Applications of Colgate Production, LLC for Compulsory Pooling, Eddy County, New Mexico.**

To whom it may concern:

This letter is to advise you that the enclosed applications were filed with the New Mexico Oil Conservation Division. The hearing will be conducted on **July 20, 2023**, beginning at 8:15 a.m.

Hearings are currently conducted remotely. To participate in the electronic hearing, see the instructions posted on the OCD Hearings website: <https://www.emnrd.nm.gov/ocd/hearing-info/>. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Pursuant to Division Rule 19.15.4.13.B, a party who intends to present evidence at the hearing shall file a pre-hearing statement and serve copies on other parties, or the attorneys of parties who are represented by counsel, at least four business days in advance of a scheduled hearing, but in no event later than 5:00 p.m. Mountain Time, on the Thursday preceding the scheduled hearing date. The statement must be submitted through the OCD E-Permitting system (<https://wwwapps.emnrd.nm.gov/ocd/ocdpermitting/>) or via e-mail to [ocd.hearings@emnrd.nm.gov](mailto:ocd.hearings@emnrd.nm.gov) and should include: the names of the parties and their attorneys, a concise statement of the case, the names of all witnesses the party will call to testify at the hearing, the approximate time the party will need to present its case, and identification of any procedural matters that are to be resolved prior to the hearing.

Please contact Mark Hajdik, Senior Staff Landman, at 432-257-3886, if you have questions regarding this matter.

Sincerely,

*/s/ Dana S. Hardy*

Dana S. Hardy

Enclosure

**Colgate Operating, LLC**  
**Case No. 23643**  
**Exhibit C-1**

PO BOX 10  
ROSWELL, NEW MEXICO 88202  
(575) 622-6510  
FAX (575) 623-9332

7601 JEFFERSON ST NE · SUITE 180  
ALBUQUERQUE, NEW MEXICO 87109  
505-858-8320  
(FAX) 505-858-8321

PO BOX 2068  
SANTA FE, NEW MEXICO 87504  
(505) 982-4554  
FAX (505) 982-8623



hinklelawfirm.com

# HINKLE SHANOR LLP

ATTORNEYS AT LAW

P.O. BOX 2068

SANTA FE, NEW MEXICO 87504

505-982-4554 (FAX) 505-982-8623

WRITER:  
Dana S. Hardy, Partner  
dhardy@hinklelawfirm.com

June 30, 2023

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

**TO ALL PARTIES ENTITLED TO NOTICE**

**Re: Case Nos. 23640 - 23645 – Applications of Colgate Production, LLC for Compulsory Pooling, Eddy County, New Mexico.**

To whom it may concern:

This letter is to advise you that the enclosed applications were filed with the New Mexico Oil Conservation Division. The hearing will be conducted on **July 20, 2023**, beginning at 8:15 a.m.

Hearings are currently conducted remotely. To participate in the electronic hearing, see the instructions posted on the OCD Hearings website: <https://www.emnrd.nm.gov/ocd/hearing-info/>. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Pursuant to Division Rule 19.15.4.13.B, a party who intends to present evidence at the hearing shall file a pre-hearing statement and serve copies on other parties, or the attorneys of parties who are represented by counsel, at least four business days in advance of a scheduled hearing, but in no event later than 5:00 p.m. Mountain Time, on the Thursday preceding the scheduled hearing date. The statement must be submitted through the OCD E-Permitting system (<https://wwwapps.emnrd.nm.gov/ocd/ocdpermitting/>) or via e-mail to [ocd.hearings@emnrd.nm.gov](mailto:ocd.hearings@emnrd.nm.gov) and should include: the names of the parties and their attorneys, a concise statement of the case, the names of all witnesses the party will call to testify at the hearing, the approximate time the party will need to present its case, and identification of any procedural matters that are to be resolved prior to the hearing.

Please contact Mark Hajdik, Senior Staff Landman, at 432-257-3886, if you have questions regarding this matter.

Sincerely,

/s/ Dana S. Hardy

Dana S. Hardy

Enclosure

PO BOX 10  
ROSWELL, NEW MEXICO 88202  
(575) 622-6510  
FAX (575) 623-9332

7601 JEFFERSON ST NE · SUITE 180  
ALBUQUERQUE, NEW MEXICO 87109  
505-858-8320  
(FAX) 505-858-8321

PO BOX 2068  
SANTA FE, NEW MEXICO 87504  
(505) 982-4554  
FAX (505) 982-8623

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

**APPLICATION OF COLGATE  
PRODUCTION, LLC FOR COMPULSORY  
POOLING, EDDY COUNTY, NEW MEXICO.**

**CASE NO. 23640-45**

**WI NOTICE LETTER CHART**

<b>PARTY</b>	<b>NOTICE LETTER SENT</b>	<b>RETURN RECEIVED</b>
James H. Barnett PO Box 4966 Midland, TX 79702	06/29/23	Per USPS Tracking (Last Checked 07/12/23):  07/11/23 – Item in transit to next facility.
Bonefish, LLC 200 Sunset Road, Ste D El Paso, Tx 79922	06/29/23	07/05/23  No signature.
Charles W. Seltzer Trust u/w/o Helen Joy Seltzer 5949 Sherry Lane Suite 1175 Dallas, Texas 75225	06/29/23	07/10/23
Daniel Energy, Inc. 5932 Henslee Ct, Granbury, TX, 76049	06/29/23	07/06/23
Davoil Inc. 6300 Ridglea Pl # 1208 Fort Worth, TX 76116	06/29/23	07/10/23
Devon Energy Production Company, LP 333 W Sheridan Ave Oklahoma City, OK 73102	06/29/23	07/10/23
Energen Resources Corporation 500 W Texas Ave #1200 Midland, TX 79701	06/29/23	Per USPS Tracking (Last Checked 07/12/23):  07/05/23 – Item delivered to front desk, mailroom, or reception area.
Great Western Drilling Ltd. 700 W Louisiana Ave Midland, TX 79701	06/29/23	07/06/23
Lepakast Properties, LP 550 West Texas Avenue Suite 1000 Midland, Texas 79701	06/29/23	07/07/23
McVay Drilling Inc. - interest subsequently conveyed to Legion, Avant & Double Cabin 401 E Bender Blvd Hobbs, NM 88241	06/29/23	07/10/23

**Colgate Operating, LLC  
Case No. 23643  
Exhibit C-2**

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

**APPLICATION OF COLGATE  
PRODUCTION, LLC FOR COMPULSORY  
POOLING, EDDY COUNTY, NEW MEXICO.**

**CASE NO. 23640-45**

**WI NOTICE LETTER CHART**

Pocahantas Oil Co., Inc. 4905 Island Dr. Midland, TX, 79707-1411 Attn: Phillip Lawson	06/29/23	07/06/23
Rutter & Wilbanks Corporation Attn: Bill Rutter PO Box 3186 Midland, TX 79702	06/29/23	Per USPS Tracking (Last Checked 07/12/23):  07/07/23 – Item in transit to next facility.
Shauna Seltzer Redwine Trust u/w/o Helen Joy Seltzer 5949 Sherry Lane Suite 1175 Dallas, Texas 75225	06/29/23	07/10/23  No signature.

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

**APPLICATION OF COLGATE  
PRODUCTION, LLC FOR COMPULSORY  
POOLING, EDDY COUNTY, NEW MEXICO.**

**CASE NO. 23640-45**

**ORRI NOTICE LETTER CHART**

<b>PARTY</b>	<b>NOTICE LETTER SENT</b>	<b>RETURN RECEIVED</b>
V. W. Adams and wife, Joan Adams 42722 N 3RD Ave New River, AZ, 85087	06/29/23	07/10/23
Anna E. Alford PO Box 1908 McCombs, MS 39649	06/29/23	07/10/23
Frances K. Alford PO Box 1908 McCombs, MS 39649	06/29/23	07/10/23
James L. Alford, Jr. PO Box 489 McCombs, MS 39649	06/29/23	07/10/23
John Warner Alford 9 County Road 154 Oxford, MS, 38655	06/29/23	07/10/23
Louis Alford, III PO Box 1908 McCombs, MS 39649	06/29/23	07/10/23
Anthracite Energy Partners, LLC 3921 Tanforan Ave Midland, TX 79707-1427	06/29/23	Per USPS Tracking (Last Checked 07/13/23):  07/06/23 – Item in transit to next facility.
Robert J. Behme 1809 Woodlawn Dr Washington, IN, 47501	06/29/23	Per USPS Tracking (Last Checked 07/13/23):  07/10/23 – Individual picked up at post office.
Emily A. Carlisle PO Box 1908 McCombs, MS 39649	06/29/23	07/10/23
Chi Energy, Inc. 212 N Main St # 212 Midland, TX 79701	06/29/23	07/06/23
Chi Energy, Inc. f/b/o Chi Royalty Pool 212 N Main St # 212 Midland, TX 79701	06/29/23	07/06/23

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

**APPLICATION OF COLGATE  
PRODUCTION, LLC FOR COMPULSORY  
POOLING, EDDY COUNTY, NEW MEXICO.**

**CASE NO. 23640-45**

**ORRI NOTICE LETTER CHART**

Colburn Oil, LP 2612 Hughes St Midland, TX 79705-6124	06/29/23	Per USPS Tracking (Last Checked 07/13/23):  07/06/23 – Item in transit to next facility.
Gene H. Davis 2000 E 12th Ave Unit 31 Denver, CO, 80206	06/29/23	07/07/23  No signature.
Elizabeth S. Shelton Living Trust 315 N Orchard LN Covington, LA, 70433	06/29/23	07/10/23
Eloise R. Carlisle, Estate 6408 Forest Hills Dr Austin, TX, 78746	06/29/23	07/11/23
Estate of Benjamin I. Cooksey 5761 Whitechapel Dr Cincinnati, OH, 45236	06/29/23	07/13/23  No signature.
Estate of Katherine E. Carlisle 431 Carlisle RD Sarah, MS, 38665	06/29/23	Per USPS Tracking (Last Checked 07/13/23):  07/06/23 – Item returned to sender.
Estate of Suzanne Mitchell 1509 State St Washington, IN, 47501	06/29/23	07/10/23
Ann E. Lambuth PO Box 489 McCombs, MS 39649	06/29/23	07/13/23
Elise A. Lambuth 147 Harber St Ridgeland, MS 39157	06/29/23	Per USPS Tracking (Last Checked 07/13/23):  07/06/23 – Delivered to individual at the address.
James B. Lambuth PO Box 489 McCombs, MS 39649	06/29/23	07/10/23
John A. Lambuth PO Box 489 McCombs, MS 39649	06/29/23	07/10/23

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

**APPLICATION OF COLGATE  
PRODUCTION, LLC FOR COMPULSORY  
POOLING, EDDY COUNTY, NEW MEXICO.**

**CASE NO. 23640-45**

**ORRI NOTICE LETTER CHART**

Prescott A. Sherman Grandchildren's Trust f/b/o Amy Shelton Murrell 499 Lackland CT Mount Pleasant, SC, 29464	06/29/23	07/14/23
Prescott A. Sherman Grandchildren's Trust f/b/o Cristina Elizabeth Shelton 315 N Orchard LN Covington, LA, 70433	06/29/23	Per USPS Tracking (Last Checked 07/13/23):  07/08/23 – Delivery attempted.
Fred A. Sullivan 418 R St Bedford, IN, 47421	06/29/23	Per USPS Tracking (Last Checked 07/13/23):  07/12/23 – Item in transit to the destination.
Adam C. Swaney PO Box 489 McCombs, MS 39649	06/29/23	07/10/23
Katherine A. Swaney 10106 Dogwood Ave Palm Beach Gardens, FL 33410	06/29/23	07/10/23
Tailwag Resources, LLC 309 W 7th St STE 915 Fort Worth, TX 76102-6903	06/29/23	07/10/23
Russell C. Williams 912 Brett Cabel Rd Washington, IN, 47501	06/29/23	Per USPS Tracking (Last Checked 07/13/23):  07/11/23 – Item returned to sender.
The Wright NM Partners, LP 212 N Main St # 212 Midland, TX 79701	06/29/23	07/06/23

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

**APPLICATION OF COLGATE  
PRODUCTION, LLC FOR COMPULSORY  
POOLING, EDDY COUNTY, NEW MEXICO.**

**CASE NO. 23640-45**

**RTO NOTICE LETTER CHART**

<b>PARTY</b>	<b>NOTICE LETTER SENT</b>	<b>RETURN RECEIVED</b>
Burton Flat Investors, Ltd. PO Box 1799 Midland, TX 79702	06/30/23	Per USPS Tracking (Last Checked 07/12/23):  07/12/23 – Item in transit to the destination.
NRM 84-D Income, Ltd. c/o Natural Resource Management Corporation 2121 San Jacinto Street Dallas, TX	06/30/23	Per USPS Tracking (Last Checked 07/12/23):  07/07/23 – Item in transit to next facility.
NRM Operating Company, LP c/o Natural Resource Management Corporation 2121 San Jacinto Street Dallas, TX	06/30/23	Per USPS Tracking (Last Checked 07/12/23):  07/07/23 – Item in transit to next facility.
Oxy USA Inc. c/o New Mexico Land Negotiator 5 Greenway Plaza, Suite 110 Houston, TX 77046	06/30/23	07/10/23
Frey N. Rad, d/b/a Dexter Resources Co. PO Box 7015 Midland, TX 79708	06/30/23	07/10/23
John R. Seay 2603 Jones Rd Apt 310 Austin, TX 78745	06/30/23	07/11/23

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Certified Mail Fee \$ \_\_\_\_\_

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

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To

Bonefish, LLC  
200 Sunset Road, Ste D  
El Paso, Tx 79922

23640-45 PRO Koala (WI)

Postmark Here

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<p>1. Complete items 1, 2, and 3.</p> <p>2. Print your name and address on the reverse so that we can return the card to you.</p> <p>3. Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p>Bonefish, LLC 200 Sunset Road, Ste D El Paso, Tx 79922</p> <p style="text-align: right; font-size: small;">23640-45 PRO Koala (WI)</p> <p style="text-align: center;">9590 9402 7635 2122 6631 39</p> </div> <p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">7022 1670 0002 1188 5886</p>	<p>A. Signature</p> <p><b>X</b> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p style="text-align: center; font-size: 1.5em; font-weight: bold; color: red;">RECEIVED</p> <p style="text-align: center; font-size: 1.2em;">JUL 05 2023</p> <p style="text-align: center;">Hinkle Shanor LLP</p> <p>3. Service Type</p> <table style="width: 100%; font-size: small;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Restricted Delivery	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Restricted Delivery																
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt																

**Colgate Operating, LLC**  
**Case No. 23643**  
**Exhibit C-3**

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SANTA ANA  
JUL 10 2023  
87507-9998

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Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fees as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Send To Charles W. Seltzer Trust u/w/o Helen Joy Seltzer 5949 Sherry Lane Suite 1175 Dallas, Texas 75225 23640-45 PRO Koala (WI)	

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Christy Wilcox</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Christy Wilcox</i></p> <p>C. Date of Delivery <i>7/5/23</i></p> <p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes                  If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center; font-size: 2em; font-weight: bold;">RECEIVED</p> <p style="text-align: center; font-size: 1.2em;">JUL 10 2023</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Charles W. Seltzer Trust u/w/o Helen Joy Seltzer 5949 Sherry Lane Suite 1175 Dallas, Texas 75225 23640-45 PRO Koala (WI)</p>	<p>3. Service Type <i>Hinkle Shanor LLC</i></p> <p> <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)                 </p>
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em;">7022 1670 0002 1188 5893</p>	
<p>9590 9402 7635 2122 6631 53</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

7022 1670 0002 1188 5909

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

Postage \$  
 Total Postage and Fees \$

Sent To  
 Daniel Energy, Inc.  
 5932 Henslee Ct,  
 Granbury, TX, 76049  
 23640-45 PRO Koala (WI)

PS Form 3800, April 2015 PSN 7530-02-000-8047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>1 Complete items 1, 2, and 3.</p> <p>1 Print your name and address on the reverse so that we can return the card to you.</p> <p>2 Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Daniel Energy, Inc.            5932 Henslee Ct,            Granbury, TX, 76049            23640-45 PRO Koala (WI)</p> <p>9590 9402 7635 2122 6631 08</p> <p>2 Article Number (Transfer from service label)            7022 1670 0002 1188 5909</p>	<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)            Lin Barber</p> <p>C. Date of Delivery            7-3-23</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><b>RECEIVED</b>            JUL 06 2023            Hinkle Shanor LLP            Santa Fe, NM 87504</p> <p>3. Service Type  <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

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Certified Mail Fee \$ _____ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <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 \$ _____ Total Postage and Fees \$ _____ Sent To: Davoil Inc. 6300 Ridglea Pl # 1208 Fort Worth, TX 76116 23640-45 PRO Koala (WI)	Postmark Here 
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PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> <p>1. Article Addressed to:</p> <p style="text-align: center;">Davoil Inc. 6300 Ridglea Pl # 1208 Fort Worth, TX 76116 23640-45 PRO Koala (WI)</p> <div style="text-align: center;">             9590 9402 7635 2122 6632 07         </div> <p>2. Article Number (Transfer from service label) 7022 1670 0002 1188 5916</p>	<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee  <i>[Signature]</i></p> <p>B. Received by (Printed Name) C. Date of Delivery  <i>JOANNE TORRES</i> <i>7-10-23</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p> <div style="text-align: center; font-size: 2em; font-weight: bold;">RECEIVED</div> <p style="text-align: center; font-size: 1.5em;">JUL 10 2023</p> <p>3. Service Type  <input type="checkbox"/> Adult Signature <i>Hinkle Shanor LLP</i>  <input type="checkbox"/> Adult Signature Restricted Delivery <i>Santa Fe NM</i>  <input type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

7022 1670 0002 1188 5923

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Certified Mail Fee \$ \_\_\_\_\_

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

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Postmark Here

Devon Energy Production Co., LP  
 333 W Sheridan Ave  
 Oklahoma City, OK 73102  
 23640-45 PRO Koala (WI)

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <i>David Carullo</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No          If YES, enter delivery address below:</p> <p><b>RECEIVED</b>          JUL 10 2023</p>
<p>1. Article Addressed to:</p> <p>Devon Energy Production Co., LP          333 W Sheridan Ave          Oklahoma City, OK 73102          23640-45 PRO Koala (WI)</p> <p>9590 9402 7635 2122 6631 15</p>	<p>3. Service Type <i>Linkle Shanor LLP Santa Fe NM 87504</i></p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7022 1670 0002 1188 5923</p>	
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Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Great Western Drilling Ltd.  
 700 W Louisiana Ave  
 Midland, TX 79701

23640-45 PRO Koala (WI)

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

7022 1670 0002 1188 8337

OFFICE  
 7/3/2023  
 87601-9998

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<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>A. Shands</u></p> <p>C. Date of Delivery <u>7/3/23</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below <input checked="" type="checkbox"/> No</p> <p><b>RECEIVED</b></p> <p>JUL 06 2023</p> <p>Hinkle Shanor LLP          Santa Fe NM 87504</p>
<p>1. Article Addressed to:</p> <p>Great Western Drilling Ltd.          700 W Louisiana Ave          Midland, TX 79701</p> <p>23640-45 PRO Koala (WI)</p>  <p>9590 9402 7635 2122 6632 21</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7022 1670 0002 1188 8337</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

7022 1670 0002 1188 8344

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Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To

Lepakast Properties, LP  
 550 West Texas Ave Suite 1000  
 Midland, Texas 79701  
 23640-45 PRO Koala (WI)

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature   <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>
<p>1. Article Addressed to:</p> <p>Lepakast Properties, LP          550 West Texas Ave Suite 1000          Midland, Texas 79701          23640-45 PRO Koala (WI)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><b>RECEIVED</b>          JUL 07 2023</p>
<p>2. Article Number (Transfer from service label)          7022 1670 0002 1188 8344</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature Hinkle Shanor LLP <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
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Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Postmark Here

McVay Drilling Inc.  
 401 E Bender Blvd  
 Hobbs, NM 88241

23640-45 PRO Koala (WI)

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

7022 1670 0002 1188 8351

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Wanett McCauley</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Wanett McCauley</i> C. Date of Delivery <i>7-5-23</i></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><b>RECEIVED</b>        JUL 10 2023</p>	
<p>1. Article Addressed to:</p> <p>McVay Drilling Inc.        401 E Bender Blvd        Hobbs, NM 88241</p> <p>23640-45 PRO Koala (WI)</p> <p>        9590 9402 7635 2122 6632 14</p>	<p>3. Service Type <i>Hinkle Shanor LLP</i></p> <p><input type="checkbox"/> Adult Signature <i>Santa Fe NM 87504</i> <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7022 1670 0002 1188 8351</p>	<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

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Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<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 \$ _____	
Total Postage and Fees \$ _____	
Special Service Pocahantas Oil Co., Inc. Attn: Phillip Lawson 4905 Island Dr. Midland, TX, 79707-1411 23640-45 PRO Koala (WI)	

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery _____</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Pocahantas Oil Co., Inc.          Attn: Phillip Lawson          4905 Island Dr.          Midland, TX, 79707-1411          23640-45 PRO Koala (WI)</p> <div style="text-align: center;">           9590 9402 7635 2122 6631 91       </div>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p> <div style="text-align: center; font-size: 2em; font-weight: bold; color: green;">         RECEIVED          JUL 06 2023       </div> <p style="text-align: center; font-size: 0.8em;">Hinkle Shattler LLP</p>
<p>2. Article Number (Transfer from service label)          7022 1670 0002 1188 8368</p>	<p>3. Service Type Santa Fe NM 87502 Priority Mail Express®</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Adult Signature</li> <li><input type="checkbox"/> Adult Signature Restricted Delivery</li> <li><input type="checkbox"/> Certified Mail®</li> <li><input type="checkbox"/> Certified Mail Restricted Delivery</li> <li><input type="checkbox"/> Collect on Delivery</li> <li><input type="checkbox"/> Collect on Delivery Restricted Delivery</li> <li><input type="checkbox"/> Insured Mail</li> <li><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</li> <li><input type="checkbox"/> Registered Mail™</li> <li><input type="checkbox"/> Registered Mail Restricted Delivery</li> <li><input type="checkbox"/> Signature Confirmation™</li> <li><input type="checkbox"/> Signature Confirmation Restricted Delivery</li> </ul>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

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9589 0710 5270 0104 1987 30

Certified Mail Fee \$ _____	Postmark Date _____
Extra Services & Fees (check box, add fees as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<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 \$ _____	
Total Postage and Fees \$ _____	
To: Shauna Seltzer Redwine Trust u/w/o Helen Joy Seltzer 5949 Sherry Lane Suite 1175 Dallas, Texas 75225	
23640-45 PRO Koala (WI)	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p><b>A. Signature</b></p> <p><b>X</b> <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>B. Received by (Printed Name)</b> <span style="float: right;"><b>C. Date of Delivery</b></span></p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Shauna Seltzer Redwine Trust u/w/o Helen Joy Seltzer 5949 Sherry Lane Suite 1175 Dallas, Texas 75225 <small>23640-45 PRO Koala (WI)</small></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="font-size: 2em; text-align: center; font-weight: bold;">RECEIVED</p> <p style="text-align: center; font-size: 1.5em;">JUL 10 2023</p>
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">9589 0710 5270 0104 1987 30</p>	<p>3. Service Type <b>Hinkle Shanor LLP</b> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature <b>Santa Fe, NM 87564</b> <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span></p>	

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Certified Mail Fee \$ _____	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<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 \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and No. V. W. Adams and wife, Joan Adams 42722 N 3RD Ave City, State, Zip New River, AZ, 85087 23640-45 PRO Koala (ORRI)	

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Vern Adams</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span>  <b>VERN ADAMS</b> <span style="float: right;"><b>7/5/23</b></span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">V. W. Adams and wife, Joan Adams          42722 N 3RD Ave          New River, AZ, 85087</p> <p style="text-align: right; font-size: 0.8em;">23640-45 PRO Koala (ORRI)</p>	<p style="font-size: 2em; font-weight: bold; color: #004a99;">RECEIVED</p> <p style="font-size: 1.5em; font-weight: bold; color: #004a99;">JUL 10 2023</p>
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">7022 1670 0002 1189 6745</p>	<p>3. Service Type <b>Hinkle Shanor LLP</b> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature <b>Santa Fe NM 87504</b> <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span></p>	

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

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

**Total Postage and Fees** \$ \_\_\_\_\_

Postmark Here

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

Street and Apt. No. Anna E. Alford  
 PO Box 1908  
 City, State, ZIP+4 McCombs, MS 39649 23640-45 PRO Koala (ORR)

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse, so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>Duke Carlisle</i></p> <p>B. Received by (Printed Name) <b>DUKE CARLISLE</b></p> <p>C. Date of Delivery <b>7-3-23</b></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes        If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><b>RECEIVED</b>        JUL 03 10 2023</p>
<p>1. Article Addressed to:</p> <p>Anna E. Alford          PO Box 1908          McCombs, MS 39649          23640-45 PRO Koala (ORR)</p> <p>9590 9402 7635 2122 6522 18</p>	<p>3. Service Type <b>Hinkle Shapiro LLP</b></p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7022 1670 0002 1189 6752</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

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7022 1670 0002 1189 6769

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

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To

Street and Ap. Frances K. Alford  
PO Box 1908  
City, State, Zip McCombs, MS 39649  
23640-45 PRO Koala (ORRI)

Postmark Here

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature x <i>Duke Carlisle</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>DUKE CARLISLE</i> C. Date of Delivery <i>7-3-23</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p><b>RECEIVED</b> MCCOMB POST OFFICE JUL 10 JUL 03 2023</p>
<p>1. Article Addressed to:</p> <p>Frances K. Alford PO Box 1908 McCombs, MS 39649 23640-45 PRO Koala (ORRI)</p> <p>9590 9402 7635 2122 6522 25</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <i>39649</i> <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7022 1670 0002 1189 6769</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

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

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage  
 \$ \_\_\_\_\_

Total Postage and Fees  
 \$ \_\_\_\_\_

Sent To  
 Street and Ap James L. Alford, Jr.  
 PO Box 489  
 McCombs, MS 39649

City, State, Zi 23640-45 PRO Koala (ORRI)

Postmark Here  
 JUN 29 2023 SANTA FE MAIN P.O. 87501-9998

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Shanor</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery <u>7/5/23</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes        If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>James L. Alford, Jr.          PO Box 489          McCombs, MS 39649</p> <p>23640-45 PRO Koala (ORRI)</p>	<p><b>RECEIVED</b>          JUL 10 2023</p>
<p>2. Article Number (Transfer from service label)          7022 1670 0002 1189 6776</p>	<p>3. Service Type Hinkle Shanor LLP Priority Mail Express®          Santa Fe NM 87508 Registered Mail™</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

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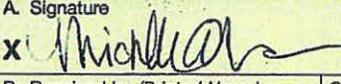
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Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and Ap. John Warner Alford 9 County Road 154 Oxford, MS, 38655 City, State, Zi. 23640-45 PRO Koala (ORRJ)	

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> <p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">                 John Warner Alford                  9 County Road 154                  Oxford, MS, 38655                  23640-45 PRO Koala (ORRJ)             </div> <div style="text-align: center;">                   9590 9402 7635 2122 6573 05             </div> <p>2. Article Number (Transfer from service label)                  7022 1670 0002 1189 6783</p>	<p>A. Signature                  X  <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                  If YES, enter delivery address below: <input type="checkbox"/> No</p> <div style="text-align: center; font-size: 2em; font-weight: bold; margin: 10px 0;">                 RECEIVED             </div> <p style="text-align: center; font-size: 1.5em; font-weight: bold;">JUL 10 2023</p> <p>3. Service Type <span style="float: right;">Hinkle Shanor LLP Santa Fe NM 87501</span></p> <table style="width: 100%; font-size: 0.8em;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt																

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Certified Mail Fee \$ \_\_\_\_\_

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

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To

Street and Apt. Louis Alford, III  
 PO Box 1908  
 City, State, Z. McCombs, MS 39649

23640-45 PRO Koala (ORRI)

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee  <i>Duke Carlisle</i></p> <p>B. Received by (Printed Name)  <b>DUKE CARLISLE</b></p> <p>C. Date of Delivery  <b>JUL 10 2023</b></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes        If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Louis Alford, III          PO Box 1908          McCombs, MS 39649</p> <p>23640-45 PRO Koala (ORRI)</p>  <p>9590 9402 7635 2122 6573 12</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <i>Hinkle Shanor LLP</i> <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7022 1670 0002 1189 6790</p>	<p><b>RECEIVED</b></p> <p>JUL 10 2023</p>
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7022 1670 0002 1189 6684

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Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy) \$	
<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 \$	
<b>Total Postage and Fees</b> \$	
Sent To	
Street and Apt.	Emily A. Carlisle PO Box 1908 McCombs, MS 39649
City, State, Zi	23640-45 PRO Koala (ORRI)
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Duke Carlisle</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <i>DUKE CARLISLE</i></p> <p>C. Date of Delivery  <b>JUL 10 2023</b></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Emily A. Carlisle          PO Box 1908          McCombs, MS 39649          23640-45 PRO Koala (ORRI)</p>  <p>9590 9402 7635 2122 6573 43</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Registered Mail™  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)  <b>7022 1670 0002 1189 6684</b></p>	
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Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To  
 Street and Apt. # Chi Energy, Inc.  
 212 N Main St # 212  
 Midland, TX 79701  
 City, State, ZIP+4 23640-45 PRO Koala (ORRI)

Postmark Here

PS Form 3800, April 2015 PSN 7530-02-000-6047 See Reverse for Instructions

7022 1670 0002 1189 6691

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>7-3-23</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes        If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><b>RECEIVED</b>  <b>JUL 06 2023</b></p>
<p>1. Article Addressed to:</p> <p>Chi Energy, Inc.          212 N Main St # 212          Midland, TX 79701          23640-45 PRO Koala (ORRI)</p> <p>9590 9402 7635 2122 6573 50</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7022 1670 0002 1189 6691</p>	
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Certified Mail Fee \$ \_\_\_\_\_

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

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To Chi Energy, Inc.  
 f/b/o Chi Royalty Pool  
 Street and Apt 212 N Main St # 212  
 City, State, Zip Midland, TX 79701 23640-45 PRO Koala (ORRI)

Postmark Here

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>DW</u></p> <p>C. Date of Delivery <u>7-3-23</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below <input type="checkbox"/> No</p> <p><b>RECEIVED</b></p> <p>JUL 06 2023</p> <p>Miracle Shanor LLP</p>
<p>1. Article Addressed to:</p> <p>Chi Energy, Inc.          f/b/o Chi Royalty Pool          212 N Main St # 212          Midland, TX 79701          23640-45 PRO Koala (ORRI)</p> <p>9590 9402 7635 2122 6573 67</p>	<p>3. Service Type Santa Fe NM 87504</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7022 1670 0002 1189 6707</p>	
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Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

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

Street and Apt. 1 Gene H. Davis  
 2000 E 12th Ave Unit 31

City, State, ZIP+4 Denver, CO, 80206  
 23640-45 PRO Koala (ORRI)

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



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p>
<p>1. Article Addressed to:</p> <p>Gene H. Davis          2000 E 12th Ave Unit 31          Denver, CO, 80206</p> <p>23640-45 PRO Koala (ORRI)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><b>RECEIVED</b>          JUL 07 2023</p>
<p>9590 9402 7635 2122 6573 81</p> <p>2 Article Number (Transfer from service label)          7022 1670 0002 1189 6721</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature Hinkle Shanor <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
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Certified Mail Fee \$ \_\_\_\_\_

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

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To

Street and Apt Elizabeth S. Shelton Living Trust  
 315 N Orchard LN

City, State, Zip Covington, LA, 70433

23640-45 PRO Koala (ORR)

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)            Elizabeth S. Shelton</p> <p>C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <p>Elizabeth S. Shelton Living Trust            315 N Orchard LN            Covington, LA, 70433</p> <p>23640-45 PRO Koala (ORR)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><b>RECEIVED</b>            JUL 10 2023</p>
<p>2. Article Number (Transfer from service label)            7022 1670 0002 1189 6738</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature Hinkie Sharpe LLP <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$875 <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
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Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<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 \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and Apt. No. <u>Eloise R. Carlisle, Estate</u> <u>6408 Forest Hills Dr</u> City, State, ZIP+4 <u>Austin, TX, 78746</u>	
23640-45 PRO Koala (ORRI)	

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature X <u>Conid-19</u> <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span>
1. Article Addressed to:  <div style="text-align: center; padding: 10px;">                     Eloise R. Carlisle, Estate                      6408 Forest Hills Dr                      Austin, TX, 78746                       23640-45 PRO Koala (ORRI)                 </div>	B. Received by (Printed Name) <u>Conid-19</u> C. Date of Delivery <u>7/7/23</u>  D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below. <input type="checkbox"/> No
2. Article Number (Transfer from service label) <b>7022 1670 0002 1189 4895</b>	3. Service Type <u>Hinkle Sharon LLP</u> <input type="checkbox"/> Adult Signature <u>Santa Fe NM 87504</u> <span style="float: right;"><input type="checkbox"/> Priority Mail Express®</span> <input type="checkbox"/> Adult Signature Restricted Delivery <span style="float: right;"><input type="checkbox"/> Registered Mail™</span> <input type="checkbox"/> Certified Mail® <span style="float: right;"><input type="checkbox"/> Registered Mail Restricted Delivery</span> <input type="checkbox"/> Certified Mail Restricted Delivery <span style="float: right;"><input type="checkbox"/> Signature Confirmation™</span> <input type="checkbox"/> Collect on Delivery <span style="float: right;"><input type="checkbox"/> Signature Confirmation Restricted Delivery</span> <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)
PS Form 3811, July 2020 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span>	

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Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<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 \$ _____	
<b>Total Postage and Fees</b> \$ _____	
Sent To Estate of Benjamin I. Cooksey 5761 Whitechapel Dr Cincinnati, OH, 45236 <small>23640-45 PRO Koala (ORRI)</small>	

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p><b>A. Signature</b></p> <p><b>X</b> <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>B. Received by (Printed Name)</b> <span style="float: right;"><b>C. Date of Delivery</b></span></p> <p><b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>														
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p>Estate of Benjamin I. Cooksey 5761 Whitechapel Dr Cincinnati, OH, 45236 <small>23640-45 PRO Koala (ORRI)</small></p> </div>	<p style="font-size: 2em; font-weight: bold;">RECEIVED</p> <p style="font-size: 1.5em;">JUL 17 2023</p>														
<p>9590 9402 7635 2122 6574 11</p> <p>Article Number (Transfer from service label) <b>7022 1670 0002 1189 4901</b></p>	<p>3. Service Type</p> <table style="width: 100%; font-size: 0.8em;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Insured Mail</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®														
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™														
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery														
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™														
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery														
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Insured Mail														
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)														
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt														

7022 1670 0002 1189 6639

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<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 \$	
<b>Total Postage and Fees</b> \$	
Sent To	
Street and City, State,	Estate of Suzanne Mitchell 1509 State St Washington, IN, 47501 23640-45 PRO Koala (ORRI)
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Barbara Emmons</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Barbara Emmons</i> C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Estate of Suzanne Mitchell 1509 State St Washington, IN, 47501 23640-45 PRO Koala (ORRI)</p>	<p><b>RECEIVED</b></p> <p>JUL 10 2023 9-10P</p> <p>Hinkle Shanon LLP</p>
<p>2. Article Number (Transfer from service label)                  7022 1670 0002 1189 6639</p>	<p>3. Service Type <i>Santa Fe NM 87504</i></p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>	

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Certified Mail Fee \$ _____	Postmark Here  
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<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 \$ _____	
<b>Total Postage and Fees</b> \$ _____	
Sent To Street and Apt. Ann E. Lambuth PO Box 489 McCombs, MS 39649 City, State, ZIP 23640-45 PRO Koala (ORRI)	

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery <u>7/13/23</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>														
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;">             Ann E. Lambuth              PO Box 489              McCombs, MS 39649  <small>23640-45 PRO Koala (ORRI)</small> </div> <div style="text-align: center; margin: 5px 0;"> <p>9590 9402 7635 2122 6574 42</p> </div> <p>2. Article Number (Transfer from service label)  <span style="font-size: 1.2em; font-weight: bold;">7022 1670 0002 1189 6646</span> </p>	<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">RECEIVED</div> <div style="font-size: 1.5em; font-weight: bold; margin-bottom: 10px;">JUL 13 2023</div> <p>3. Service Type</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table> <p style="font-size: 1.2em; font-weight: bold; margin-top: 10px;">Hinkle Shanor LLP Santa Fe, NM 87504</p>	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Priority Mail Express®														
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail™														
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery														
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™														
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery														
<input type="checkbox"/> Insured Mail															
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)															
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt														

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Certified Mail Fee \$ \_\_\_\_\_

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

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Sent To

Street and Apt. James B. Lambuth  
 PO Box 489  
 City, State, ZIP+4 McCombs, MS 39649  
 23640-45 PRO Koala (ORRI)

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

7022 1670 0002 1189 6660



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery <u>7/5/23</u></p>	
<p>1. Article Addressed to:</p> <p>James B. Lambuth          PO Box 489          McCombs, MS 39649          23640-45 PRO Koala (ORRI)</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><b>RECEIVED</b>          JUL 10 '23</p>	
<p>2. Article Number (Transfer from service label)          7022 1670 0002 1189 6660</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input checked="" type="checkbox"/> Hinkle Shanor LLC <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt	

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Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hard copy) \$	
<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 \$	
<b>Total Postage and Fees</b> \$	
Sent To	
Street and John A. Lambuth PO Box 489 McCombs, MS 39649	
City, State 23640-45 PRO Koala (ORRJ)	

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> [Signature] <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery <u>7/15/23</u></p>	
<p>1. Article Addressed to:</p> <p>John A. Lambuth          PO Box 489          McCombs, MS 39649          23640-45 PRO Koala (ORRJ)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><b>RECEIVED</b>          JUL 10 2023</p>	
<p>2. Article Number (Transfer from service label)          7022 1670 0002 1189 6677</p>	<p>3. Service Type Hinkle Shanor LLP  <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt

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Certified Mail Fee \$ \_\_\_\_\_

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

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

**Total Postage and Fees** \$ \_\_\_\_\_

Sent To  
 Street: Prescott A. Sherman Grandchildren's Trust f/b/o Amy Shelton Murrell  
 499 Lackland CT  
 City: Mount Pleasant, SC, 29464  
 23640-45 PRO Koala (ORRI)

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Amy Murrell</u> C. Date of Delivery <u>7-3-23</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;"><b>RECEIVED</b> JUL 14 2023</p>
<p>1. Article Addressed to:</p> <p>Prescott A. Sherman Grandchildren's Trust f/b/o Amy Shelton Murrell          499 Lackland CT          Mount Pleasant, SC, 29464          23640-45 PRO Koala (ORRI)</p> <p>9590 9402 7635 2122 6574 80</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>Article Number (Transfer from service label)</p> <p>7022 1670 0002 1189 4826</p>	<p>Hinkle Shanor LLP          Santa Fe NM 87508</p>

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Hinkle Shanor</i>      <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)      C. Date of Delivery  <span style="margin-left: 150px;">7/5/23</span></p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Adam C. Swaney          PO Box 489          McCombs, MS 39649</p> <p style="text-align: right; font-size: small;">23640-45 PRO Koala (ORR)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center; font-size: 2em; font-weight: bold;">RECEIVED</p> <p style="text-align: center; font-size: 1.2em;">JUL 10 2023</p>
<p style="text-align: center;">             9590 9402 7635 2122 6476 27         </p>	<p>3. Service Type      Hinkle Shanor      <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature      <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery      <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®      <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery      <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery      <input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery      <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em;">7022 1670 0002 1189 4857</p>	<p style="text-align: right;">Domestic Return Receipt</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	



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Certified Mail Fee	\$	
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<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	\$	
<b>Total Postage and Fees</b>	\$	

Postmark Here

Sent To

Street and A Tailwag Resources, LLC  
309 W 7th St STE 915  
Fort Worth, TX 76102-6903  
City, State, Z 23640-45 PRO Koala (ORRI)

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>x <i>Bryan M. Street</i></p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> <i>Bryan M. Street</i> <span style="float: right;"><i>7-3-23</i></span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Tailwag Resources, LLC 309 W 7th St STE 915 Fort Worth, TX 76102-6903</p> <p style="text-align: right; font-size: 0.8em;">23640-45 PRO Koala (ORRI)</p>	<p style="font-size: 2em; font-weight: bold;">RECEIVED</p> <p style="font-size: 1.5em;">JUL 10 2023</p>
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em;">7022 1670 0002 1189 4871</p>	<p>3. Service Type <span style="float: right;">Hinkle Shanor <input type="checkbox"/> Priority Mail Express®</span></p> <p><input type="checkbox"/> Adult Signature <span style="float: right;">Santa Fe NM 87508 <input type="checkbox"/> Registered Mail™</span></p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <span style="float: right;"><input type="checkbox"/> Registered Mail Restricted Delivery</span></p> <p><input type="checkbox"/> Certified Mail® <span style="float: right;"><input type="checkbox"/> Signature Confirmation™</span></p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <span style="float: right;"><input type="checkbox"/> Signature Confirmation Restricted Delivery</span></p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

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7022 1670 0002 1189 4772

Certified Mail Fee \$ \_\_\_\_\_

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

Return Receipt (hardcopy) \$ \_\_\_\_\_

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

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

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

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

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

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

Street and A \_\_\_\_\_  
The Wright NM Partners, LP  
212 N Main St # 212  
Midland, TX 79701

City, State, & ZIP+4® \_\_\_\_\_  
Midland, TX 79701 23640-45 PRO Koala (ORRI)

Postmark Here

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> <p>1. Article Addressed to:</p> <p style="text-align: center;">The Wright NM Partners, LP 212 N Main St # 212 Midland, TX 79701</p> <p style="text-align: center; font-size: 0.8em;">23640-45 PRO Koala (ORRI)</p> <div style="text-align: center;">             9590 9402 7635 2122 6476 65         </div> <p style="font-size: 1.2em; font-weight: bold;">7022 1670 0002 1189 4772</p>	<p>A. Signature  <input checked="" type="checkbox"/> <i>DW</i> <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>B. Received by (Printed Name) <i>DW</i>      C. Date of Delivery <i>7-3-23</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <div style="text-align: center; font-size: 2em; font-weight: bold; margin: 10px 0;">RECEIVED</div> <div style="text-align: center; font-size: 1.5em; font-weight: bold; margin: 0 0 10px 0;">JUL 06 2023</div> <p>3. Service Type <i>Hinkle Shanor</i></p> <p><input type="checkbox"/> Adult Signature <span style="float: right;"><input type="checkbox"/> Priority Mail Express®</span></p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <span style="float: right;"><input type="checkbox"/> Registered Mail™</span></p> <p><input type="checkbox"/> Certified Mail® <span style="float: right;"><input type="checkbox"/> Registered Mail Restricted Delivery</span></p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <span style="float: right;"><input type="checkbox"/> Signature Confirmation™</span></p> <p><input type="checkbox"/> Collect on Delivery <span style="float: right;"><input type="checkbox"/> Signature Confirmation Restricted Delivery</span></p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

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

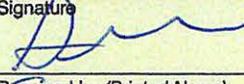
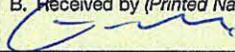
For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

7022 1670 0002 1189 6837

Certified Mail Fee \$ _____		Postmark Here
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____	
<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 \$ _____		Postmark Here
Total Postage and Fees \$ _____		
Sent To		
Street and Apt. #		Postmark Here
City, State, ZIP+4®		
23640-45 - PRO Koala (RTO)		

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> <p>1. Article Addressed to:</p> <p style="text-align: center;">Oxy USA Inc. c/o New Mexico Land Negotiator 5 Greenway Plaza, Suite 110 Houston, TX 77046 <small>23640-45 - PRO Koala (RTO)</small></p> <div style="text-align: center;">             9590 9402 7635 2122 6480 06         </div> <p>2. Article Number (Transfer from service label) 7022 1670 0002 1189 6837</p>	<p>A. Signature <b>X</b>  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span>  <span style="float: right;">7/5/23</span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below <input type="checkbox"/> No</p> <div style="text-align: center; font-size: 2em; font-weight: bold; color: green;">RECEIVED</div> <p style="text-align: center; font-size: 1.5em;">JUL 10 2023</p> <p style="text-align: center;">Hinkle Shanor LLP</p> <p>3. Service Type <span style="float: right;">Santa Fe NM 87504</span></p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®												
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™												
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery												
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™												
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
<input type="checkbox"/> Collect on Delivery Restricted Delivery													
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span></p>													

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OFFICIAL USE

Postmark  
Here

7022 1670 0002 1189 4819

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To

Street and Frey N. Rad,  
d/b/a Dexter Resources Co.  
PO Box 7015

City, State, Midland, TX 79708

23640-45 - PRO Koala (RTO)

PS Form 3800, April 2015 PSN 7830-02-000-9047. See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature</p> <p><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span></p> <p style="text-align: center;">7/18/23</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below. <input checked="" type="checkbox"/> No</p> <p style="text-align: center; font-size: 2em; font-weight: bold;">RECEIVED</p> <p style="text-align: center; font-size: 1.5em;">JUL 10 2023</p> <p style="text-align: center;">Hinkle Shanor LLP</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Frey N. Rad, d/b/a Dexter Resources Co. PO Box 7015 Midland, TX 79708</p> <p style="text-align: center; font-size: 0.8em;">23640-45 - PRO Koala (RTO)</p>	<p>3. Service Type <span style="float: right;">Priority Mail Express®</span></p> <p><input type="checkbox"/> Adult Signature <span style="float: right;"><input type="checkbox"/> Registered Mail™</span></p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <span style="float: right;"><input type="checkbox"/> Registered Mail Restricted Delivery</span></p> <p><input type="checkbox"/> Certified Mail® <span style="float: right;"><input type="checkbox"/> Signature Confirmation™</span></p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <span style="float: right;"><input type="checkbox"/> Signature Confirmation Restricted Delivery</span></p> <p><input type="checkbox"/> Collect on Delivery <span style="float: right;"><input type="checkbox"/> Signature Confirmation Restricted Delivery</span></p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <span style="float: right;"><input type="checkbox"/> Signature Confirmation Restricted Delivery</span></p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">7022 1670 0002 1189 4819</p>	<p style="text-align: center;">9590 9402 7635 2122 6480 13</p>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span></p>	

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7022 1670 0002 1189 4796

Certified Mail Fee \$

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

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To

Street and Apt. John R. Seay  
2603 Jones Rd Apt 310

City, State, ZIP Austin, TX 78745

23640-45 - PRO Koala (RTO)

PS Form 3800, April 2015 PSN 7630-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature <input checked="" type="checkbox"/> Agent Addressee <i>John R. Seay</i></p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery <u>7-11-23</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center;"><b>RECEIVED</b></p> <p style="text-align: center;">JUL 11 2023</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">John R. Seay 2603 Jones Rd Apt 310 Austin, TX 78745</p> <p style="text-align: right;">23640-45 - PRO Koala (RTO)</p> <p style="text-align: center;"> 9590 9402 7635 2122 6479 93</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7022 1670 0002 1189 4796</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

7022 1670 0002 1188 5879

<b>U.S. Postal Service™</b>	
<b>CERTIFIED MAIL® RECEIPT</b>	
<i>Domestic Mail Only</i>	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®	
<b>OFFICIAL USE</b>	
Certified Mail Fee	\$ _____
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<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	\$ _____
<b>Total Postage and Fees</b>	\$ _____
James H. Barnett PO Box 4966 Midland, TX 79702 23640-45 PRO Koala (WI)	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions.	

OFFICE

JUL 19 2023

8666 707-9998

Postmark Here

# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211885879

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

### Moving Through Network

#### In Transit to Next Facility

July 11, 2023

#### Arrived at USPS Regional Facility

OKLAHOMA CITY OK DISTRIBUTION CENTER  
July 8, 2023, 12:37 pm

#### Insufficient Address

MIDLAND, TX 79704  
July 3, 2023, 1:31 pm

#### Arrived at USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER  
July 1, 2023, 7:54 pm

#### Departed USPS Facility

ALBUQUERQUE, NM 87101  
June 30, 2023, 4:00 am

#### Arrived at USPS Facility

ALBUQUERQUE, NM 87101  
June 29, 2023, 10:44 pm

● **Hide Tracking History**

---

**Text & Email Updates**



---

**USPS Tracking Plus®**



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**Product Information**



**See Less** ^

Track Another Package

Enter tracking or barcode numbers

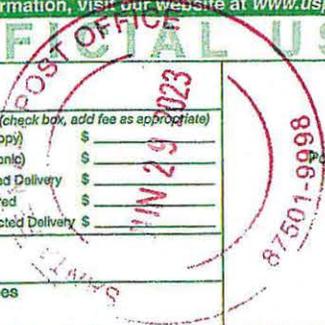
## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

7022 1670 0002 1188 5930

<b>U.S. Postal Service™</b>	
<b>CERTIFIED MAIL® RECEIPT</b>	
Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
<b>OFFICIAL USE</b>	
Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<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	
\$	
Total Postage and Fees	
\$	
Energen Resources Corporation 500 W Texas Ave #1200 Midland, TX 79701 23640-45 PRO Koala (WI)	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211885930

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your item was delivered to the front desk, reception area, or mail room at 10:40 am on July 5, 2023 in MIDLAND, TX 79701.

#### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

#### Delivered

**Delivered, Front Desk/Reception/Mail Room**

MIDLAND, TX 79701  
July 5, 2023, 10:40 am

#### Redelivery Scheduled for Next Business Day

MIDLAND, TX 79701  
July 3, 2023, 2:28 pm

#### In Transit to Next Facility

July 2, 2023

#### Departed USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER  
July 1, 2023, 10:28 pm

#### Arrived at USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER  
July 1, 2023, 7:54 pm

#### Departed USPS Facility

ALBUQUERQUE, NM 87101  
June 30, 2023, 4:00 am

**Arrived at USPS Facility**

ALBUQUERQUE, NM 87101  
June 29, 2023, 10:44 pm

**Hide Tracking History**

---

**Text & Email Updates**



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**USPS Tracking Plus®**



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**Product Information**



**See Less** ^

Track Another Package

Enter tracking or barcode numbers

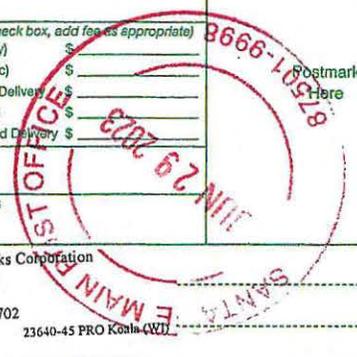
## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

9589 0710 5270 0104 1987 23

<b>U.S. Postal Service™</b>	
<b>CERTIFIED MAIL® RECEIPT</b>	
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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
<b>OFFICIAL USE</b>	
Certified Mail Fee	\$
Extra Services & Fees (check box, add fees as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<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	\$
<b>Total Postage and Fees</b>	\$
Sent To	
Rutter & Wilbanks Corporation	
Attn: Bill Rutter	
PO Box 3186	
Midland, TX 79702	
23640-45 PRO K... (WD)	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 9589071052700104198723

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

#### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

Delivered

Out for Delivery

Preparing for Delivery

### Moving Through Network

**In Transit to Next Facility**

July 7, 2023

**Departed USPS Regional Facility**

MIDLAND TX DISTRIBUTION CENTER

July 3, 2023, 1:51 am

**Arrived at USPS Regional Facility**

MIDLAND TX DISTRIBUTION CENTER

July 1, 2023, 7:54 pm

**Departed USPS Facility**

ALBUQUERQUE, NM 87101

June 30, 2023, 4:00 am

● **Arrived at USPS Facility**  
ALBUQUERQUE, NM 87101  
June 29, 2023, 10:44 pm

● **Hide Tracking History**

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**Text & Email Updates**



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**USPS Tracking Plus®**



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**Product Information**



**See Less** ^

Track Another Package

Enter tracking or barcode numbers

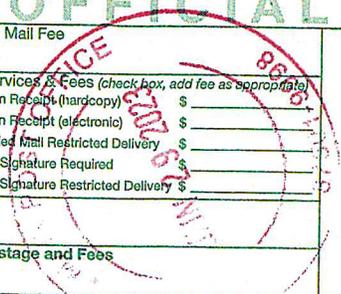
## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

7022 1670 0002 1189 6806

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL® RECEIPT</b> Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
<b>OFFICIAL USE</b>	
Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<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 \$ _____	
Total Postage and Fees \$ _____	
Sent To	
Street and Ap. Anthracite Energy Partners, LLC	
3921 Tanforan Ave	
Midland, TX 79707-1427	
City, State, Zi. 23640-45 PRO Koala (ORRI)	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



# USPS Tracking<sup>®</sup>

FAQs >

Tracking Number:

Remove X

## 70221670000211896806

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

#### Get More Out of USPS Tracking:

**USPS Tracking Plus<sup>®</sup>**

Delivered

Out for Delivery

Preparing for Delivery

#### Moving Through Network

**In Transit to Next Facility**

July 6, 2023

#### Departed USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER

July 2, 2023, 1:33 am

#### Arrived at USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER

July 1, 2023, 7:54 pm

#### Departed USPS Facility

ALBUQUERQUE, NM 87101

June 30, 2023, 4:00 am

Feedback

● **Arrived at USPS Facility**  
ALBUQUERQUE, NM 87101  
June 29, 2023, 10:45 pm

● **Hide Tracking History**

---

**Text & Email Updates**



---

**USPS Tracking Plus®**



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**Product Information**



**See Less** ^

Track Another Package

Enter tracking or barcode numbers

## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

7022 1670 0002 1189 6813

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**OFFICIAL USE**

Certified Mail Fee		Postmark Here
\$		
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<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		
\$		
Total Postage and Fees		
\$		

Sent To	
Street and Ap	Robert P. Behme 1809 Woodlawn Dr Washington, IN, 47501
City, State, Zi.	23640-45 PRO Koala (ORR)

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

# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211896813

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your item was picked up at the post office at 1:22 pm on July 10, 2023 in WASHINGTON, IN 47501.

### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

#### Delivered

**Delivered, Individual Picked Up at Post Office**

WASHINGTON, IN 47501

July 10, 2023, 1:22 pm

#### In Transit to Next Facility

July 7, 2023

#### Departed USPS Regional Facility

EVANSVILLE IN DISTRIBUTION CENTER ANNEX

July 3, 2023, 6:06 pm

#### Arrived at USPS Regional Facility

EVANSVILLE IN DISTRIBUTION CENTER ANNEX

July 3, 2023, 1:57 pm

#### Departed USPS Facility

ALBUQUERQUE, NM 87101

June 30, 2023, 4:00 am

#### Arrived at USPS Facility

ALBUQUERQUE, NM 87101

June 29, 2023, 10:44 pm

● Hide Tracking History

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**Text & Email Updates**



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**USPS Tracking Plus®**



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**Product Information**



**See Less** ^

Track Another Package

Enter tracking or barcode numbers

## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

7022 1670 0002 1189 6714

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<b>OFFICIAL USE</b>	
Certified Mail Fee \$ _____	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<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 \$ _____	
<b>Total Postage and Fees</b> \$ _____	
Sent To Street Colburn Oil, LP 2612 Hughes St Midland, TX 79705-6174 City, State, ZIP+4® 21640-45 PRO Koala (ORR1)	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211896714

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

#### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Delivered

Out for Delivery

Preparing for Delivery

#### Moving Through Network

**In Transit to Next Facility**

July 6, 2023

**Departed USPS Regional Facility**

MIDLAND TX DISTRIBUTION CENTER

July 2, 2023, 1:32 am

**Arrived at USPS Regional Facility**

MIDLAND TX DISTRIBUTION CENTER

July 1, 2023, 9:33 pm

**Departed USPS Facility**

ALBUQUERQUE, NM 87101

June 30, 2023, 4:00 am

Feedback

● **Arrived at USPS Facility**  
ALBUQUERQUE, NM 87101  
June 29, 2023, 10:44 pm

● **Hide Tracking History**

---

**Text & Email Updates**



---

**USPS Tracking Plus®**



---

**Product Information**



**See Less** ^

Track Another Package

Enter tracking or barcode numbers

## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

7022 1670 002 1189 4918

**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	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<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	\$

Postmark  
Here

Postage	\$
Total Postage and Fees	\$

Sent To	
Street and Ap.	Estate of Katherine E. Carlisle 431 Carlisle RD Sarah, MS, 38665
City, State, Zip	23640-45 PRO Koala (ORRI)

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

# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211894918

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your item was returned to the sender on July 6, 2023 at 7:49 am in SARAH, MS 38665 because the addressee was not known at the delivery address noted on the package.

### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

#### Alert

##### Addressee Unknown

SARAH, MS 38665  
July 6, 2023, 7:49 am

##### Available for Pickup

SARAH, MS 38665  
July 6, 2023, 7:49 am

##### Addressee Unknown

SARAH, MS 38665  
July 5, 2023, 12:03 pm

##### Departed USPS Regional Facility

MEMPHIS TN DISTRIBUTION CENTER  
July 4, 2023, 9:41 pm

##### In Transit to Next Facility

July 3, 2023

##### Arrived at USPS Regional Facility

MEMPHIS TN DISTRIBUTION CENTER  
July 1, 2023, 12:42 pm

**Departed USPS Facility**

ALBUQUERQUE, NM 87101  
June 30, 2023, 4:00 am

**Arrived at USPS Facility**

ALBUQUERQUE, NM 87101  
June 29, 2023, 10:44 pm

**Hide Tracking History**

---

**Text & Email Updates**



---

**USPS Tracking Plus®**



---

**Product Information**



**See Less**

Track Another Package

Enter tracking or barcode numbers

## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

7022 1670 0002 1189 6653

**U.S. Postal Service™**  
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**OFFICIAL USE**

Certified Mail Fee

\$

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

- Return Receipt (hardcopy) \$
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postmark  
Here

Postage

\$

Total Postage and Fees

\$

Sent To

Street and

Elise A. Lambuth  
147 Harber St  
Ridgeland, MS 39157

City, State,

23640-45 PRO Koala (ORRI)

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211896653

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your item was delivered to an individual at the address at 11:45 am on July 6, 2023 in RIDGELAND, MS 39157.

### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

#### Delivered

**Delivered, Left with Individual**

RIDGELAND, MS 39157  
July 6, 2023, 11:45 am

#### Redelivery Scheduled

RIDGELAND, MS 39157  
July 5, 2023

#### Notice Left (No Authorized Recipient Available)

RIDGELAND, MS 39157  
July 3, 2023, 12:56 pm

#### In Transit to Next Facility

July 2, 2023

#### Arrived at USPS Regional Facility

JACKSON MS DISTRIBUTION CENTER  
July 1, 2023, 8:19 pm

#### Departed USPS Facility

ALBUQUERQUE, NM 87101  
June 30, 2023, 4:00 am

**Arrived at USPS Facility**

ALBUQUERQUE, NM 87101  
June 29, 2023, 10:44 pm

**Hide Tracking History**

---

**Text & Email Updates**



---

**USPS Tracking Plus®**



---

**Product Information**



**See Less**

Track Another Package

Enter tracking or barcode numbers

## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

7022 1670 0002 1189 4833

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL® RECEIPT</b> <i>Domestic Mail Only</i>	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®	
<b>OFFICIAL USE</b>	
Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	
<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 \$	
Total Postage and Fees \$	
Sent To	Prescott A. Sherman Grandchildren's Trust
Street and Apt. 1	f/b/o Cristina Elizabeth Shelton 315 N Orchard LN
City, State, ZIP+4	Covington, LA, 70433 23640-45 PRO Koala (ORR1)
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211894833

Copy

Schedule a Redelivery (<https://tools.usps.com/redelivery.htm>)

### Latest Update

This is a reminder to arrange for redelivery of your item before July 17, 2023 or your item will be returned on July 18, 2023. You may arrange redelivery by using the Schedule a Redelivery feature on this page or may pick up the item at the Post Office indicated on the notice.

#### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

#### Delivery Attempt: Action Needed

**Reminder to Schedule Redelivery of your item before July 17, 2023**

July 8, 2023

#### Notice Left (Receptacle Full/Item Oversized)

COVINGTON, LA 70433  
July 3, 2023, 11:39 am

#### Departed USPS Regional Facility

NEW ORLEANS LA DISTRIBUTION CENTER  
July 2, 2023, 11:46 pm

#### Arrived at USPS Regional Facility

NEW ORLEANS LA DISTRIBUTION CENTER  
July 2, 2023, 1:40 pm

#### Departed USPS Regional Facility

SHREVEPORT LA DISTRIBUTION CENTER  
July 1, 2023, 6:13 pm

#### Arrived at USPS Regional Facility

SHREVEPORT LA DISTRIBUTION CENTER  
July 1, 2023, 5:14 pm

**Departed USPS Facility**

ALBUQUERQUE, NM 87101  
June 30, 2023, 4:00 am

**Arrived at USPS Facility**

ALBUQUERQUE, NM 87101  
June 29, 2023, 10:44 pm

**Hide Tracking History**

**Text & Email Updates**



**Schedule Redelivery**



**USPS Tracking Plus®**



**Product Information**



**See Less**

Track Another Package

Enter tracking or barcode numbers

## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

7022 1670 0002 1189 4840

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**OFFICIAL USE**

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<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	\$
Total Postage and Fees	\$

Postmark  
Here

Sent To	
Street and	Fred A. Sullivan 418 R St
City, State	Bedford, IN, 47421 23640-45 PRO Koala (ORRI)

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

# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211894840

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your item departed our USPS facility in INDIANAPOLIS IN DISTRIBUTION CENTER on July 12, 2023 at 11:13 am. The item is currently in transit to the destination.

#### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

### Moving Through Network

#### Departed USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER  
July 12, 2023, 11:13 am

#### Reminder to Schedule Redelivery of your item

July 8, 2023

#### Notice Left (No Authorized Recipient Available)

BEDFORD, IN 47421  
July 3, 2023, 5:08 pm

#### In Transit to Next Facility

July 2, 2023

#### Arrived at USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER  
July 2, 2023, 11:48 am

#### Departed USPS Facility

ALBUQUERQUE, NM 87101

June 30, 2023, 4:00 am

**Arrived at USPS Facility**

ALBUQUERQUE, NM 87101

June 29, 2023, 10:44 pm

**Hide Tracking History**

**Text & Email Updates**



**USPS Tracking Plus®**



**Product Information**



**See Less** ^

Track Another Package

Enter tracking or barcode numbers

## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

7022 1670 0002 1169 4888

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**OFFICIAL USE**

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<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	\$
Total Postage and Fees	\$

Postmark  
Here

Sent To	
Street and Apt. #	Russell C. Williams 912 Brett Cabel Rd Washington, IN, 47501
City, State, ZIP+4	23640-45 PRO Koala (ORR1)

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

# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211894888

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your item was returned to the sender on July 11, 2023 at 4:20 pm in WASHINGTON, IN 47501 because it could not be delivered as addressed.

### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

#### Alert

##### Return to Sender

WASHINGTON, IN 47501  
July 11, 2023, 4:20 pm

##### Return to Sender

WASHINGTON, IN 47501  
July 11, 2023, 7:57 am

##### Notice Left (No Authorized Recipient Available)

WASHINGTON, IN 47501  
July 8, 2023, 2:46 pm

##### Out for Delivery

WASHINGTON, IN 47501  
July 8, 2023, 7:38 am

##### Arrived at Post Office

WASHINGTON, IN 47501  
July 8, 2023, 7:27 am

##### Departed USPS Regional Facility

EVANSVILLE IN DISTRIBUTION CENTER ANNEX  
July 7, 2023, 4:47 pm

**In Transit to Next Facility**  
July 6, 2023

**Arrived at USPS Regional Facility**  
EVANSVILLE IN DISTRIBUTION CENTER ANNEX  
July 5, 2023, 12:30 pm

**Departed USPS Regional Facility**  
COPPELL TX DISTRIBUTION CENTER  
July 4, 2023, 12:38 am

**Arrived at USPS Regional Facility**  
COPPELL TX DISTRIBUTION CENTER  
July 2, 2023, 2:08 pm

**Departed USPS Regional Facility**  
FORT WORTH TX DISTRIBUTION CENTER  
July 1, 2023, 9:30 pm

**Arrived at USPS Regional Facility**  
FORT WORTH TX DISTRIBUTION CENTER  
July 1, 2023, 3:43 pm

**Hide Tracking History**

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**Text & Email Updates**



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**USPS Tracking Plus®**



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**Product Information**



**See Less** ^

Track Another Package

Enter tracking or barcode numbers

7022 1670 0002 1189 4789

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**OFFICIAL USE**

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<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	\$
Total Postage and Fees	\$

Postmark  
Here



Sent To	Burton-Flat Investors, Ltd.
Street and Apt. #	PO Box 1799
	Midland, TX 79702
City, State, ZIP+4	23640-45 - PRO Koala (RTO)

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

# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211894789

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your item departed our USPS facility in OKLAHOMA CITY OK DISTRIBUTION CENTER on July 12, 2023 at 7:54 am. The item is currently in transit to the destination.

#### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

### Moving Through Network

#### Departed USPS Regional Facility

OKLAHOMA CITY OK DISTRIBUTION CENTER  
July 12, 2023, 7:54 am

#### Arrived at USPS Regional Facility

OKLAHOMA CITY OK DISTRIBUTION CENTER  
July 11, 2023, 8:52 am

#### Addressee Unknown

MIDLAND, TX 79701  
July 5, 2023, 11:06 am

#### Available for Pickup

MIDLAND, TX 79702  
July 3, 2023, 11:04 am

#### Arrived at Post Office

MIDLAND, TX 79701  
July 3, 2023, 10:55 am

#### Departed USPS Regional Facility

MIDLAND TX DISTRIBUTION CENTER  
July 3, 2023, 1:48 am

**Arrived at USPS Regional Facility**

MIDLAND TX DISTRIBUTION CENTER  
July 2, 2023, 8:00 pm

**In Transit to Next Facility**

July 2, 2023

**Departed USPS Facility**

ALBUQUERQUE, NM 87101  
June 30, 2023, 11:10 pm

**Arrived at USPS Facility**

ALBUQUERQUE, NM 87101  
June 30, 2023, 10:49 pm

**Hide Tracking History**

---

**Text & Email Updates**



---

**USPS Tracking Plus®**



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**Product Information**



**See Less**

Track Another Package

Enter tracking or barcode numbers

## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

7022 1670 0002 1189 4802

# U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

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Certified Mail Fee

\$

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

- Return Receipt (hardcopy) \$
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postmark  
Here

Postage

\$

Total Postage and Fees

\$

Sent To

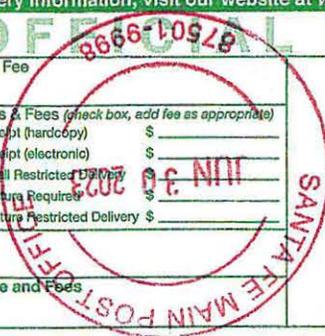
Street or P.O. Box: NRM 84-D Income, Ltd.  
c/o Natural Resource Management Corporation  
2121 San Jacinto Street

City, State, and ZIP+4®: Dallas, TX 75264

75640-45 - PRO Kvals (RTT)

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211894802

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

#### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

Delivered

Out for Delivery

Preparing for Delivery

### Moving Through Network

**In Transit to Next Facility**

July 7, 2023

**Departed USPS Regional Facility**

DALLAS TX DISTRIBUTION CENTER

July 3, 2023, 8:51 pm

**Arrived at USPS Regional Facility**

DALLAS TX DISTRIBUTION CENTER

July 2, 2023, 2:27 pm

**Departed USPS Facility**

ALBUQUERQUE, NM 87101

June 30, 2023, 11:10 pm

● **Arrived at USPS Facility**  
ALBUQUERQUE, NM 87101  
June 30, 2023, 10:49 pm

● **Hide Tracking History**

---

**Text & Email Updates**



---

**USPS Tracking Plus®**



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**Product Information**



**See Less** ^

Track Another Package

Enter tracking or barcode numbers

## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

022 1670 0002 1189 6820  
6820 1189 0002 0221

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<b>OFFICIAL USE</b>	
Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<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 \$	
Total Postage and Fees \$	
Sent To	
Street and	NRM Operating Company, LP c/o Natural Resource Management Corporation 2121 San Jacinto Street
City, State,	Dallas, TX 75204
	21640-45 - PRO Keala (RTM)
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



# USPS Tracking®

FAQs >

Tracking Number:

Remove X

## 70221670000211896820

Copy

Add to Informed Delivery (<https://informedelivery.usps.com/>)

### Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

#### Get More Out of USPS Tracking:

**USPS Tracking Plus®**

Feedback

Delivered

Out for Delivery

Preparing for Delivery

### Moving Through Network

**In Transit to Next Facility**

July 7, 2023

**Departed USPS Regional Facility**

DALLAS TX DISTRIBUTION CENTER

July 3, 2023, 8:51 pm

**Arrived at USPS Regional Facility**

DALLAS TX DISTRIBUTION CENTER

July 2, 2023, 2:27 pm

**Departed USPS Facility**

ALBUQUERQUE, NM 87101

June 30, 2023, 11:10 pm

● **Arrived at USPS Facility**  
ALBUQUERQUE, NM 87101  
June 30, 2023, 10:49 pm

● **Hide Tracking History**

---

**Text & Email Updates**



---

**USPS Tracking Plus®**



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**Product Information**



**See Less** ^

Track Another Package

Enter tracking or barcode numbers

## Need More Help?

Contact USPS Tracking support for further assistance.

**FAQs**

# Carlsbad Current Argus.

PART OF THE USA TODAY NETWORK

## Affidavit of Publication

Ad # 0005758035

This is not an invoice

**HINKLE SHANOR, LLP**  
POBOX 2068

**SANTA FE, NM 87504**

I, a legal clerk of the **Carlsbad Current Argus**, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal notices and advertisements may be published; that the printed notice attached hereto was published in the regular and entire edition of said newspaper and not in supplement thereof in editions dated as follows:

07/06/2023

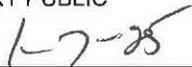


Legal Clerk

Subscribed and sworn before me this July 6, 2023:



State of WI, County of Brown  
NOTARY PUBLIC



My commission expires

KATHLEEN ALLEN  
Notary Public  
State of Wisconsin

Ad # 0005758035  
PO #: 23643  
# of Affidavits 1

This is not an invoice

**Colgate Operating, LLC**  
**Case No. 23643**  
**Exhibit C-4**

This is to notify all interested parties, including James H. Barnett; Bonefish, LLC; Lepakast Properties, LP; McVay Drilling Inc.; Daniel Energy, Inc.; Pocahantas Oil Co., Inc.; Rutter & Wilbanks Corporation; Shauna Seltzer Redwine Trust u/w/o Helen Joy Seltzer; Charles W. Seltzer Trust u/w/o Helen Joy Seltzer; Davoil Inc.; Devon Energy Production Company, LP; Energen Resources Corporation; Great Western Drilling Ltd.; Elizabeth S. Shelton Living Trust; Prescott A. Sherman Grandchildren's Trust f/b/o Cristina Elizabeth Shelton; Prescott A. Sherman Grandchildren's Trust f/b/o Amy Shelton Murrell; Katherine A. Swaney; Chi Energy, Inc.; Elise A. Lambuth; James L. Alford, Jr.; Estate of Katherine E. Carlisle; Eloise R. Carlisle, Estate; Anna E. Alford; Louis Alford, III; Frances K. Alford; Adam C. Swaney; Ann E. Lambuth; James B. Lambuth; John Warner Alford; John A. Lambuth; Emily A. Carlisle; Gene H. Davis; Chi Energy, Inc. f/b/o Chi Royalty Pool; The Wright NM Partners, LP; V. W. Adams and wife, Joan Adams; Estate of Benjamin I. Cooksey; Estate of Suzanne Mitchell; Russell C. Williams; Robert J. Behme; Fred A. Sullivan; Colburn Oil, LP; Anthracite Energy Partners, LLC; Tailwag Resources, LLC; Burton Flat Investors, Ltd.; John R. Seay; NRM 84-D Income, Ltd. c/o Natural Resource Management Corporation; Frey N. Rad d/b/a Dexter Resources Co.; NRM Operating Company, LP c/o Natural Resource Management Corporation; Oxy USA Inc. c/o New Mexico Land Negotiator; and their successors and assigns, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Colgate Operating, LLC (Case No. 23643). The hearing will be conducted remotely on July 20, 2023, beginning at 8:15 a.m. To participate in the electronic hearing, see the instructions posted on the OCD Hearings website for that date: <https://www.emnr.d.nm.gov/ocd/hearing-info/>. Applicant applies for an order pooling all uncommitted interests in the Bone Spring formation underlying a 320-acre, more or less, standard horizontal spacing unit comprised of the S/2 S/2 of Sections 9 and 10, Township 20 South, Range 28 East, Eddy County, New Mexico ("Unit"). The Unit will be dedicated to the Koala 9 Fed Com 114H, Koala 9 Fed Com 124H, and Koala 9 Fed Com 134H wells ("Wells"), which will be drilled from surface hole locations in the SE/4 SE/4 (Unit P) of Section 8 to bottom hole locations in the SE/4 SE/4 (Unit P) of Section 10. The completed intervals of the Wells will be orthodox. Also to be considered will be the cost of drilling

and completing the wells and the allocation of the costs, the designation of Permian Resources Operating, LLC (OGRID No. 372165) as the operator of the Wells, and a 200% charge for the risk involved in drilling and completing the Wells. The Wells are located approximately 12 miles northeast of Carlsbad, New Mexico.  
#5758035, Current Argus,  
July 6, 2023