

8/20/2014 DATE IN	SUSPENSE	MAH ENGINEER	8/20/2014 LOGGED IN	PLC TYPE	PMAH142325556 APP NO.
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ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION

- Engineering Bureau -

1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Application Acronyms:

[NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]
 [DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
 [PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
 [WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
 [SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
 [EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

- [1] **TYPE OF APPLICATION** - Check Those Which Apply for [A]
- [A] Location - Spacing Unit - Simultaneous Dedication
☐ NSL ☐ NSP ☐ SD
- Check One Only for [B] or [C]
- [B] Commingling - Storage - Measurement
☐ DHC ☐ CTB ☒ PLC ☐ PC ☐ OLS ☐ OLM
- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
☐ WFX ☐ PMX ☐ SWD ☐ IPI ☐ EOR ☐ PPR
- [D] Other: Specify _____
- [2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or Does Not Apply
- [A] ☐ Working, Royalty or Overriding Royalty Interest Owners
- [B] ☐ Offset Operators, Leaseholders or Surface Owner
- [C] ☐ Application is One Which Requires Published Legal Notice
- [D] ☐ Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
- [E] ☐ For all of the above, Proof of Notification or Publication is Attached, and/or,
- [F] ☐ Waivers are Attached

- PLC 406
 - EN CAN - OIL & GAS
 282327
 well
 - Attachment A
 - Lybrook E33-2307
 D34-
 #114
 30-043-21195
 Pool
 - Basin Angeles
 97232
 - Alamo - Gallup
 Pool
 1035

Attachment 4 presents copies of notification to interest owners via Certified/Return Receipt.

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

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

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

Jessica Gregg
 Print or Type Name

Jessica Gregg
 Signature

Regulatory Analyst
 Title

August 8, 2014
 Date

Jessica.Gregg@encana.com
 e-mail Address

RECEIVED OGD

encana

Transmitted Via Certified Mail

28 AUG 2014 9:14

August 13, 2014

Ms. Jami Bailey
New Mexico Oil Conservation Division
1220 South St. Francis Drive
Santa Fe, NM 87505

Mr. Dave Evans, District Manager
Bureau of Land Management
6251 College Blvd., Suite A
Farmington, NM 87402

Mr. Pete Martinez
Oil, Gas & Minerals Division
New Mexico State Land Office
PO Box 1148
Santa Fe, NM 87504

**Re: Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
Off-Lease Measurement and/or Sale and Transportation
San Juan and Sandoval Counties, New Mexico**

Dear Ms. Bailey, Mr. Evans and Mr. Martinez:

Encana Oil & Gas (USA) Inc. (Encana) requests Administrative Approval for a new gathering system, known as the Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System (CTGS), which will be installed, maintained and operated by Encana. This will require surface commingling, Off-Lease Measurement and Sale of natural produced gas and in some instances Off-Lease Measurement, Sale and Transportation of oil and condensate. There will not be any commingling of oil or condensate in the pipeline. Initially, Encana requests that forty-eight (48) wells be authorized for connection to the CTGS, which are listed on Attachment No.1, all of which will be operated by Encana. The CTGS will tie-in into Enterprise Products Partners (Enterprise) pipeline in Section 25, Township 23 North, Range 7 West, which will be the point of custody transfer and sales, herein referred to as the Central Delivery Point (CDP). Please note that it is Encana's intention that the CTGS will only service natural gas producing from the Mancos formation and furthermore, will only service Encana operated wells.

As you are most likely aware, in order to optimally develop horizontal wells, Encana has proceeded with permitting various well pads in the section adjacent to the Project Area (PA) and/or developed acreage. Therefore, in some instances, the well pad surface hole location (SHL) is located off-lease. In these instances, Off-Lease Measurement of natural gas will occur at the well head by a well allocation meter and again at the pipeline tie-in to CTGS CDP. Further, Encana intends to install a gas lift compressor on each well as depicted and described in Attachment No 5. Please note, Encana intends to submit to the Bureau of Land Management (BLM) a sundry to formally request approval to install gas lifts on these wells, which, once approved, will be forwarded on to the New Mexico Oil Conservation Division (NMOCD) for their approval. Again, there will not be any commingling of oil or condensate with naturally produced gas in the pipeline.

If applicable, Off-Lease Measurement, Transportation and Sale of produced oil and condensate will occur at the surface location for the affected well where Encana will install the necessary number of 400-barrel oil storage tanks and water tanks. Generally, produced water will be measured using tank gauges and produced oil will be measured using a strapping table measurement by the associated vendors. Run tickets will be filled out onsite for each load of oil, which will show the tank gauge readings, oil gravity, temperature and BS&W content. Each valve on the tanks will have seals. Records will be kept that will show when seals are installed and removed. The tank seal information is also recorded on the run tickets, which will accompany the transportation of the oil.

Enclosed please find the following:

Encana Oil & Gas (USA) Inc., acting by and through its authorized agent,
Encana Services Company Ltd.

370 17th Street, Suite 1700, Denver Colorado 80202 720.876.3926 (O) 720.838.5458 (C) jessica.gregg@encana.com



Enclosed please find the following:

A. Administrative Application Checklist for Pool/Lease Commingling dated August 8, 2014.

B. State of New Mexico Oil Conservation Division Form C-107-B, Application for Pool/Lease Commingling dated August 8, 2014. Attached to and made part of the Application for Pool/Lease Commingling please find the following:

Attachment No. 1: Presents the following information:

- | | |
|--|--|
| 1) Wells | 5) Projected gas rate for leases |
| 2) Leases | 6) Projected gas percentage in the CTGS for the wells |
| 3) Pool information | 7) Projected initial gas heating value through ~1 st 6 months |
| 4) Projected gas rate for individual wells | 8) Projected gas heating value after ~1 st 6 months |

A projected decline rate for each well is also addressed in Attachment No. 1 in the Explanation Legend.

Attachment No. 2a (2 Pages): Presents a map of the CTGS pipeline, depicting twenty-one (21) well pads (which represent all 48 wells) that will tie into the CTGS which will then tie into CTGS's CDP in Section 25, Township 23 North, Range 7 West. The CTGS pipeline is approximately 61,055.46-feet in length (11.6 miles), stretching across Bureau of Land Management (BLM) and State surface. Encana applied for the Chaco Trunk #1 (BLM serial number 130202) and Chaco Trunk #2 Phase 1 (BLM serial number 130918) Right-of-Ways with the BLM and State Land Office and is awaiting final approval from the State Land Office.

Each well will be equipped with a continuous recording gas allocation meter (or some form of approved alternative measurement) operated and maintained by Encana. Prior to converting any gas measurement from a conventional allocation meter to an alternative measurement method, Encana will seek formal approvals. The allocation procedures, including examples of how the allocation method would be applied for each well are presented on **Attachment No. 5**.

Moreover, Condensate and oil will be separated, stored and sold at the well head SHL, which in some instances, may be off-lease. Depending on their availability Encana will enlist the services of High Tech Tools, LLC (mailing address: PO Box 1244 Aztec, NM 87410; phone number: 505-334-2266) or Three Rivers Trucking, Inc. (mailing address: PO Box 2728, Farmington, NM 87499; phone number: 505-632-5300) to transport produced water to Basin Disposal Inc. (address: 300 Legion Road, Aztec, NM 87410; phone number: 505-334-3013). Produced water will be generally measured using tank gauges.

Encana will enlist Western Refining, to transport and purchase crude oil from the off-lease SHL to the Gallup Refinery (location: I-40, Exit 39, Jamestown, NM 87347; Route 3, Box 7, Gallup, NM 87301; phone number: 505-722-3833). Western Refining will provide a strapping table measurement for each oil tank at the facility which will be used to determine the exact volume in each tank. Run tickets will be filled out for each load of oil, onsite, which will show the tank gauge readings, oil gravity, temperature and BS&W content. Each valve on the tanks will have seals. Records will be kept and logged into an internal database that will show when seals are installed and removed. The tank seal information is also recorded on the tickets, which will accompany the transportation of the oil.

Attachment No. 2b (50 Pages): Presents the well dedication acreage for the forty-eight (48) wells Encana is proposing to tie into the CTGS as depicted on the NMOCD Form C-102s. Additionally, the C-102s depict the horizontal well bore path and producing interval for each of the forty-eight (48) wells.

Attachment No. 2c Justification (2 Pages): Presents a plat depicting contemplated individual well pad pipeline connection paths for all forty-eight (48) well pads connecting to the CTGS. In line with the BLM's Instructional Memorandum dated July 3, 2013, Attachment No. 2c contemplates, as an alternative, individual well pad connections versus one (1) gathering system, namely the Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System (CTGS). Also included, is a breakdown of pipeline length and pig launcher and receiver disturbance for each of the twenty-one (21) well pads and projected costs for such an undertaking. According to

Encana Oil & Gas (USA) Inc., acting by and through its authorized agent,

Encana Services Company Ltd.

370 17th Street, Suite 1700, Denver Colorado 80202 720.876.3926 (O) 720.838.5458 (C) jessica.gregg@encana.com



our calculations individual well pad pipeline connections for the twenty-one (21) well pads would total approximately 136 miles in length; and, including a 40-foot width for the pipeline right-of-way the acreage disturbance would be approximately 659 acres. Additionally, Encana estimates that a pig launcher and receiver would be required for the twenty-one (21) individual well pad pipeline connections into CTGS's pipeline which would also cause more surface disturbance. Encana estimates that pig launchers and receivers could potentially be 10-feet by 20-feet for each of the twenty-one (21) individual well pad pipeline connections. Encana estimates that such an undertaking would cost approximately \$30,750,750. Again, the breakdown included in Attachment No. 2c will provide more detail as to how Encana arrived at these conclusions. Currently, Encana's estimated costs for the CTGS is \$5,100,000.

Furthermore, all production proposed for commingling derives from the same geologic formation with similar projected gas rates and gas heating values as well as projected decline rates, which are addressed in Attachment No. 1.

In line with Encana's commitment to conduct business ethically, legally, and in a manner that is fiscally, environmentally and socially responsible, it is Encana's position that one (1) gathering system greatly reduces surface disturbance and thus environmental impact; and, is more economically feasible, allowing for potential capital to be dedicated towards future development projects in the San Juan Basin.

Attachment No. 2d (1 Page): Presents a depiction of the Enterprise CDP interconnection, which will reside in Section 25, Township 23 North, Range 7 West.

Attachment No. 3 (8 Pages): Presents a leasehold ownership summary for all forty-eight (48) wells. The royalty interest is Federal, State, and Indian Allottee. The interest ownership reflected for each well is to the best of our knowledge at this time. In the event it is determined that interest ownership differs, an updated Attachment No. 3 will be sent to affected owners, the BLM, NMSLO, NMOCD, and the FIMO. Encana is requesting that the NMOCD issued order for the CTGS include a provision that for future additions to the CTGS, only interest owners in the wells being added be notified.

Attachment No. 4 (118 Pages): Presents a copy of the notice sent to the interest owners for the wells. All notice letters have been mailed certified, return receipt. Upon receiving the return receipts, copies will be forwarded to the NMOCD. Also included, is a copy of the legal notice published in The Daily Times, Farmington, New Mexico on August 10, 2014 in order to provide public notice to any and all affected interest owners.

Attachment No. 5 (5 Pages): Presents the allocation procedures for the CTGS which includes an example of how the allocation method is applied. Encana proposes that the Point of Royalty Measurement (PRM) be at CTGS's CDP in Section 25, Township 23 North, Range 7 West. Please also note each well proposed for connection to the CTGS will be equipped with a continuous recording gas allocation meter.

Attachment No. 6 (22 Pages): Presents gas lift well pad schematics and descriptions for the twenty-one (21) well pads that Encana is requesting to add to the CTGS. Encana requests approval to claim beneficial use at the gas lift injection meter on the well pads, which is depicted for each well pad on the gas lift schematics. The gas lift schematics also depict a list of proposed equipment. Encana requests the use of fuel to operate the gas lifts installed for each well.

In conclusion, Encana is requesting approval to forty-eight (48) wells to the Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System (CTGS). Where applicable, Encana requests Administrative Approval for Off-Lease Measurement and Sale of natural produced gas and Administrative Approval for Off-Lease Measurement, Sale and Transportation of produced crude oil and condensate. Further, Encana requests that the NMOCD order issued CTGS also include a provision that for any future additions to the CTGS, only the interest owners in the wells being added need to be notified.



Please feel free to contact me directly at 720-876-3926 with any questions or concerns.

Encana Oil & Gas (USA) Inc.

A handwritten signature in cursive script, appearing to read "Jessica Gregg".

Jessica Gregg
Regulatory Analyst

ENCANA OIL & GAS (USA) INC.,
acting by and through its authorized agent,
Encana Services Company Ltd.

cc: United States of America, Federal Indian Minerals Office, 6251 College Blvd., Suite A, Farmington, NM 87402

Encana Oil & Gas (USA) Inc., acting by and through its authorized agent,
Encana Services Company Ltd.

370 17th Street, Suite 1700, Denver Colorado 80202 720.876.3926 (O) 720.838.5458 (C) jessica.gregg@encana.com

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-107-B
Revised August 1, 2011

OIL CONSERVATION DIVISION

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

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

APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)

OPERATOR NAME: Encana Oil and Gas (USA)

OPERATOR ADDRESS: 370 17th Street, Suite 1700, Denver, Colorado 80202

APPLICATION TYPE:

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

LEASE TYPE: ☐ Fee ☒ State ☒ Federal ☐ Allottee

Is this an Amendment to existing Order? ☐ Yes ☒ No If "Yes", please include the appropriate Order No. _____

Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling
Yes ☐ No

(A) POOL COMMINGLING

Please attach sheets with the following information

(1) Pool Names and Codes	Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production	Calculated Value of Commingled Production	Volumes
Basin Mancos Gas Pool (97232)	41°API/1350 BTU	Only gas to be commingled 1350 BTU	Only gas to commingled Value = +/- 3.330 mmbtu	5-500 mcf/d
Alamito-Gallup Pool (1039)				

(2) Are any wells producing at top allowables? ☐ Yes ☒ No

(3) Has all interest owners been notified by certified mail of the proposed commingling? ☒ Yes ☐ No.

(4) Measurement type: ☒ Metering ☐ Other (Specify)

(5) Will commingling decrease the value of production? ☐ Yes ☒ No If "yes", describe why commingling should be approved

(B) LEASE COMMINGLING

Please attach sheets with the following information

(1) Pool Name and Code.

(2) Is all production from same source of supply? ☐ Yes ☐ No

(3) Has all interest owners been notified by certified mail of the proposed commingling? ☐ Yes ☐ No

(4) Measurement type: ☐ Metering ☐ Other (Specify)

(C) POOL and LEASE COMMINGLING

Please attach sheets with the following information

(1) Complete Sections A and E.

(D) OFF-LEASE STORAGE and MEASUREMENT

Please attached sheets with the following information

(1) Is all production from same source of supply? ☒ Yes ☐ No

(2) Include proof of notice to all interest owners. See Attachment No. 4

(E) ADDITIONAL INFORMATION (for all application types)

Please attach sheets with the following information

(1) A schematic diagram of facility, including legal location. See Attachment No. 2

(2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved. Attachment No. 2

(3) Lease Names, Lease and Well Numbers, and API Numbers. See Attachment No. 2

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

SIGNATURE: Jessica Gregg TITLE: Regulatory Analyst
TYPE OR PRINT NAME Jessica Gregg TELEPHONE NO.: 720-838-5458
E-MAIL ADDRESS: jessica.gregg@encana.com

DATE: August 8, 2014

Attachment No. 2a
Encana Oil Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Initial Application for Chaco Trunk #1 & Chaco Trunk #2 Phase 1 Gathering System Dated August 8, 2014			
Well Pad	Well	Well No.	Lease(s)
Lybrook D12-2208	Lybrook D12-2208 01H	1a	NM-48989A
Lybrook E12-2208	Lybrook E12-2208 01H	1b	NM-48989A
Lybrook D34-2307	Lybrook D34-2307 01H	2	NM-16586
	Lybrook D34-2307 02H	3	NM-16586
Lybrook E20-2307	Lybrook E20-2307 01H	4a	NM-81638
	Lybrook E20-2307 02H	4b	NM-81638
Lybrook E33-2307	Lybrook E33-2307 01H	5	NM-6682
	Lybrook E33-2307 02H	6	NM-6682
Lybrook E11-2208	Lybrook E11-2208 01H	7a	NM-48989A / NM-48989
	Lybrook E11-2208 02H	7b	NM-48989A / NM-48989
Lybrook E15-2208	Lybrook E15-2208 01H	8a	B-10894 / VA-1119
	Lybrook E15-2208 01H	8b	B-10894 / VA-1119
Lybrook H04-2208	Lybrook H04-2208 01H	9	NM-55836 / NM-90468
Lybrook L29-2307	Lybrook L29-2307 01H	10a	NM-36943
	Lybrook L29-2307 02H	10b	NM-36943
	Lybrook L29-2307 03H	10c	NM-36943
	Lybrook L29-2307 04H	10d	NM-36943
Lybrook L33-2307	Lybrook L33-2307 01H	11	V-1697 / V-3924
Lybrook L34-2307	Lybrook L34-2307 01H	12	NM-16586
	Lybrook L34-2307 02H	13	NM-16586
Lybrook M35-2308	Lybrook M35-2308 01H	14a	NM-48989A
	Lybrook M35-2308 02H	15a	NM-48989A
	Lybrook M35-2308 03H	15b	NM-48989A
	Lybrook M35-2308 04H	14b	NM-48989A
Lybrook O20-2307	Lybrook O20-2307 01H	16a	NM-81638
	Lybrook O20-2307 02H	16b	NM-81638
Lybrook O35-2308	Lybrook O35-2308 01H	17	NM-48989A
	Lybrook O35-2308 02H	18	NM-48989A
Lybrook P28-2307	Lybrook P28-2307 01H	19	NM-58878
	Lybrook P28-2307 02H	20	NM-58878
Lybrook P31-2307	Lybrook P31-2307 01H	21a	NM-89023
	Lybrook P31-2307 02H	21b	NM-89023
	Lybrook P31-2307 03H	21c	NM-89023
	Lybrook P31-2307 04H	21d	NM-89023
Lybrook P32-2307	Lybrook P32-2307 01H	22	V-1697 / V-3924
Lybrook G30-2307 01H	Lybrook G30-2307 01H	23a	BIA-1403-1912 / NM-81638 / NM-36943
	Lybrook G30-2307 02H	23b	BIA-1403-1912 / NM-81638 / NM-36943
	Lybrook G30-2307 03H	23c	BIA-1403-1912 / NM-81638 / NM-36943
	Lybrook G30-2307 04H	23d	NM-81638 / NM-36943
Lybrook G31-2307 01H	Lybrook G31-2307 01H	24a	LG-9090 / NM-6681 / BIA 1949
	Lybrook G31-2307 02H	24b	LG-9090 / NM-6681 / BIA 1949
	Lybrook G31-2307 03H	24c	LG-9090 / NM-6681 / BIA 1949
Lybrook J31-2307 01H	Lybrook J31-2307 01H	25	BIA-1882 / LG-9090 / V-9194 / NM-6681
	Lybrook J31-2307 02H	26	BIA-1882 / LG-9090 / V-9194 / NM-6681
Lybrook O30-2307 01H	Lybrook O30-2307 01H	27a	NM-6681
	Lybrook O30-2307 02H	28a	NM-6681
	Lybrook O30-2307 03H	28b	NM-6681
	Lybrook O30-2307 04H	27b	NM-6681

Attachment No. 2b
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Please find attached State of New Mexico Energy Minerals and Natural Resources Department Form C-102 for the following wells:

- Lybrook D12-2208 01H
- Lybrook E12-2208 01H
- Lybrook D34-2307 01H
- Lybrook D34-2307 02H
- Lybrook E20-2307 01H
- Lybrook E20-2307 02H
- Lybrook E33-2307 01H
- Lybrook E33-2307 02H
- Lybrook E11-2208 01H
- Lybrook E11-2208 02H
- Lybrook E15-2208 01H
- Lybrook E15-2208 01H
- Lybrook H04-2208 01H
- Lybrook L29-2307 01H
- Lybrook L29-2307 02H
- Lybrook L29-2307 03H
- Lybrook L29-2307 04H
- Lybrook L33-2307 01H
- Lybrook L34-2307 01H
- Lybrook L34-2307 02H
- Lybrook M35-2308 01H
- Lybrook M35-2308 02H
- Lybrook M35-2308 03H
- Lybrook M35-2308 04H
- Lybrook O20-2307 01H
- Lybrook O20-2307 02H
- Lybrook O35-2308 01H
- Lybrook O35-2308 02H
- Lybrook P28-2307 01H
- Lybrook P28-2307 02H
- Lybrook P31-2307 01H
- Lybrook P31-2307 02H
- Lybrook P31-2307 03H
- Lybrook P31-2307 04H
- Lybrook P32-2307 01H
- Lybrook G30-2307 01H
- Lybrook G30-2307 02H
- Lybrook G30-2307 03H
- Lybrook G30-2307 04H
- Lybrook G31-2307 01H

Attachment No. 2b
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

- Lybrook G31-2307 02H
- Lybrook G31-2307 03H
- Lybrook J31-2307 01H
- Lybrook J31-2307 02H
- Lybrook O30-2307 01H
- Lybrook O30-2307 02H
- Lybrook O30-2307 03H
- Lybrook O30-2307 04H

DISTRICT I
1085 N. French Dr., Hobbs, N.M. 88240
Phone: (505) 898-6161 Fax: (505) 898-0790

DISTRICT II
511 E. First St., Artesia, N.M. 88210
Phone: (505) 745-1888 Fax: (505) 745-9780

DISTRICT III
1000 E. Avenue Rd., Amigo, N.M. 87410
Phone: (505) 894-6178 Fax: (505) 894-6170

DISTRICT IV
1880 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-8480 Fax: (505) 476-8488

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to appropriate
District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 97232	³ Pool Name BASIN MANCOS GAS
⁴ Property Code	⁵ Property Name LYBROOK D12-2208	⁶ Well Number 01H
⁷ OGHD No. 282327	⁸ Operator Name ENCANA OIL & GAS (USA) INC.	⁹ Elevation 6799.1'

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	12	22N	8W		247'	NORTH	632'	WEST	SAN JUAN

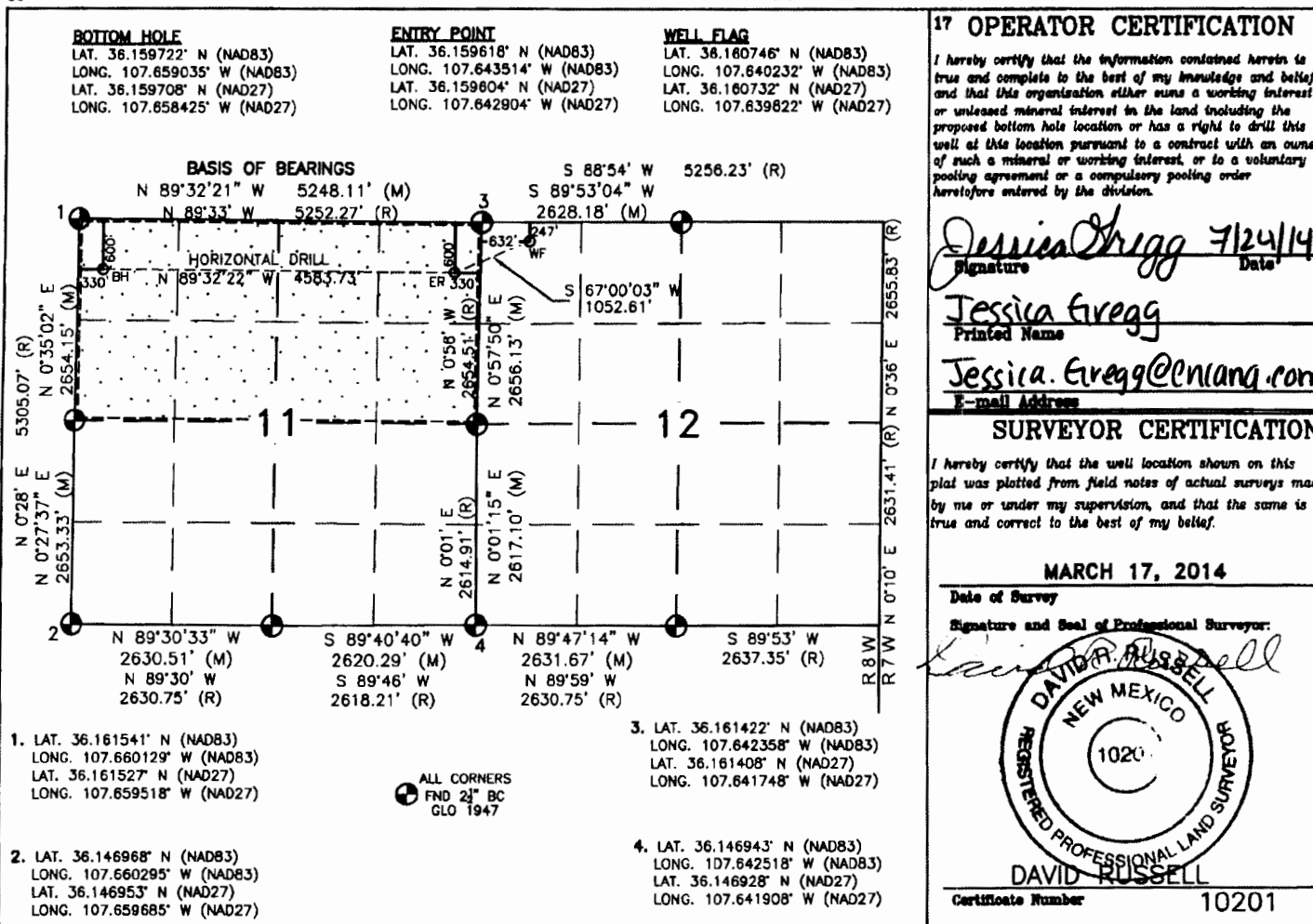
¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	11	22N	8W		660'	NORTH	330'	WEST	SAN JUAN

¹² Dedicated Acres 320.00 ACRES N/2 SEC. 11	PROJECT AREA	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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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

18



DISTRICT I

1686 N. French Dr., Hobbs, N.M. 88240
Phone: (505) 898-6161 Fax: (505) 898-0780

DISTRICT II

811 S. First St., Artesia, N.M. 88210
Phone: (505) 748-1888 Fax: (505) 748-8780

DISTRICT III

1000 N. Bruce Rd., Aztec, N.M. 87410
Phone: (505) 884-6178 Fax: (505) 884-6170

DISTRICT IV

1880 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-8488 Fax: (505) 476-8488

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to appropriate
District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 97232	³ Pool Name BASIN MANCOS
⁴ Property Code	⁵ Property Name LYBROOK E12-2208	⁶ Well Number 01H
⁷ GRID No. 282327	⁸ Operator Name ENCANA OIL & GAS (USA) INC.	⁹ Elevation 6794.1'

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
E	12	22N	8W		2014'	NORTH	637'	WEST	SAN JUAN

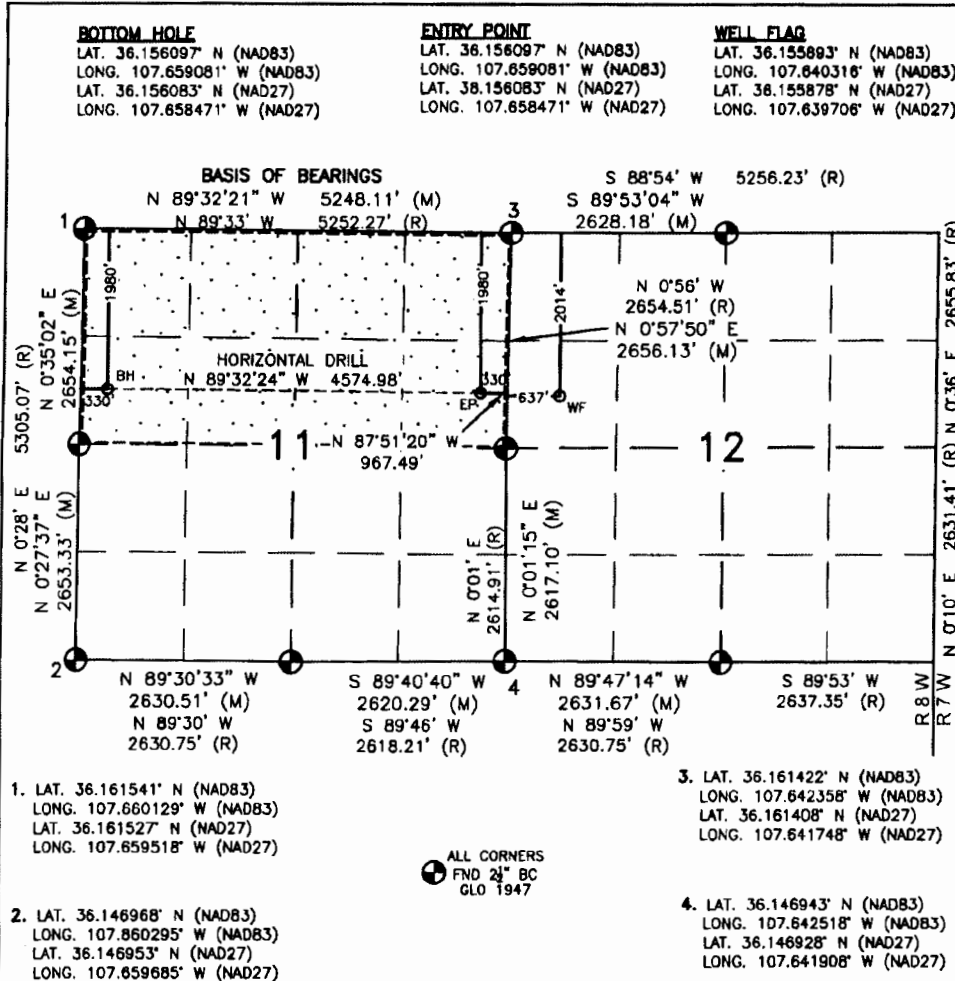
¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	11	22N	8W		1980'	NORTH	330'	WEST	SAN JUAN

¹² Dedicated Acres 320.00 ACRES N/2 SEC. 11	¹³ PROJECT AREA	¹⁴ Joint or Infill	¹⁵ Consolidation Code	¹⁶ Order No.
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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

16



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.

Jessica Gregg 4/24/14
Signature Date
Jessica Gregg
Printed Name
Jessica.Gregg@encana.com
E-mail Address

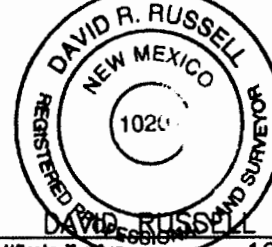
SURVEYOR CERTIFICATION

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.

APRIL 21, 2014

Date of Survey

Signature and Seal of Professional Surveyor:

David R. Russell

Certificate Number 10201

DISTRICT I
1826 N. French Dr., Hobbs, N.M. 88240
Phone: (505) 393-6161 Fax: (505) 393-0780

DISTRICT II
811 E. First St., Artesia, N.M. 88210
Phone: (505) 748-1883 Fax: (505) 748-0780

DISTRICT III
1000 N. Main St., Aztec, N.M. 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

DISTRICT IV
1880 E. St. Francis Dr., Santa Fe, N.M. 87506
Phone: (505) 476-8480 Fax: (505) 476-8482

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to appropriate
District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87506

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number		2 Pool Code 1039 / 97232		3 Pool Name ALAMITO-GALLUP / BASIN MANCOS GAS	
4 Property Code		5 Property Name LYBROOK D34-2307			6 Well Number 01H
7 OGRID No. 282327		8 Operator Name ENCANA OIL & GAS (USA) INC.			9 Elevation 6917.7'

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	34	23N	7W		1131'	NORTH	316'	WEST	SANDOVAL

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
D	33	23N	7W		640'	NORTH	330'	WEST	SANDOVAL

12 Dedicated Acres 160.00 ACRES N/2 N/2 SEC. 33		13 Joint or Infill		14 Consolidation Code		15 Order No.	
--	--	--------------------	--	-----------------------	--	--------------	--

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

16

BOTTOM HOLE LAT. 36.188800° N (NAD83) LONG. 107.587691° W (NAD83) LAT. 36.188786° N (NAD27) LONG. 107.587083° W (NAD27)		ENTRY POINT LAT. 36.188770° N (NAD83) LONG. 107.572144° W (NAD83) LAT. 36.188756° N (NAD27) LONG. 107.571537° W (NAD27)		WELL FLAG LAT. 36.187403° N (NAD83) LONG. 107.569950° W (NAD83) LAT. 36.187389° N (NAD27) LONG. 107.569343° W (NAD27)	
--	--	--	--	--	--

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: *Jessica Gregg* 7/24/14
Printed Name: Jessica Gregg
E-mail Address: *Jessica.Gregg@encana.com*

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: APRIL 9, 2014
Signature and Seal of Registered Surveyor: *DAVID RUSSELL*
REGISTERED PROFESSIONAL LAND SURVEYOR
NEW MEXICO
10201
DAVID RUSSELL
Certificate Number: 10201

1. LAT. 36.183232° N (NAD83)
LONG. 107.588775° W (NAD83)
LAT. 36.183218° N (NAD27)
LONG. 107.588167° W (NAD27)

2. LAT. 36.175815° N (NAD83)
LONG. 107.588768° W (NAD83)
LAT. 36.175901° N (NAD27)
LONG. 107.588160° W (NAD27)

3. LAT. 36.190525° N (NAD83)
LONG. 107.571034° W (NAD83)
LAT. 36.190511° N (NAD27)
LONG. 107.570427° W (NAD27)

4. LAT. 36.175841° N (NAD83)
LONG. 107.570969° W (NAD83)
LAT. 36.175827° N (NAD27)
LONG. 107.570362° W (NAD27)

DISTRICT I

1686 E. French Dr., Hobbs, N.M. 88240
Phone: (505) 808-6161 Fax: (505) 808-0780

DISTRICT II

511 E. First St., Artesia, N.M. 88210
Phone: (505) 748-1888 Fax: (505) 748-9780

DISTRICT III

1000 E. Brasas Rd., Aztec, N.M. 87410
Phone: (505) 834-8178 Fax: (505) 834-8170

DISTRICT IV

1890 E. St. Francis Dr., Santa Fe, NM 87506
Phone: (505) 478-8480 Fax: (505) 478-3488

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to appropriate
District Office

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87506

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 1039	³ Pool Name ALAMITO-GALLUP
⁴ Property Code	⁵ Property Name LYBROOK D34-2307	⁶ Well Number 02H
⁷ GRID No. 282327	⁸ Operator Name ENCANA OIL & GAS (USA) INC.	⁹ Elevation 6917.7'

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	34	23N	7W		1161'	NORTH	315'	WEST	SANDOVAL

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
E	33	23N	7W		2200'	NORTH	330'	WEST	SANDOVAL

¹² Dedicated Acres 160.00 ACRES S/2 N/2 SEC. 33	¹³ Joint or Infill PROJECT AREA	¹⁴ Consolidation Code	¹⁵ Order No.
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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

16

<p>BOTTOM HOLE LAT. 36.185066° N (NAD83) LONG. 107.587669° W (NAD83) LAT. 36.185052° N (NAD27) LONG. 107.587061° W (NAD27)</p> <p>ENTRY POINT LAT. 36.185036° N (NAD83) LONG. 107.572127° W (NAD83) LAT. 36.185022° N (NAD27) LONG. 107.571520° W (NAD27)</p> <p>WELL FLAG LAT. 36.187320° N (NAD83) LONG. 107.569952° W (NAD83) LAT. 36.187306° N (NAD27) LONG. 107.569345° W (NAD27)</p> <p>1. LAT. 36.183232° N (NAD83) LONG. 107.588775° W (NAD83) LAT. 36.183218° N (NAD27) LONG. 107.588167° W (NAD27)</p> <p>2. LAT. 36.175915° N (NAD83) LONG. 107.588768° W (NAD83) LAT. 36.175901° N (NAD27) LONG. 107.588160° W (NAD27)</p> <p>3. LAT. 36.190525° N (NAD83) LONG. 107.571034° W (NAD83) LAT. 36.190511° N (NAD27) LONG. 107.570427° W (NAD27)</p> <p>4. LAT. 36.175841° N (NAD83) LONG. 107.570969° W (NAD83) LAT. 36.175827° N (NAD27) LONG. 107.570362° W (NAD27)</p>	<p>17 OPERATOR CERTIFICATION</p> <p>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.</p> <p><i>Julia Hugg</i> 7/27/14 Signature Date</p> <p>Jessica Gregg Printed Name</p> <p>Jessica.Gregg@encana.com E-mail Address</p> <p>SURVEYOR CERTIFICATION</p> <p>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.</p> <p>APRIL 9, 2014 Date of Survey</p> <p><i>DAVID RUSSELL</i> Signature and Seal of Registered Surveyor</p> <p>NEW MEXICO REGISTERED PROFESSIONAL LAND SURVEYOR 10201 DAVID RUSSELL Certificate Number 10201</p>
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1880 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3480 Fax: (505) 476-3489

BOTTOM HOLE
LAT. 36.217990' N (NAD83)
LONG. 107.623162' W (NAD83)
LAT. 36.217977' N (NAD27)
LONG. 107.622553' W (NAD27)

ENTRY POINT
LAT. 36.217966' N (NAD83)
LONG. 107.607680' W (NAD83)
LAT. 36.217952' N (NAD27)
LONG. 107.607071' W (NAD27)

WELL FLAG
LAT. 36.215605' N (NAD83)
LONG. 107.605648' W (NAD83)
LAT. 36.215591' N (NAD27)
LONG. 107.605039' W (NAD27)

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: Jessica Gregg Date: 7/24/14

Printed Name: Jessica Gregg


E-mail Address: Jessica.Gregg@cnr.state.nm.us

17 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: JUNE 28, 2013

Signature and Seal of Registered Surveyor: David Russell



Certificate Number: 10201

DISTRICT I

1885 N. French Dr., Hobbs, N.M. 88240
Phone: (505) 898-6161 Fax: (505) 898-0780

DISTRICT II

611 S. First St., Artesia, N.M. 88210
Phone: (505) 746-1808 Fax: (505) 746-0780

DISTRICT III

1000 Rio Brazos Rd., Artesia, N.M. 87410
Phone: (505) 834-8178 Fax: (505) 834-8170

DISTRICT IV

1890 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-8460 Fax: (505) 476-8468

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to appropriate
District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 97232	³ Pool Name BASIN MANCOS
⁴ Property Code	⁵ Property Name LYBROOK E20-2307	⁶ Well Number 02H
⁷ GRID No. 282327	⁸ Operator Name ENCANA OIL & GAS (USA) INC.	⁹ Elevation 6982.7'

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
E	20	23N	7W		1552'	NORTH	268'	WEST	SANDOVAL

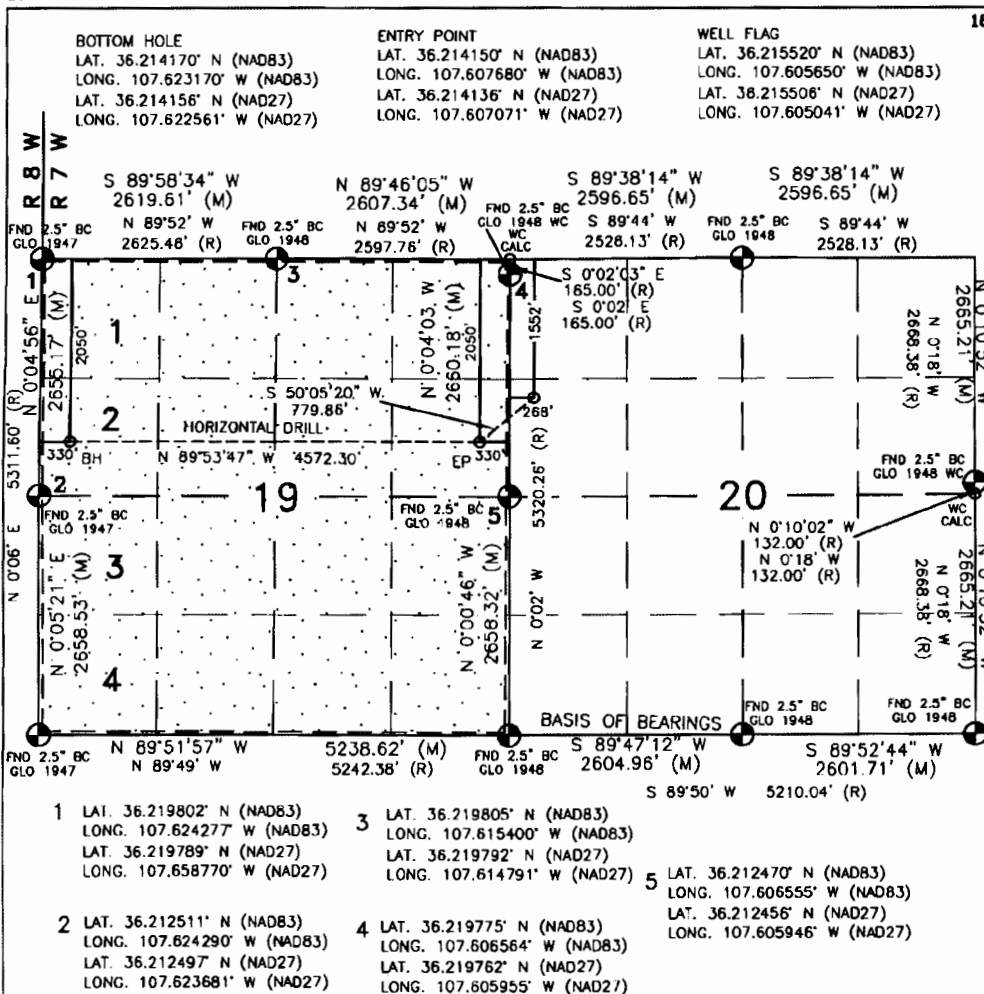
¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	19	23N	7W	2	2050'	NORTH	330'	WEST	SANDOVAL

¹² Dedicated Acres 640.00 ACRES ALL SEC. 19	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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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

16



17 OPERATOR CERTIFICATION

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Jessica Gregg 7/24/14
Signature Date

Jessica Gregg
Printed Name

Jessica.Gregg@encana.com
E-mail Address

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.

JUNE 28, 2013

Date of Survey

Signature and Seal of Professional Surveyor:



DAVID RUSSELL
Certificate Number 10201

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

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 97232	*Pool Name BASIN MANCOS GAS
*Property Code	*Property Name LYBROOK E33-2307		*Well Number 01H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.		*Elevation 6853

¹⁰ Surface Location

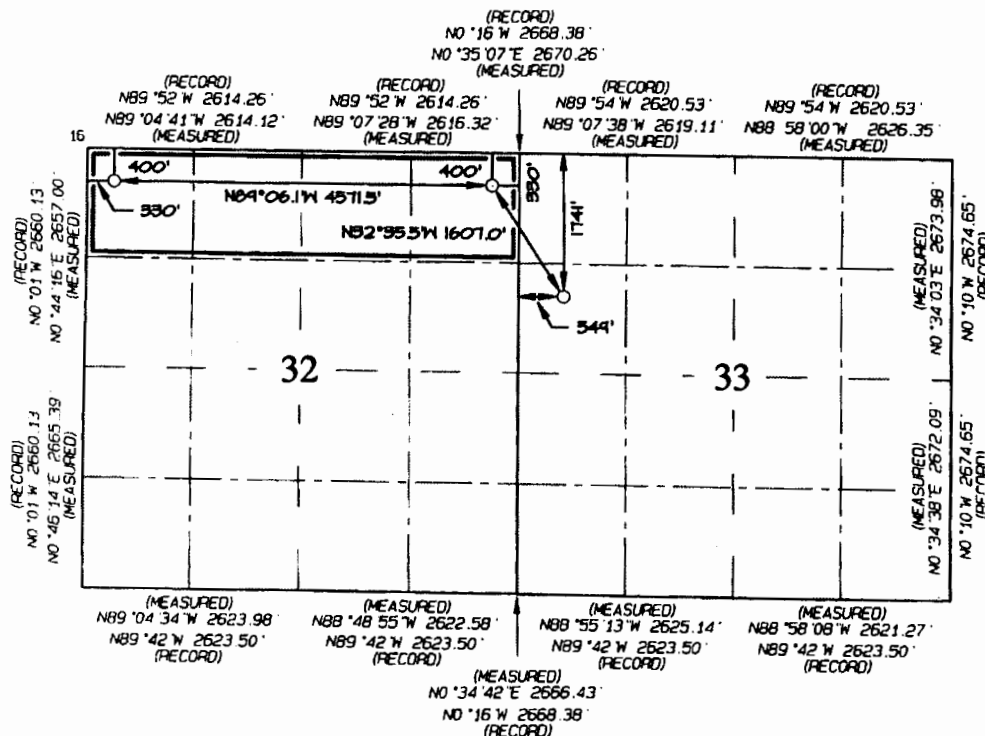
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	33	23N	7W		1741	NORTH	549	WEST	SANDOVAL

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
D	32	23N	7W		400	NORTH	330	WEST	SANDOVAL

¹² Dedicated Acres 160.00 Acres N/2 N/2 - Section 32	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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¹⁷ OPERATOR CERTIFICATION

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Signature: Holly Hill Date: 2/11/14

Printed Name: Holly Hill

E-mail Address: holly.hill@encana.com

E-mail Address: holly.hill@encana.com

E-mail Address: holly.hill@encana.com

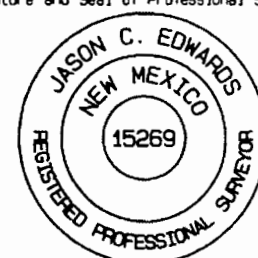
E-mail Address: holly.hill@encana.com

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: AUGUST 2, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

END-OF-LATERAL
400' FNL 330' FWL
SECTION 32, T23N, R7W
LAT: 36.18948°N
LONG: 107.60480°W
DATUM: NAD1927

LAT: 36.18950°N
LONG: 107.60541°W
DATUM: NAD1983

POINT-OF-ENTRY
400' FNL 330' FEL
SECTION 32, T23N, R7W
LAT: 36.18946°N
LONG: 107.58931°W
DATUM: NAD1927

LAT: 36.18947°N
LONG: 107.58992°W
DATUM: NAD1983

SURFACE LOCATION
1741' FNL 549' FWL
SECTION 33, T23N, R7W
LAT: 36.18577°N
LONG: 107.58632°W
DATUM: NAD1927

LAT: 36.18579°N
LONG: 107.58693°W
DATUM: NAD1983

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

District II
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District III
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State of New Mexico
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Appropriate District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 1039		*Pool Name ALAMITO-GALLUP	
*Property Code		*Property Name LYBROOK E33-2307			*Well Number 02H
*GRID No. 282327		*Operator Name ENCANA OIL & GAS (USA) INC.			*Elevation 6853

10 Surface Location

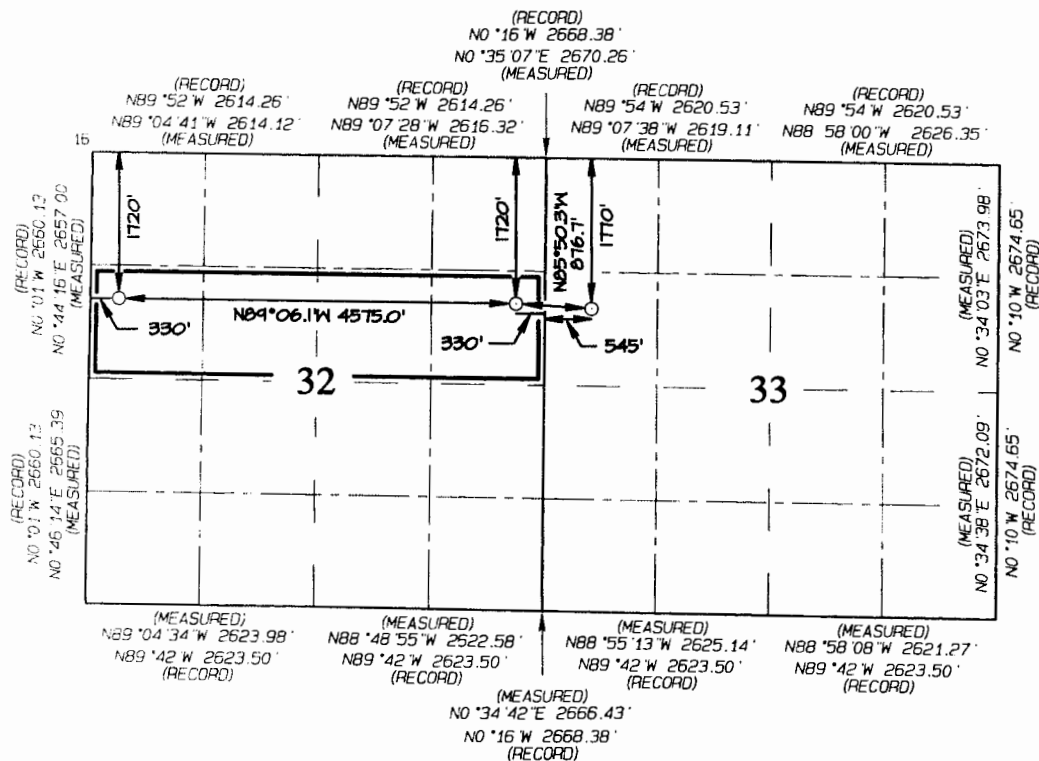
UL or Lot no	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	33	23N	7W		1770	NORTH	545	WEST	SANDOVAL

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
E	32	23N	7W		1720	NORTH	330	WEST	SANDOVAL

*Dedicated Acres 160.00 Acres S/2 N/2 - Section 32					*Joint or Infill	*Consolidation Code	*Order No.
--	--	--	--	--	------------------	---------------------	------------

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



END-OF-LATERAL
1720' FNL 330' FWL
SECTION 32, T23N, R7W
LAT: 36.18586°N
LONG: 107.60480°W
DATUM: NAD1927

LAT: 36.18587°N
LONG: 107.60541°W
DATUM: NAD1983

POINT-OF-ENTRY
1720' FNL 330' FEL
SECTION 32, T23N, R7W
LAT: 36.18583°N
LONG: 107.58930°W
DATUM: NAD1927

LAT: 36.18585°N
LONG: 107.58991°W
DATUM: NAD1983

SURFACE LOCATION
1770' FNL 545' FWL
SECTION 33, T23N, R7W
LAT: 36.18569°N
LONG: 107.58633°W
DATUM: NAD1927

LAT: 36.18571°N
LONG: 107.58694°W
DATUM: NAD1983

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: Holly Hill Date: 2/11/14

Printed Name: Holly Hill

E-mail Address: holly.hill@encana.com

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: AUGUST 2, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

DISTRICT I

1086 N. French Dr., Hobbs, N.M. 88240
Phone: (505) 393-6161 Fax: (505) 393-6780

DISTRICT II

811 E. First St., Artesia, N.M. 88210
Phone: (505) 745-1883 Fax: (505) 745-9780

DISTRICT III

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OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 97232	³ Pool Name BASIN MANCOS
⁴ Property Code	⁵ Property Name LYBROOK E11-2208	⁶ Well Number 01H
⁷ OGHD No. 282327	⁸ Operator Name ENCANA OIL & GAS (USA) INC.	⁹ Elevation 6816.4'

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
E	11	22N	8W		2507'	NORTH	1249'	WEST	SAN JUAN

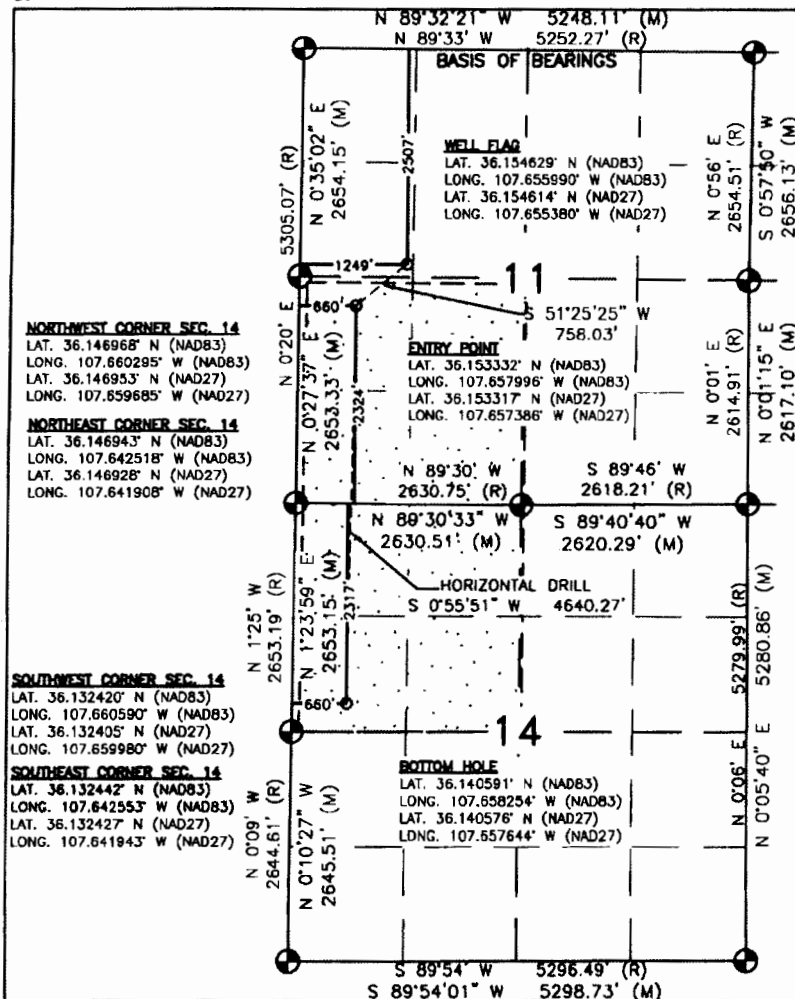
¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	14	22N	8W		2317'	NORTH	660'	WEST	SAN JUAN

¹² Dedicated Acres 320.00 ACRES LOCATED IN THE SW/4 OF SEC. 11 & NW/4 SEC. 14	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
--	-------------------------------	----------------------------------	-------------------------

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

16

**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.

Jessica Gregg 7/24/14
Signature Date

Jessica Gregg
Printed Name

Jessica.Gregg@encana.com
E-mail Address

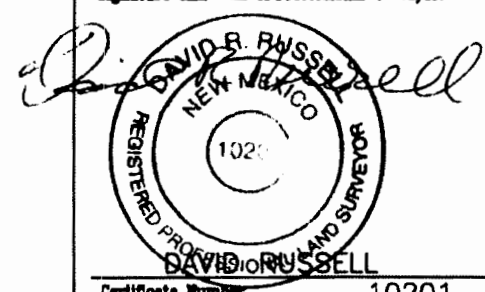
SURVEYOR CERTIFICATION

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.

MAY 8, 2014

Date of Survey

Signature and Seal of Professional Surveyor:



Certificate Number 10201

DISTRICT I

1828 E. French Dr., Hobbs, N.M. 88240
Phone: (505) 593-6161 Fax: (505) 593-0720

DISTRICT II

511 S. First St., Artesia, N.M. 88210
Phone: (505) 748-1988 Fax: (505) 748-9780

DISTRICT III

1000 Rio Bravos Rd., Artesia, N.M. 87410
Phone: (505) 334-8178 Fax: (505) 334-8170

DISTRICT IV

1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 478-3460 Fax: (505) 478-3468

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to appropriate
District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 97232	³ Pool Name BASIN MANCOS
⁴ Property Code	⁵ Property Name LYBROOK E11-2208	⁶ Well Number 02H
⁷ OGRID No. 282327	⁸ Operator Name ENCANA OIL & GAS (USA) INC.	⁹ Elevation 6816.4'

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
E	11	22N	8W		2537'	NORTH	1247'	WEST	SAN JUAN

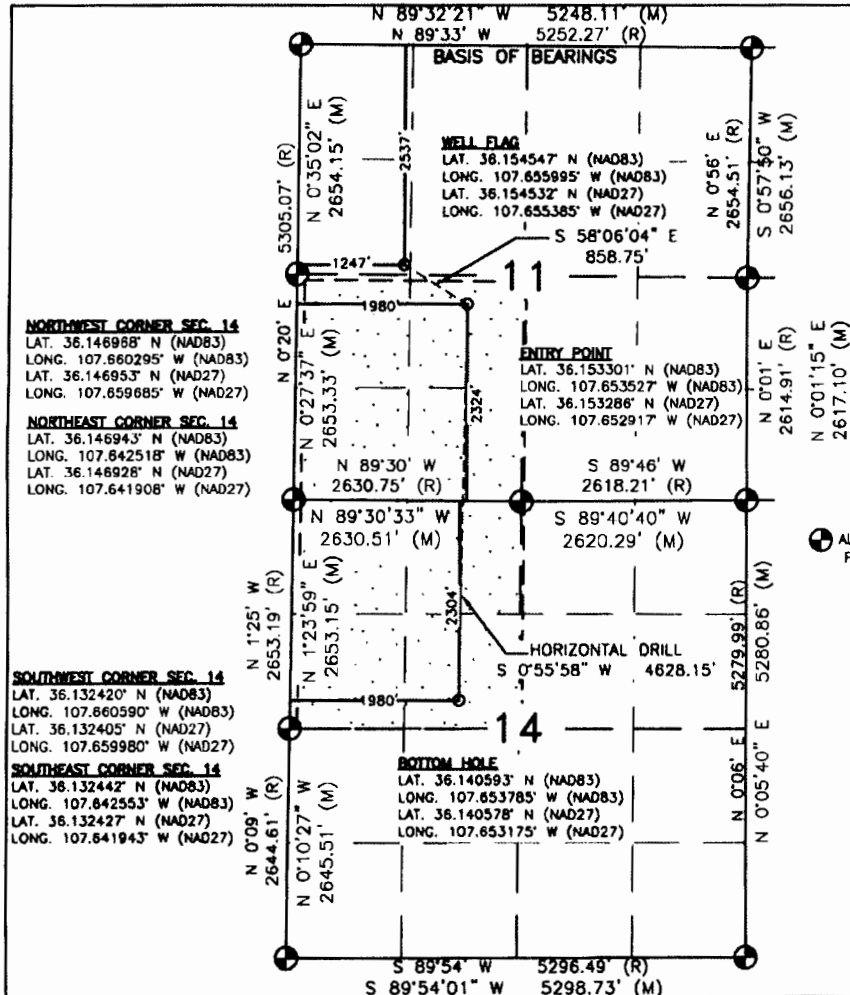
¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
F	14	22N	8W		2304'	NORTH	1980'	WEST	SAN JUAN

¹² Dedicated Acres 320.00 ACRES LOCATED IN THE SW/4 OF SEC. 11 & NW/4 SEC. 14	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
--	-------------------------------	----------------------------------	-------------------------

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

16



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.

Jessica Gregg 7/24/14
Signature Date

Jessica Gregg
Printed Name

Jessica.Gregg@encana.com
E-mail Address

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.

MARCH 18, 2014

Date of Survey

Signature and Seal of Professional Surveyor:

David R. Russell
DAVID R. RUSSELL
NEW MEXICO
REGISTERED PROFESSIONAL SURVEYOR
1020
Certificate Number 10201

DISTRICT I

1685 E. French Dr., Hobbs, N.M. 88240
Phone: (505) 588-8181 Fax: (505) 588-0780

DISTRICT II

511 E. First St., Artesia, N.M. 88210
Phone: (505) 748-1888 Fax: (505) 748-8780

DISTRICT III

1000 E. Brown Rd., Artesia, N.M. 87410
Phone: (505) 334-8178 Fax: (505) 334-8170

DISTRICT IV

1820 E. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 478-8480 Fax: (505) 478-8488

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

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District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code	*Pool Name
		97232	BASIN MANCOS
*Property Code	*Property Name		*Well Number
	LYBROOK E15-2208		01H
*OGRID No.	*Operator Name		*Elevation
282327	ENCANA OIL & GAS (USA) INC.		6658.6'

10 Surface Location

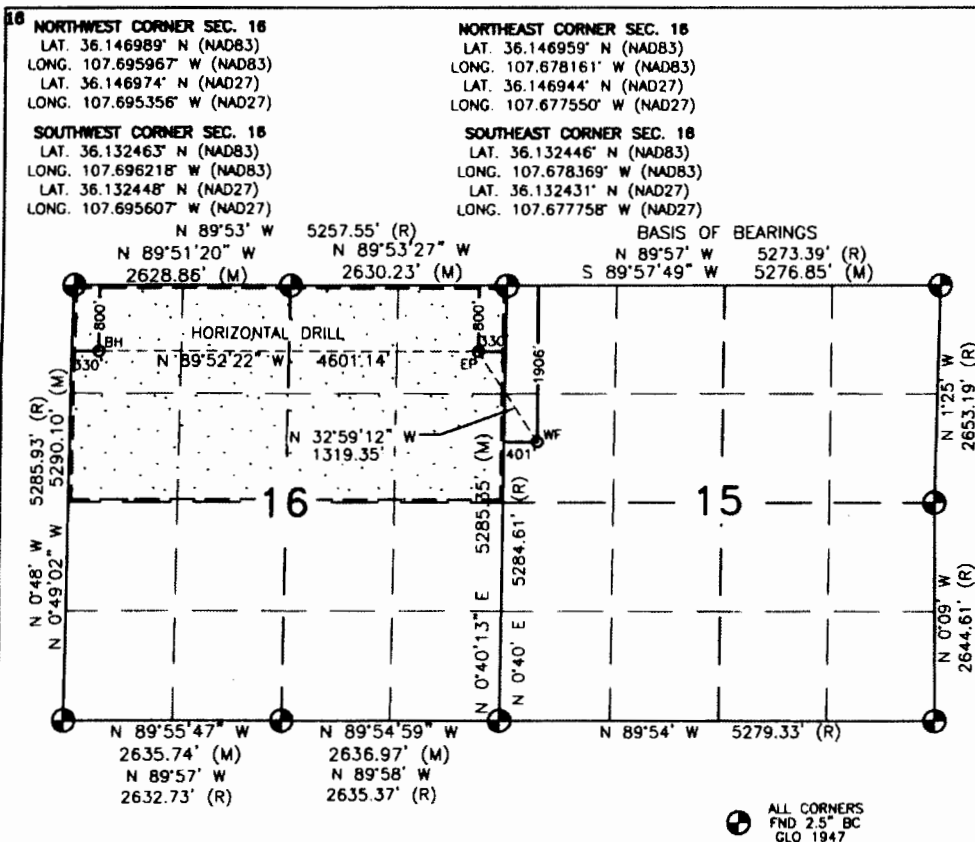
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	15	22N	8W		1906'	NORTH	401'	WEST	SAN JUAN

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	16	22N	8W		800'	NORTH	330'	WEST	SAN JUAN

*Dedicated Acres	PROJECT AREA	*Joint or Infill	*Consolidation Code	*Order No.
320.00 ACRES N/2 SEC. 16				

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 released 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.

Jessica Gregg 7/24/14
Signature Date

Jessica Gregg
Printed Name

Jessica.Gregg@encana.com
E-mail Address

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.

MARCH 18, 2014

Date of Survey

Signature and Seal of Professional Surveyor:

David Russell
DAVID RUSSELL
NEW MEXICO
REGISTERED PROFESSIONAL LAND SURVEYOR
10201
DAVID RUSSELL
Certificate Number 10201

BOTTOM HOLE

LAT. 36.144790° N (NAD83)
LONG. 107.694888° W (NAD83)
LAT. 36.144775° N (NAD27)
LONG. 107.694277° W (NAD27)

ENTRY POINT

LAT. 36.144764° N (NAD83)
LONG. 107.679310° W (NAD83)
LAT. 36.144749° N (NAD27)
LONG. 107.678699° W (NAD27)

WELL FLAG

LAT. 36.141725° N (NAD83)
LONG. 107.676878° W (NAD83)
LAT. 36.141710° N (NAD27)
LONG. 107.676267° W (NAD27)

DISTRICT I

1885 E. French Dr., Hobbs, N.M. 88240
Phone: (505) 863-6181 Fax: (505) 368-0780

DISTRICT II

511 S. First St., Artesia, N.M. 88210
Phone: (505) 748-1288 Fax: (505) 748-9780

DISTRICT III

1000 E. Bruce Rd., Aztec, N.M. 87410
Phone: (505) 834-6178 Fax: (505) 834-6170

DISTRICT IV

1890 E. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 478-5480 Fax: (505) 478-5488

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

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District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 97232	³ Pool Name BASIN MANCOS
⁴ Property Code	⁵ Property Name LYBROOK E15-2208	⁶ Well Number 02H
⁷ OGHD No. 282327	⁸ Operator Name ENCANA OIL & GAS (USA) INC.	⁹ Elevation 6658.6'

¹⁰ Surface Location

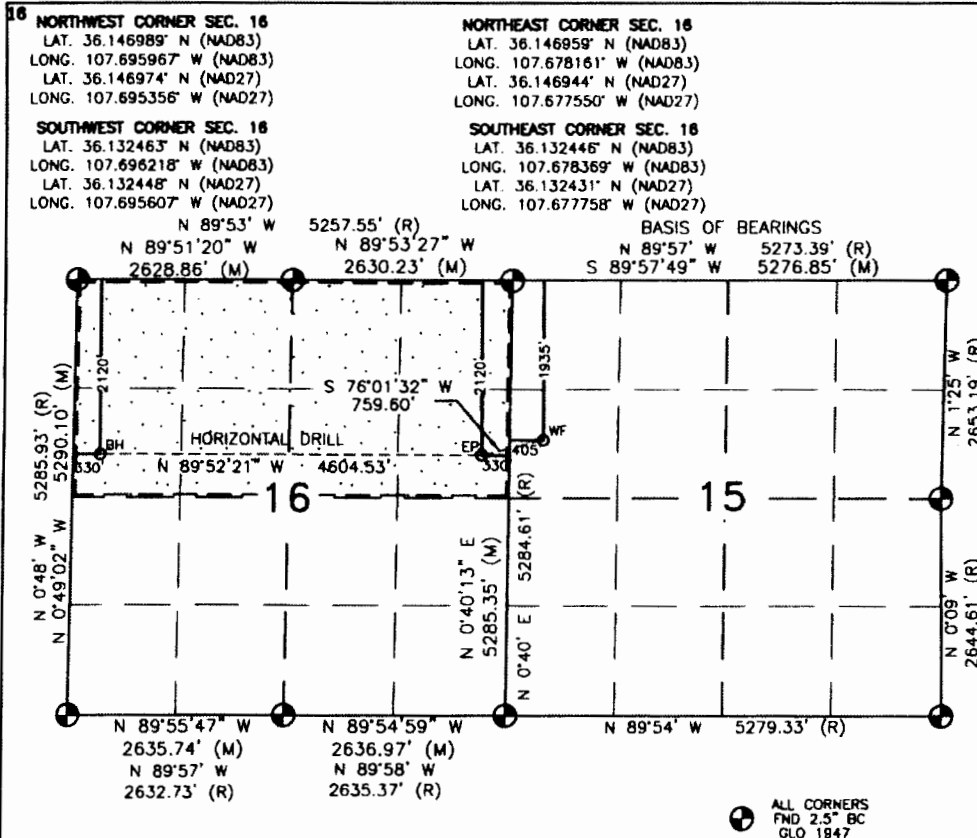
UL or lot no.	Section	Township	Range	Lot	Feet from the	North/South line	Feet from the	East/West line	County
E	15	22N	8W		1935'	NORTH	405'	WEST	SAN JUAN

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot	Feet from the	North/South line	Feet from the	East/West line	County
E	16	22N	8W		2120'	NORTH	330'	WEST	SAN JUAN

¹² Dedicated Acres 320.00 ACRES N/2 SEC. 16	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
---	-------------------------------	----------------------------------	-------------------------

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OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

**17 OPERATOR CERTIFICATION**

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Jessica Gregg 7/24/14
Signature Date

Jessica Gregg
Printed Name

Jessica.Gregg@encana.com
E-mail Address

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.

MARCH 18, 2014

Date of Survey

Signature and Seal of Professional Surveyor

David Russell

DAVID RUSSELL

Certificate Number

10201

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

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number		2 Pool Code 97232		3 Pool Name BASIN MANCOS	
4 Property Code		5 Property Name LYBROOK H04-2208			6 Well Number 01H
7 GRID No 282327		8 Operator Name ENCANA OIL & GAS (USA) INC.			9 Elevation 6850

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
H	4	22N	8W		1980	NORTH	330	EAST	SAN JUAN

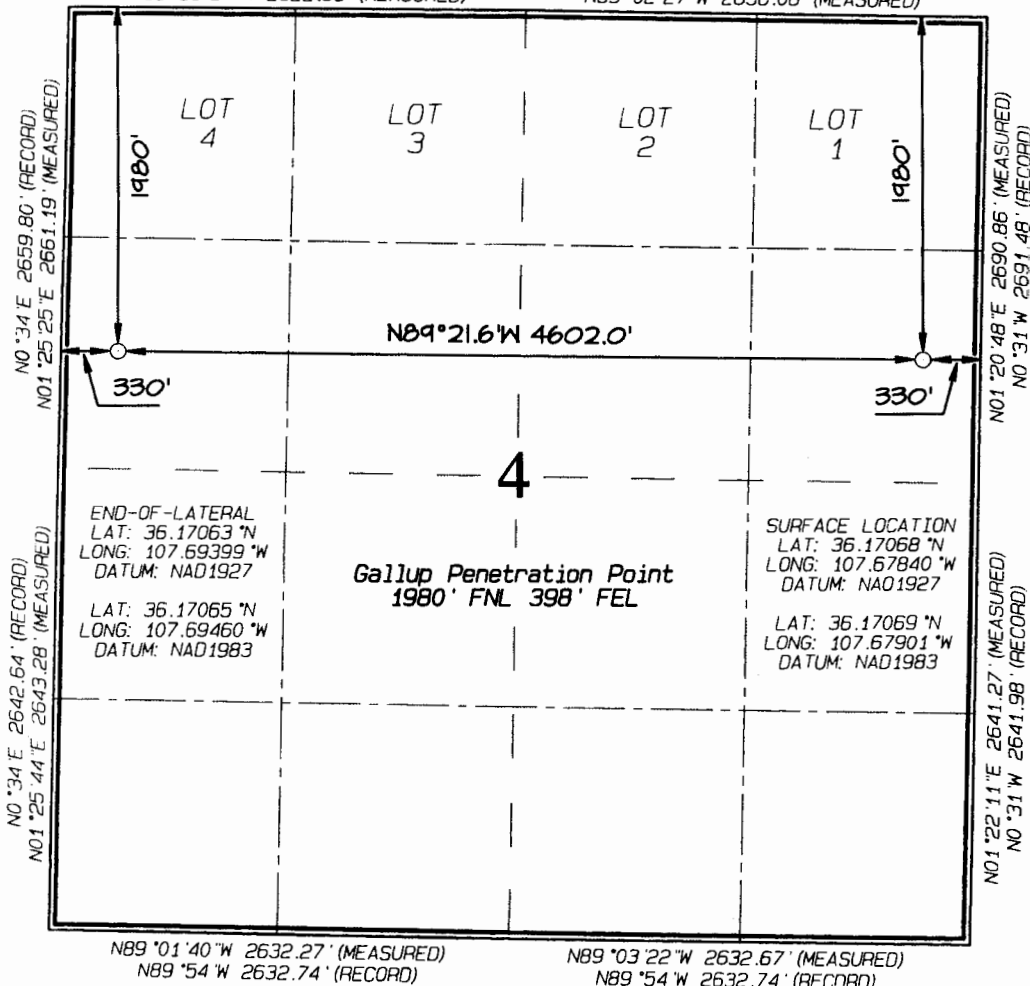
11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	4	22N	8W		1980	NORTH	330	WEST	SAN JUAN
12 Dedicated Acres 644.03 Acres Entire Section 4					13 Joint or Infill		14 Consolidation Code		15 Order No.

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

S89°31'W 2624.82' (RECORD)
N89°38'54"W 2622.89' (MEASURED)

N89°53'W 2637.36' (RECORD)
N89°02'27"W 2636.08' (MEASURED)



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: *Jessica Firegg* Date: 7/24/14
Printed Name: Jessica Firegg
E-mail Address: Jessica.Firegg@encana.com

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 Revised: APRIL 3, 2013
Date of Survey: APRIL 4, 2012
Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

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

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 97232	*Pool Name BASIN MANCOS
*Property Code	*Property Name LYBROOK L29-2307		*Well Number 01H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.		*Elevation 6869'

¹⁰ Surface Location

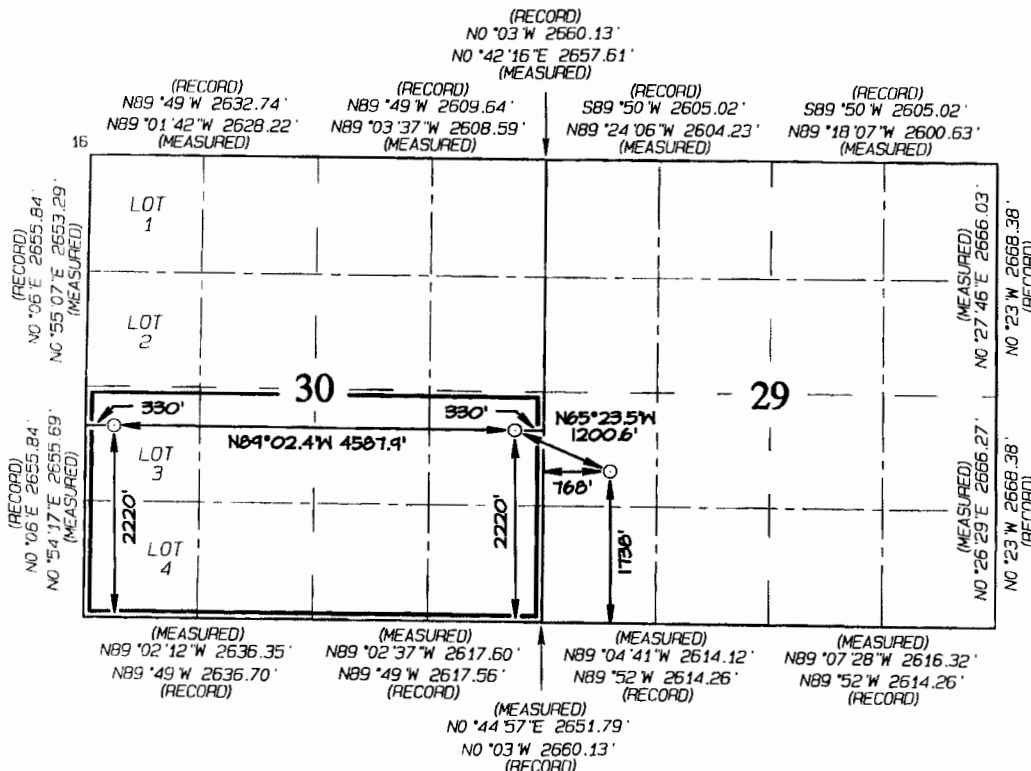
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	29	23N	7W		1738	SOUTH	768	WEST	SANDOVAL

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
L	30	23N	7W	3	2220	SOUTH	330	WEST	SANDOVAL

¹² Dedicated Acres 321.26 Acres S/2 - Section 30	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
---	-------------------------------	----------------------------------	-------------------------

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



END-OF-LATERAL
2220' FSL 330' FWL
SECTION 30, T23N, R7W
LAT: 36.19672°N
LONG: 107.62259°W
DATUM: NAD1927

LAT: 36.19673°N
LONG: 107.62320°W
DATUM: NAD1983

POINT-OF-ENTRY
2220' FSL 330' FWL
SECTION 30, T23N, R7W
LAT: 36.19668°N
LONG: 107.60705°W
DATUM: NAD1927

LAT: 36.19670°N
LONG: 107.60766°W
DATUM: NAD1983

SURFACE LOCATION
1738' FSL 768' FWL
SECTION 29, T23N, R7W
LAT: 36.19535°N
LONG: 107.60333°W
DATUM: NAD1927

LAT: 36.19537°N
LONG: 107.60393°W
DATUM: NAD1983

¹⁷ OPERATOR CERTIFICATION

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Holly Hill 2/11/14
Signature Date
Holly Hill

Printed Name
Holly.Hill@encana.com

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 Revised: FEBRUARY 6, 2014
Survey Date: JANUARY 9, 2014

Signature and Seal of Professional Surveyor



Jason C. Edwards

Certificate Number 15269

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

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 97232	*Pool Name BASIN MANCOS
*Property Code	*Property Name LYBROOK L29-2307		*Well Number 02H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.		*Elevation 6869'

¹⁰ Surface Location

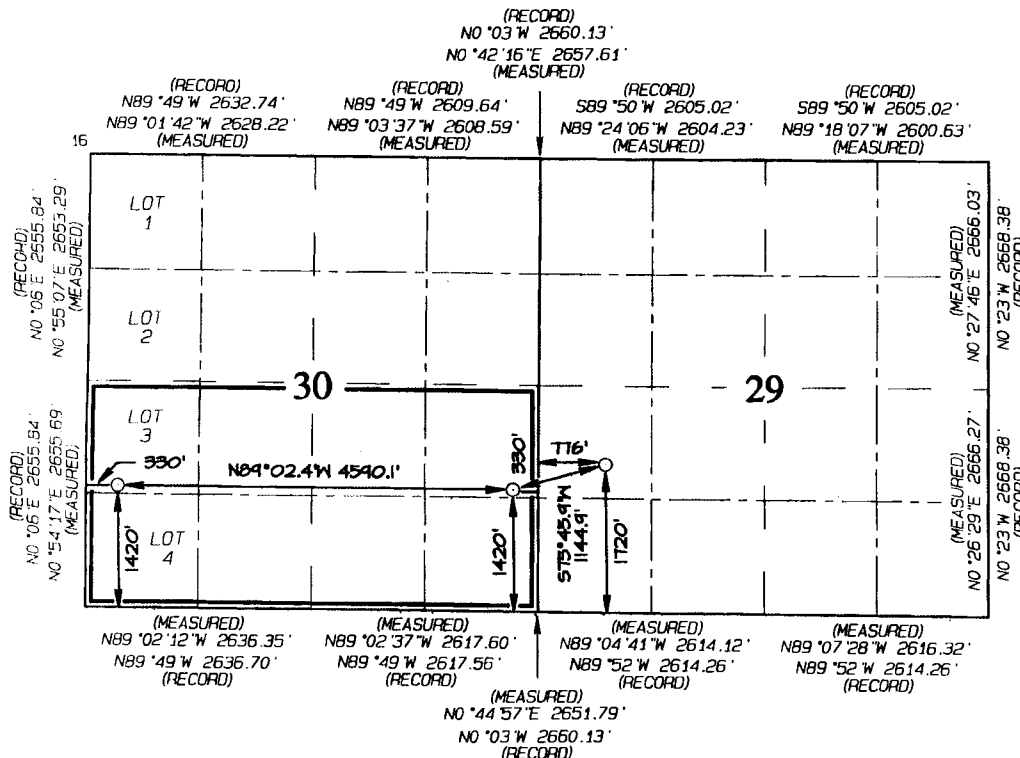
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	29	23N	7W		1720	SOUTH	776	WEST	SANDOVAL

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
L	30	23N	7W	3	1420	SOUTH	330	WEST	SANDOVAL

¹² Dedicated Acres 321.26 Acres S/2 - Section 30	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
---	-------------------------------	----------------------------------	-------------------------

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¹⁷ OPERATOR CERTIFICATION

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Signature: Holly Hill Date: 2/11/14
Holly Hill

Printed Name
Holly.Hill@encana.com

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 Revised: FEBRUARY 6, 2014

Survey Date: JANUARY 9, 2014

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

END-OF-LATERAL
1420' FSL 330' FWL
SECTION 30, T23N, R7W
LAT: 36.19452°N
LONG: 107.62260°W
DATUM: NAD1927

LAT: 36.19453°N
LONG: 107.62321°W
DATUM: NAD1983

POINT-OF-ENTRY
1420' FSL 330' FEL
SECTION 30, T23N, R7W
LAT: 36.19449°N
LONG: 107.60705°W
DATUM: NAD1927

LAT: 36.19450°N
LONG: 107.60765°W
DATUM: NAD1983

SURFACE LOCATION
1720' FSL 776' FWL
SECTION 29, T23N, R7W
LAT: 36.19530°N
LONG: 107.60330°W
DATUM: NAD1927

LAT: 36.19532°N
LONG: 107.60391°W
DATUM: NAD1983

District I
1625 N. French Drive, Hobbs, NM 88240
Phone: (575) 393-5161 Fax: (575) 393-0720

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

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State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
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Submit one copy to
Appropriate District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number	*Pool Code 97232	*Pool Name BASIN MANCOS
*Property Code	*Property Name LYBROOK L29-2307	*Well Number 03H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.	*Elevation 6869'

¹⁰ Surface Location

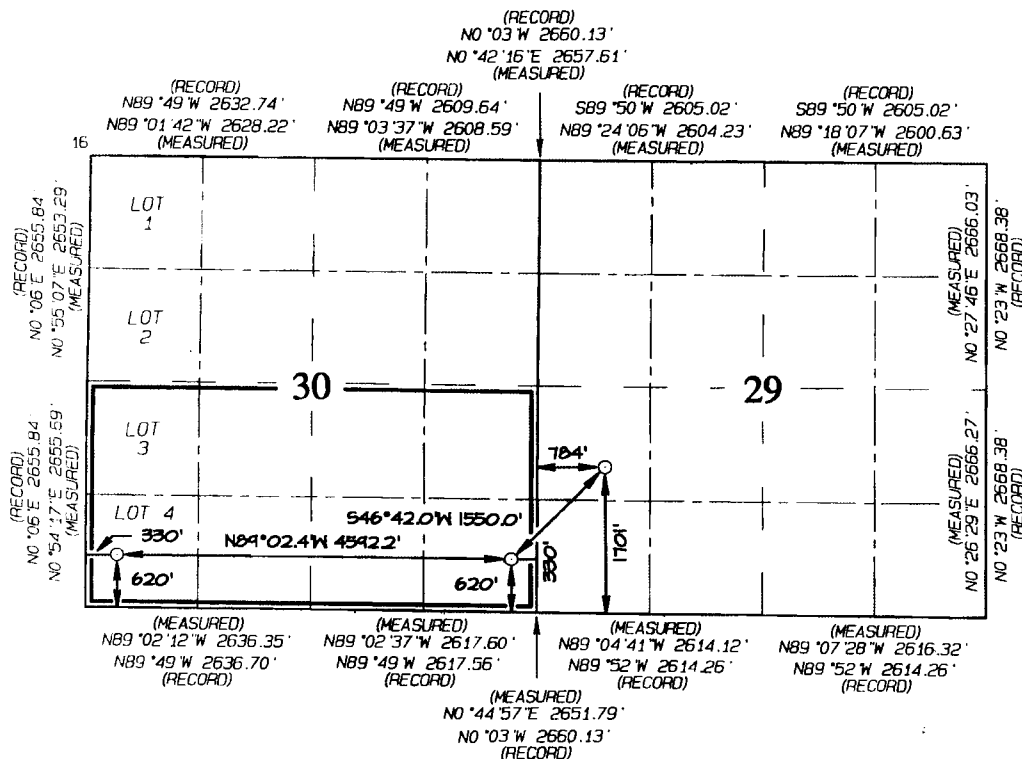
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	29	23N	7W		1701	SOUTH	784	WEST	SANDOVAL

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
M	30	23N	7W	4	620	SOUTH	330	WEST	SANDOVAL

¹² Dedicated Acres 321.26 Acres S/2 - Section 30	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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¹⁷ OPERATOR CERTIFICATION

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Signature: Holly Hill Date: 2/11/14
Holly Hill

Printed Name: Holly.Hill@encana.com

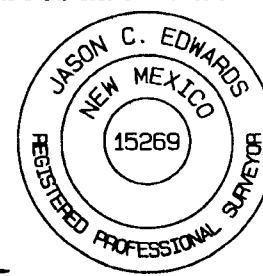
E-mail Address: Holly.Hill@encana.com

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 Revised: FEBRUARY 6, 2014
Survey Date: JANUARY 9, 2014

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

END-OF-LATERAL
620' FSL 330' FWL
SECTION 30, T23N, R7W
LAT: 36.19232°N
LONG: 107.62260°W
DATUM: NAD1927

POINT-OF-ENTRY
620' FSL 330' FEL
SECTION 30, T23N, R7W
LAT: 36.19229°N
LONG: 107.60704°W
DATUM: NAD1927

SURFACE LOCATION
1701' FSL 784' FWL
SECTION 29, T23N, R7W
LAT: 36.19525°N
LONG: 107.60327°W
DATUM: NAD1927

LAT: 36.19234°N
LONG: 107.62321°W
DATUM: NAD1983

LAT: 36.19230°N
LONG: 107.60765°W
DATUM: NAD1983

LAT: 36.19527°N
LONG: 107.60388°W
DATUM: NAD1983

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

JASON C. EDWARDS
Certificate Number 15269

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

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
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Form C-102
Revised August 1, 2011

Submit one copy to
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OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 1039	*Pool Name ALAMITO - GALLUP
*Property Code	*Property Name LYBROOK L33-2307		*Well Number 01H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.		*Elevation 6867

¹⁰ Surface Location

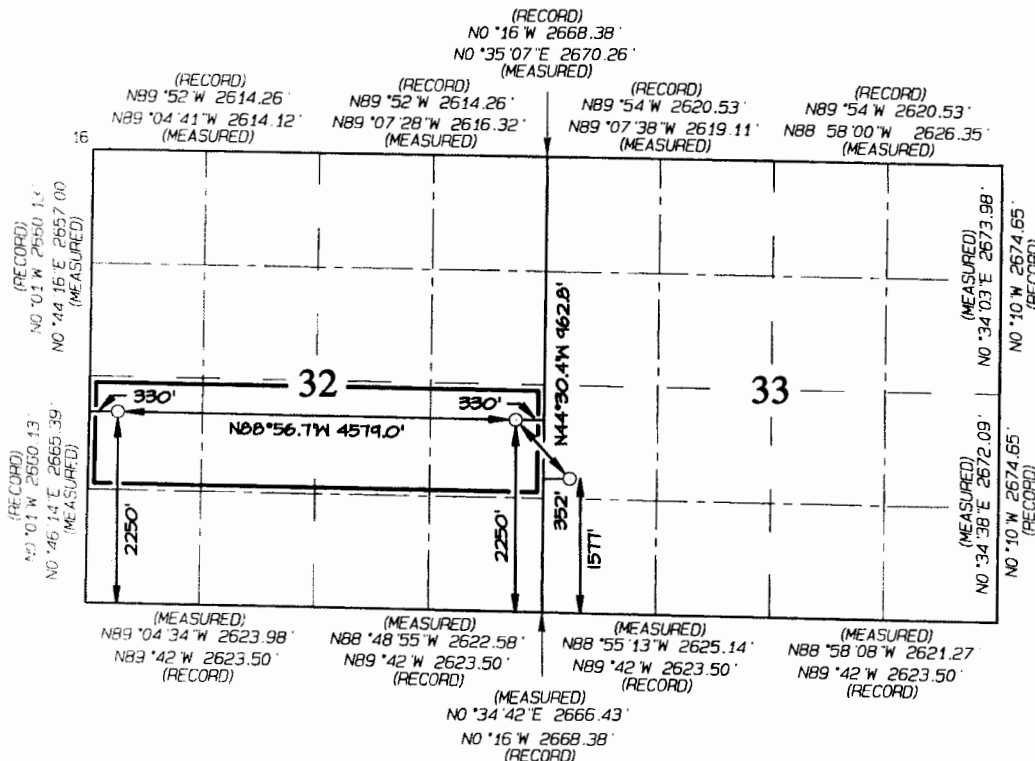
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	33	23N	7W		1577	SOUTH	352	WEST	SANDOVAL

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
L	32	23N	7W		2250	SOUTH	330	WEST	SANDOVAL

¹² Dedicated Acres 160.00 Acres N/2 S/2 - Section 32	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
---	-------------------------------	----------------------------------	-------------------------

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: Holly Hill Date: 10/23/13

Printed Name: Holly Hill

E-mail Address: Holly.Hill@encana.com

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.

Survey Date: OCTOBER 10, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

END-OF-LATERAL
2250' FSL 330' FWL
SECTION 32, T23N, R7W
LAT: 36.18214°N
LONG: 107.60479°W
DATUM: NAD1927

LAT: 36.18216°N
LONG: 107.60540°W
DATUM: NAD1983

POINT-OF-ENTRY
2250' FSL 330' FWL
SECTION 32, T23N, R7W
LAT: 36.18209°N
LONG: 107.58928°W
DATUM: NAD1927

LAT: 36.18210°N
LONG: 107.58989°W
DATUM: NAD1983

SURFACE LOCATION
1577' FSL 352' FWL
SECTION 33, T23N, R7W
LAT: 36.18022°N
LONG: 107.58696°W
DATUM: NAD1927

LAT: 36.18024°N
LONG: 107.58757°W
DATUM: NAD1983

DISTRICT I

1086 N. French Dr., Hobbs, N.M. 88240
Phone: (505) 598-8181 Fax: (505) 598-0780

DISTRICT II

611 S. First St., Artesia, N.M. 80510
Phone: (505) 748-1883 Fax: (505) 748-9780

DISTRICT III

1000 Elv. Brown Rd., Arizon, N.M. 87410
Phone: (505) 334-8178 Fax: (505) 334-8170

DISTRICT IV

1880 S. St. Francis Dr., Santa Fe, NM 87506
Phone: (505) 478-3480 Fax: (505) 478-3488

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Revised August 1, 2011

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OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number		² Pool Code 1039		³ Pool Name ALAMITO-GALLUP	
⁴ Property Code		⁵ Property Name LYBROOK L34-2307			⁶ Well Number 01H
⁷ GRID No. 282327		⁸ Operator Name ENCANA OIL & GAS (USA) INC.			⁹ Elevation 6896.5'

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
L	34	23N	7W		1433'	SOUTH	769'	WEST	SANDOVAL

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
L	33	23N	7W		1980'	SOUTH	330'	WEST	SANDOVAL

¹² Dedicated Acres 160.00 ACRES N/2 S/2 SEC. 33	¹³ Joint or Infill PROJECT AREA	¹⁴ Consolidation Code	¹⁵ Order No.
---	---	----------------------------------	-------------------------

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

18

BOTTOM HOLE LAT. 36.181347° N (NAD83) LONG. 107.587656° W (NAD83) LAT. 36.181333° N (NAD27) LONG. 107.587048° W (NAD27)		ENTRY POINT LAT. 36.181283° N (NAD83) LONG. 107.572110° W (NAD83) LAT. 36.181269° N (NAD27) LONG. 107.571503° W (NAD27)		WELL FLAG LAT. 36.179766° N (NAD83) LONG. 107.568381° W (NAD83) LAT. 36.179752° N (NAD27) LONG. 107.567774° W (NAD27)	
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 released 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: <i>Jessica Firegg</i> Date: 7/24/14 Printed Name: Jessica Firegg E-mail Address: jessica.firegg@encana.com					
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: APRIL 9, 2014 Signature and Seal of Professional Surveyor: <i>David Russell</i> 					

DISTRICT I
1686 N. French Dr., Hobbs, N.M. 88240
Phone: (505) 808-8161 Fax: (505) 808-0780

DISTRICT II
511 S. First St., Artesia, N.M. 88210
Phone: (505) 748-1888 Fax: (505) 748-8780

DISTRICT III
1000 Rio Grande Rd., Artesia, N.M. 87410
Phone: (505) 334-8175 Fax: (505) 334-8170

DISTRICT IV
1890 S. R. Francis Dr., Santa Fe, NM 87505
Phone: (505) 478-3480 Fax: (505) 478-3488

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to appropriate
District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 1039	*Pool Name ALAMITO-GALLUP
*Property Code	*Property Name LYBROOK L34-2307		*Well Number 02H
*OGRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.		*Elevation 6896.5'

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
L	34	23N	7W		1403'	SOUTH	762'	WEST	SANDOVAL

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
M	33	23N	7W		660'	SOUTH	330'	WEST	SANDOVAL

*Dedicated Acres 160.00 ACRES S/2 S/2 SEC. 33	*Joint or Infill	*Consolidation Code	*Order No.
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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

<p>BOTTOM HOLE LAT. 36.177722° N (NAD83) LONG. 107.587652° W (NAD83) LAT. 36.177708° N (NAD27) LONG. 107.587044° W (NAD27)</p>	<p>ENTRY POINT LAT. 36.177658° N (NAD83) LONG. 107.572094° W (NAD83) LAT. 36.177644° N (NAD27) LONG. 107.571866° W (NAD27)</p>	<p>WELL FLAG LAT. 36.179685° N (NAD83) LONG. 107.568404° W (NAD83) LAT. 36.179671° N (NAD27) LONG. 107.567797° W (NAD27)</p>	<p>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.</p> <p><i>Jessica Gregg</i> 7/24/14 Signature Date Jessica Gregg Printed Name Jessica.Gregg@encana.com E-mail Address</p>
<p>16 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.</p> <p>APRIL 9, 2014 Date of Survey Signature and Seal of Professional Surveyor: <i>David Russell</i> DAVID RUSSELL REGISTERED PROFESSIONAL LAND SURVEYOR 10201 Certificate Number</p>			

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Phone: (505) 334-6178 Fax: (505) 334-6170

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

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 1039	³ Pool Name ALAMITO - GALLUP
⁴ Property Code	⁵ Property Name LYBROOK M35-2308	⁶ Well Number 01H
⁷ GRID No. 282327	⁸ Operator Name ENCANA OIL & GAS (USA) INC.	⁹ Elevation 6879'

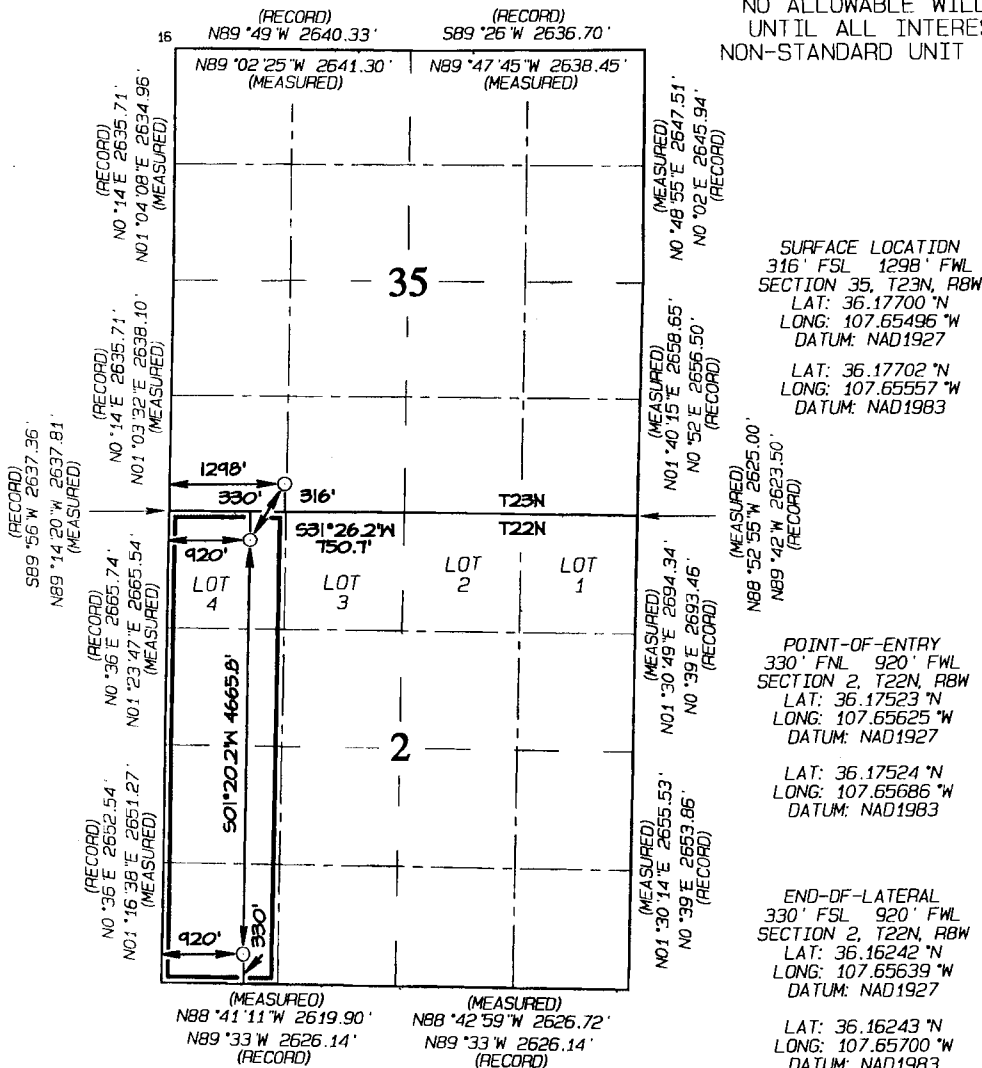
¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	35	23N	8W		316	SOUTH	1298	WEST	SAN JUAN

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	2	22N	8W		330	SOUTH	920	WEST	SAN JUAN
¹² Dedicated Acres 160.50 Acres W/2 W/2 - Section 2					¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.		

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.

Jessica Gregg 7/24/14
Signature Date
Jessica Gregg
Printed Name
Jessica.Gregg@eniana.com
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 Revised: JANUARY 24, 2014
Survey Date: AUGUST 22, 2012

Signature and Seal of Professional Surveyor



Jason C. Edwards
Certificate Number 15269

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

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Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 1039	³ Pool Name ALAMITO - GALLUP
⁴ Property Code	⁵ Property Name LYBROOK M35-2308	⁶ Well Number 02H
⁷ GRID No. 282327	⁸ Operator Name ENCANA OIL & GAS (USA) INC.	⁹ Elevation 6879'

¹⁰ Surface Location

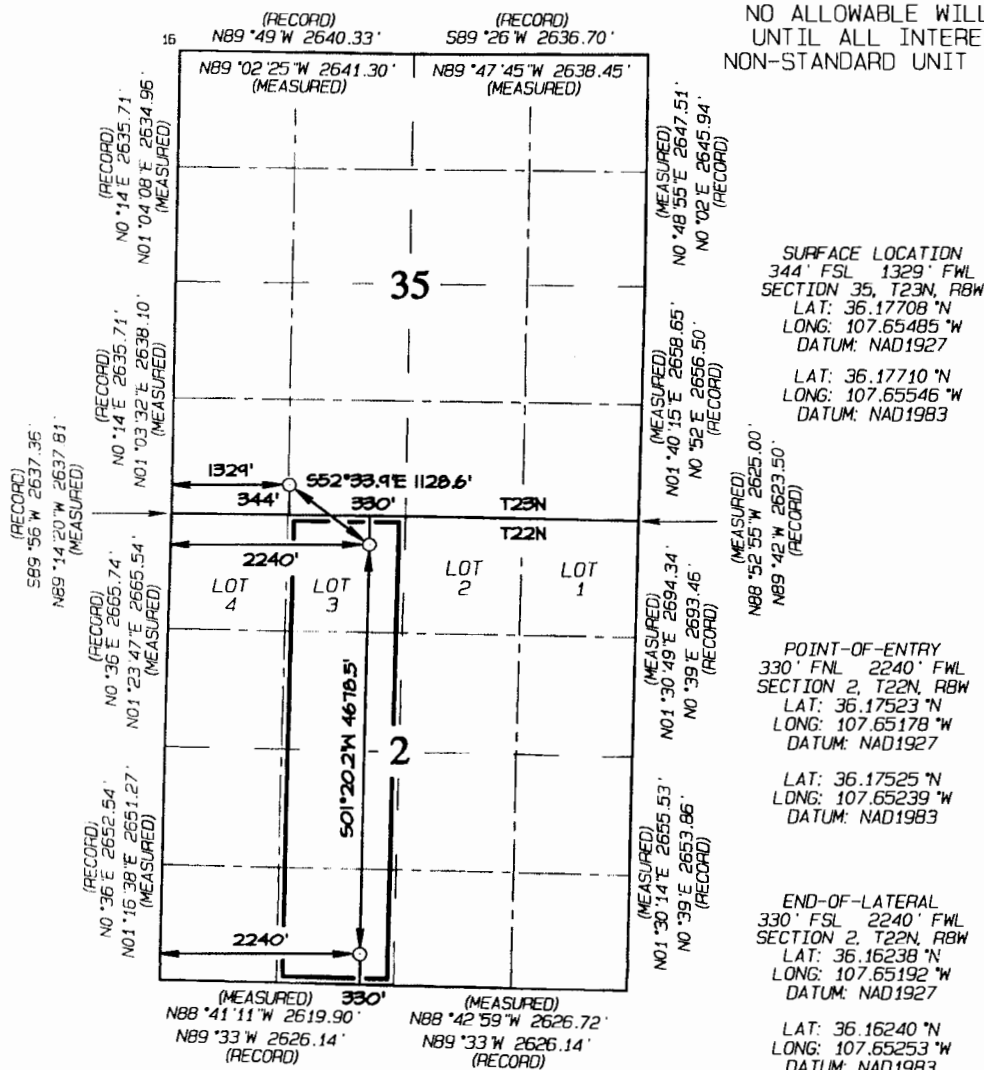
UL or lot no	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	35	23N	8W		344	SOUTH	1329	WEST	SAN JUAN

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	2	22N	8W		330	SOUTH	2240	WEST	SAN JUAN

¹² Dedicated Acres 160.70 Acres E/2 W/2 - Section 2	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
--	-------------------------------	----------------------------------	-------------------------

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¹⁷ OPERATOR CERTIFICATION

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Signature: *Jessica Gregg* Date: 7/24/14
Printed Name: Jessica Gregg
E-mail Address: Jessica.Gregg@encana.com

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 Revised: JANUARY 24, 2014
Survey Date: AUGUST 22, 2012

Signature and Seal of Professional Surveyor



Jason C. Edwards
Certificate Number 15269

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Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number	*Pool Code 1039	*Pool Name ALAMITO - GALLUP
*Property Code	*Property Name LYBROOK M35-2308	*Well Number 03H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.	*Elevation 6879'

¹⁰ Surface Location

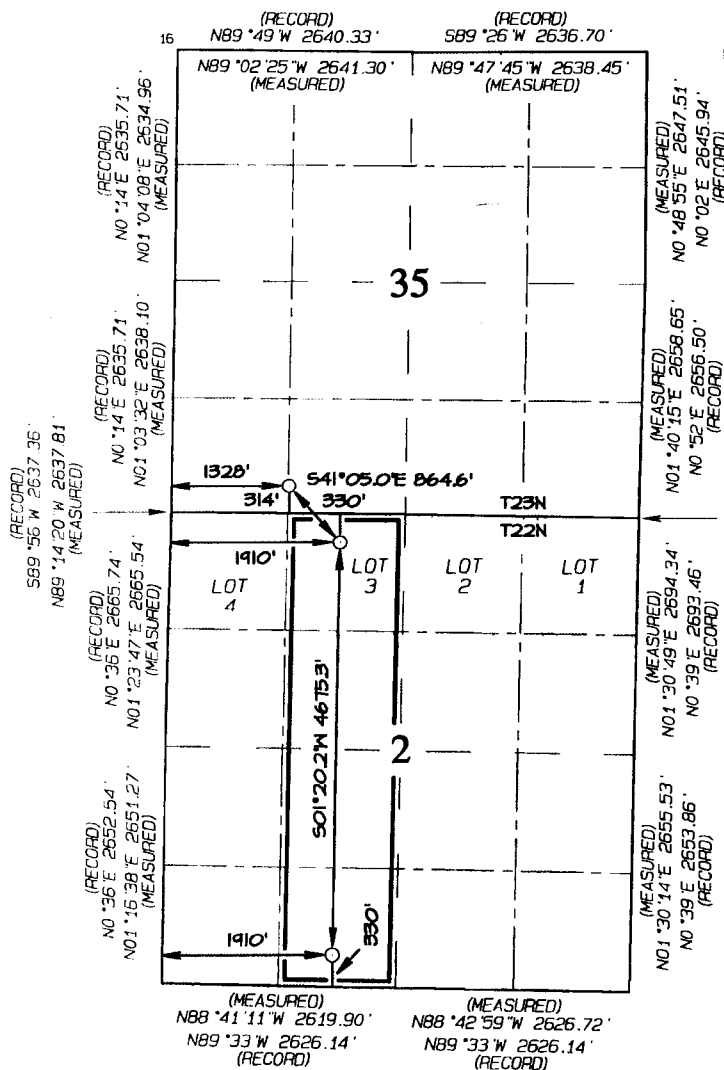
UL or lot no	Section	Township	Range	Lot Idh	Feet from the	North/South line	Feet from the	East/West line	County
N	35	23N	8W		314	SOUTH	1328	WEST	SAN JUAN

¹¹ Bottom Hole Location If Different From Surface

UL or lot no	Section	Township	Range	Lot Idh	Feet from the	North/South line	Feet from the	East/West line	County
N	2	22N	8W		330	SOUTH	1910	WEST	SAN JUAN

¹² Dedicated Acres 160.70 Acres E/2 W/2 - Section 2	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
--	-------------------------------	----------------------------------	-------------------------

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NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



SURFACE LOCATION
314' FSL 1328' FWL
SECTION 35, T23N, R8W
LAT: 36.17700°N
LONG: 107.65486°W
DATUM: NAD1927

LAT: 36.17701°N
LONG: 107.65547°W
DATUM: NAD1983

POINT-OF-ENTRY
330' FSL 1910' FWL
SECTION 2, T22N, R8W
LAT: 36.17523°N
LONG: 107.65290°W
DATUM: NAD1927

LAT: 36.17525°N
LONG: 107.65351°W
DATUM: NAD1983

END-OF-LATERAL
330' FSL 1910' FWL
SECTION 2, T22N, R8W
LAT: 36.16239°N
LONG: 107.65304°W
DATUM: NAD1927

LAT: 36.16241°N
LONG: 107.65365°W
DATUM: NAD1983

¹⁷ OPERATOR CERTIFICATION

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Jessica Gregg 7/24/14
Signature Date
Jessica Gregg
Printed Name
Jessica.Gregg@enlana.com
E-mail Address

¹⁸ SURVEYOR CERTIFICATION

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Date Revised: JANUARY 24, 2014
Survey Date: AUGUST 22, 2012

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

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Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number	*Pool Code 1039	*Pool Name ALAMITO - GALLUP
*Property Code	*Property Name LYBROOK M35-2308	*Well Number 04H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.	*Elevation 6879'

¹⁰ Surface Location

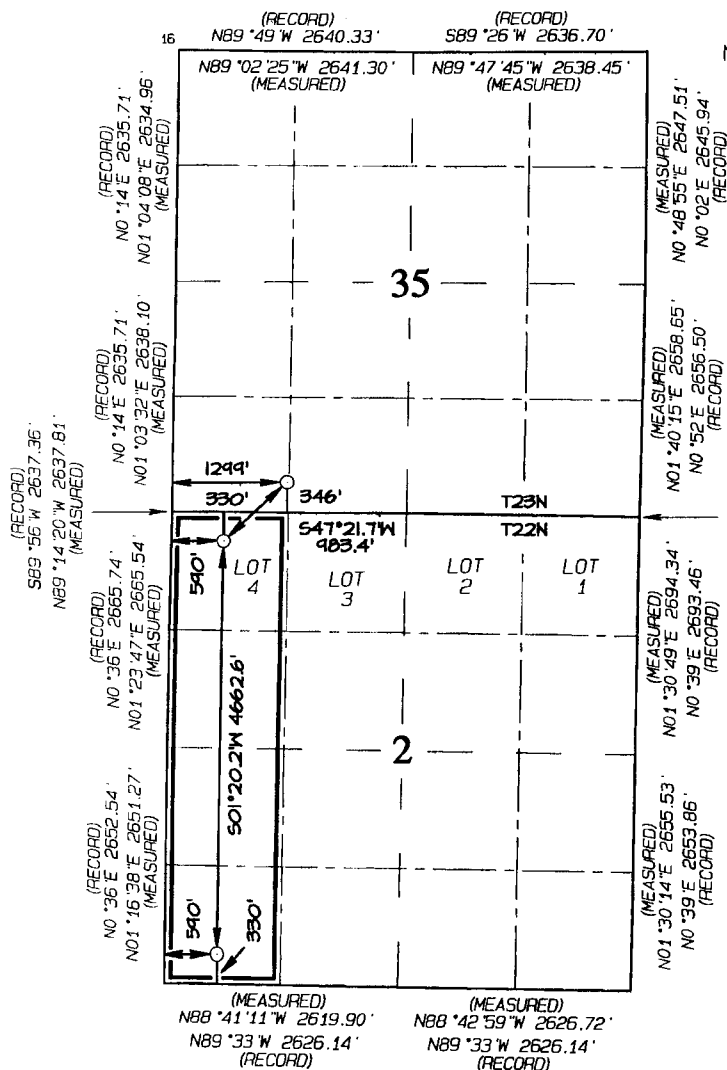
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	35	23N	8W		346	SOUTH	1299	WEST	SAN JUAN

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	2	22N	8W		330	SOUTH	590	WEST	SAN JUAN

¹² Dedicated Acres 160.50 Acres W/2 W/2 - Section 2	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
--	-------------------------------	----------------------------------	-------------------------

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SURFACE LOCATION
346' FSL 1299' FWL
SECTION 35, T23N, R8W
LAT: 36.17709° N
LONG: 107.65495° W
DATUM: NAD1927
LAT: 36.17710° N
LONG: 107.65556° W
DATUM: NAD1983

POINT-OF-ENTRY
330' FNL 590' FWL
SECTION 2, T22N, R8W
LAT: 36.17523° N
LONG: 107.65737° W
DATUM: NAD1927

LAT: 36.17524° N
LONG: 107.65798° W
DATUM: NAD1983

END-OF-LATERAL
330' FSL 590' FWL
SECTION 2, T22N, R8W
LAT: 36.16242° N
LONG: 107.65751° W
DATUM: NAD1927

LAT: 36.16244° N
LONG: 107.65812° W
DATUM: NAD1983

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.

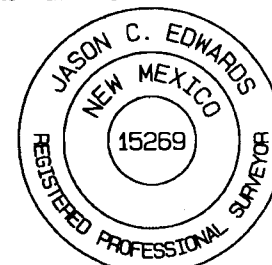
Signature: *Jessica Gregg* Date: 7/24/14
Printed Name: Jessica Gregg
E-mail Address: Jessica.Gregg@encana.com

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 Revised: JANUARY 24, 2014
Survey Date: AUGUST 22, 2012

Signature and Seal of Professional Surveyor



Jason C. Edwards
Certificate Number 15269

DISTRICT I
1680 N. French Dr., Hobbs, N.M. 88240
Phone: (505) 593-8181 Fax: (505) 593-0780

DISTRICT II
811 S. First St., Artesia, N.M. 88210
Phone: (505) 748-1883 Fax: (505) 748-9720

DISTRICT III
1000 Rio Bravo Rd., Arco, N.M. 87410
Phone: (505) 334-8176 Fax: (505) 334-8170

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OIL CONSERVATION DIVISION

1220 South St. Francis Dr.
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 97232	*Pool Name BASIN MANCOS
*Property Code	*Property Name LYBROOK 020-2307		*Well Number 01H
*OGRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.		*Elevation 6950.6'

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
0	20	23N	7W		913'	SOUTH	1695'	EAST	SANDOVAL

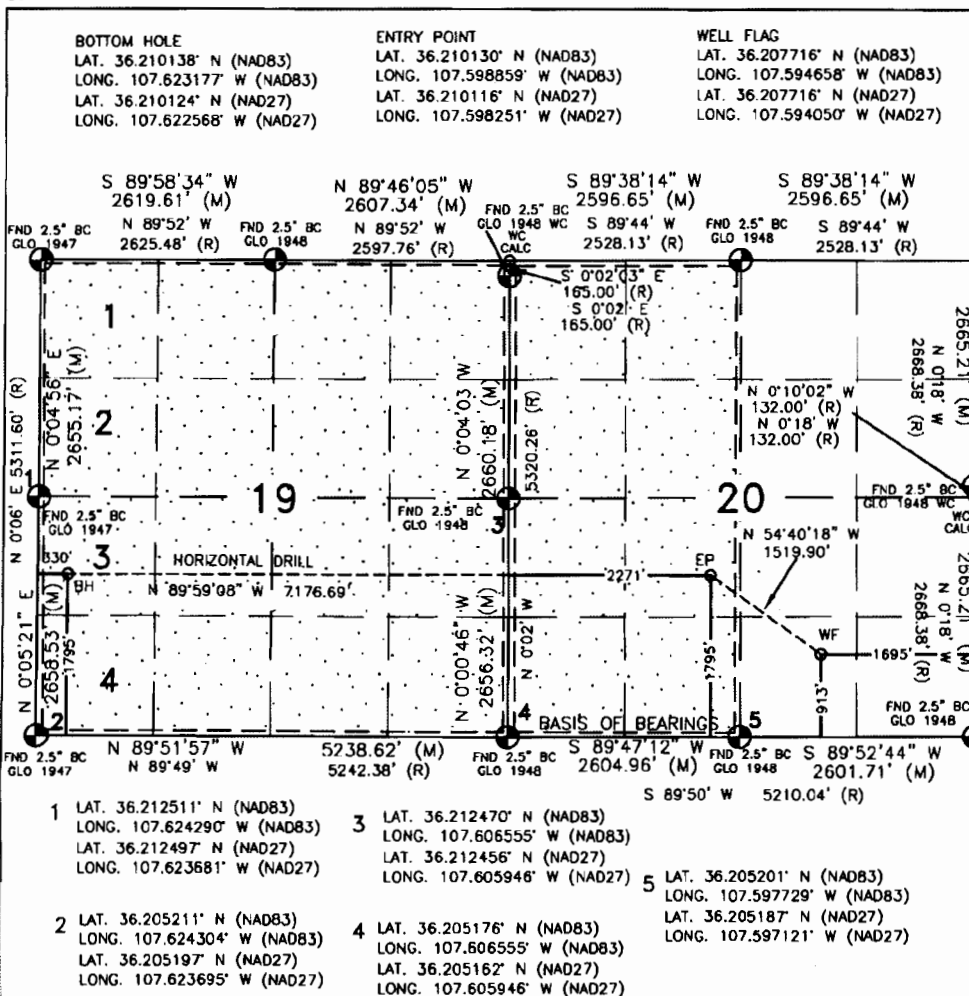
¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	19	23N	7W	3	1795'	SOUTH	330'	WEST	SANDOVAL

*Dedicated Acres 320.00 ACRES W/2 SEC. 20 640.00 ACRES ALL SEC. 19	*Joint or Infill	*Consolidation Code	*Order No.
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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

16



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: Jessica Gregg
Date: 7/24/14

Printed Name: Jessica Gregg

E-mail Address: Jessica.Gregg@encana.com

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.

JUNE 28, 2013

Date of Survey

Signature and Seal of Registered Surveyor:

DAVID RUSSELL

10201

REGISTERED PROFESSIONAL LAND SURVEYOR

DAVID RUSSELL

Certificate Number

10201

DISTRICT I
1695 W. French Dr., Hobbs, N.M. 88240
Phone: (575) 393-8181 Fax: (575) 393-0720

DISTRICT II
611 S. First St., Artesia, N.M. 88210
Phone: (575) 748-1883 Fax: (575) 748-9720

DISTRICT III
1000 Rio Bravo Rd., Arisco, N.M. 87410
Phone: (505) 334-8178 Fax: (505) 334-8170

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87506
Phone: (505) 478-3480 Fax: (505) 478-3482

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to appropriate
District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 97232	*Pool Name BASIN MANCOS
*Property Code	*Property Name LYBROOK 020-2307		*Well Number 02H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.		*Elevation 6950.6'

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
0	20	23N	7W		892'	SOUTH	1716'	EAST	SANDOVAL

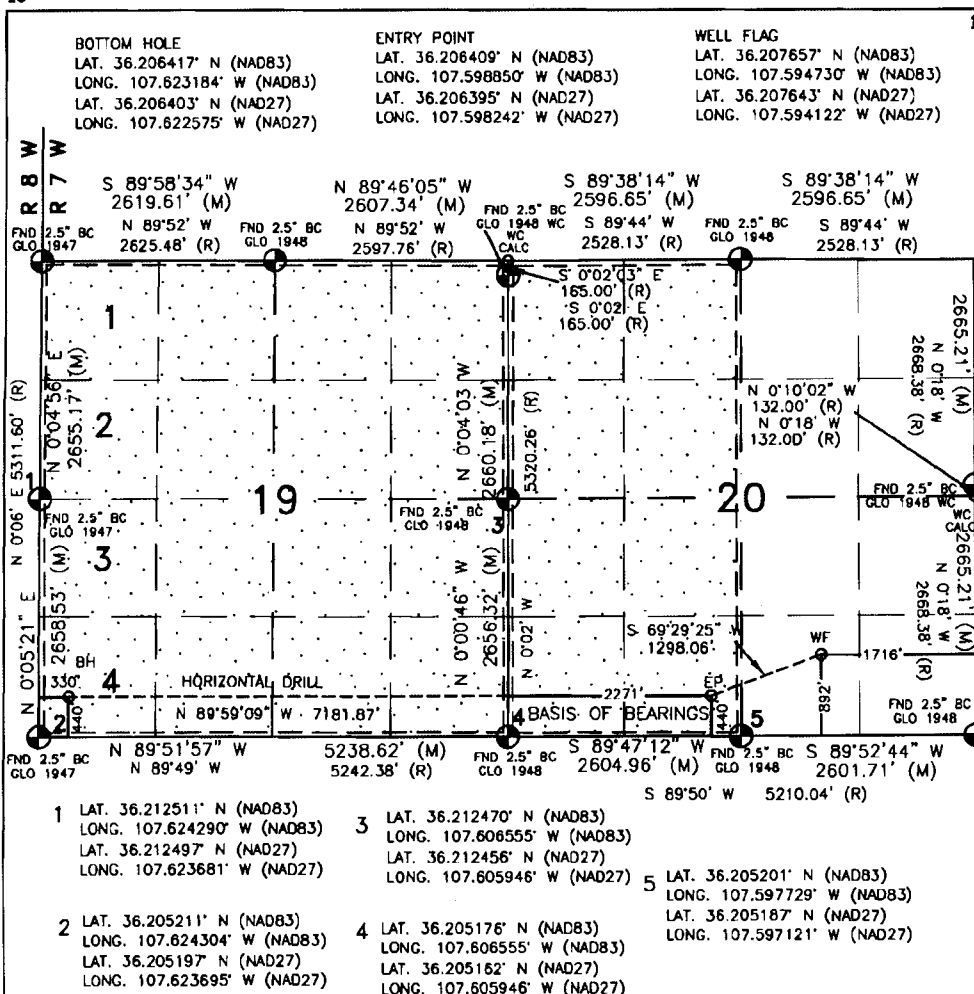
¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	19	23N	7W	4	440'	SOUTH	330'	WEST	SANDOVAL

¹² Dedicated Acres 320.00 ACRES W/2 SEC. 20 640.00 ACRES ALL SEC. 19	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
---	-------------------------------	----------------------------------	-------------------------

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

16



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.

Jessica Gregg 7/24/14
Signature Date
Jessica Gregg
Printed Name
Jessica.Gregg@encana.com
E-mail Address

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.

JUNE 28, 2013

Date of Survey

Signature and Seal of Registered Professional Surveyor:



DAVID RUSSELL

Certificate Number 10201

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

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 1039	³ Pool Name ALAMITO - GALLUP
⁴ Property Code	⁵ Property Name LYBROOK 035-2308	⁶ Well Number 01H
⁷ GRID No. 282327	⁸ Operator Name ENCANA OIL & GAS (USA) INC.	⁹ Elevation 6860'

¹⁰ Surface Location

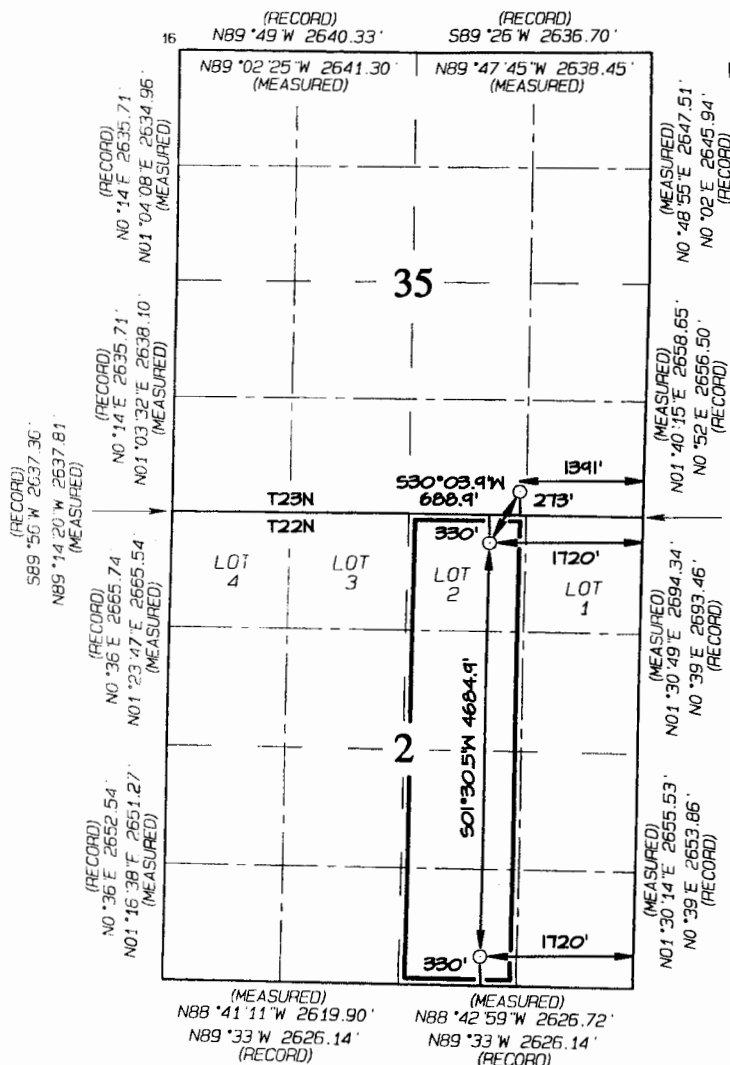
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	35	23N	8W		273	SOUTH	1391	EAST	SAN JUAN

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	2	22N	8W		330	SOUTH	1720	EAST	SAN JUAN

¹² Dedicated Acres 160.90 Acres W/2 E/2 - Section 2	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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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



SURFACE LOCATION
273' FSL 1391' FEL
SECTION 35, T23N, R8W
LAT: 36.17687°N
LONG: 107.64623°W
DATUM: NAD1927

LAT: 36.17689°N
LONG: 107.64684°W
DATUM: NAD1983

(MEASURED)
N01°40'15"E 2658.65'
N01°42'55"E 2625.00'
N01°30'49"E 2694.34'
N01°30'14"E 2655.53'
N01°36'14"E 2655.53'
N01°39'E 2653.86'
N01°39'E 2693.46'
N01°30'14"E 2655.53'
N01°39'E 2653.86'
N01°39'E 2693.46'
N01°30'14"E 2655.53'
N01°36'14"E 2655.53'
N01°39'E 2653.86'
N01°39'E 2693.46'
N01°30'14"E 2655.53'
N01°36'14"E 2655.53'
N01°39'E 2653.86'
N01°39'E 2693.46'

POINT-OF-ENTRY
330' FSL 1720' FEL
SECTION 2, T22N, R8W
LAT: 36.17522°N
LONG: 107.64737°W
DATUM: NAD1927

LAT: 36.17524°N
LONG: 107.64798°W
DATUM: NAD1983

END-OF-LATERAL
330' FSL 1720' FEL
SECTION 2, T22N, R8W
LAT: 36.16236°N
LONG: 107.64756°W
DATUM: NAD1927

LAT: 36.16237°N
LONG: 107.64817°W
DATUM: NAD1983

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.

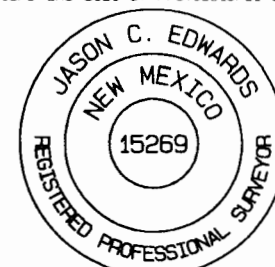
Signature: *Jessica Gregg* Date: 7/24/14
Printed Name: Jessica Gregg
E-mail Address: jessica.gregg@encana.com

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: JUNE 4, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS

Certificate Number 15269

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

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number		2 Pool Code 1039		3 Pool Name ALAMITO - GALLUP	
4 Property Code		5 Property Name LYBROOK 035-2308			6 Well Number 02H
7 GRID No. 282327		8 Operator Name ENCANA OIL & GAS (USA) INC.			9 Elevation 6860

10 Surface Location

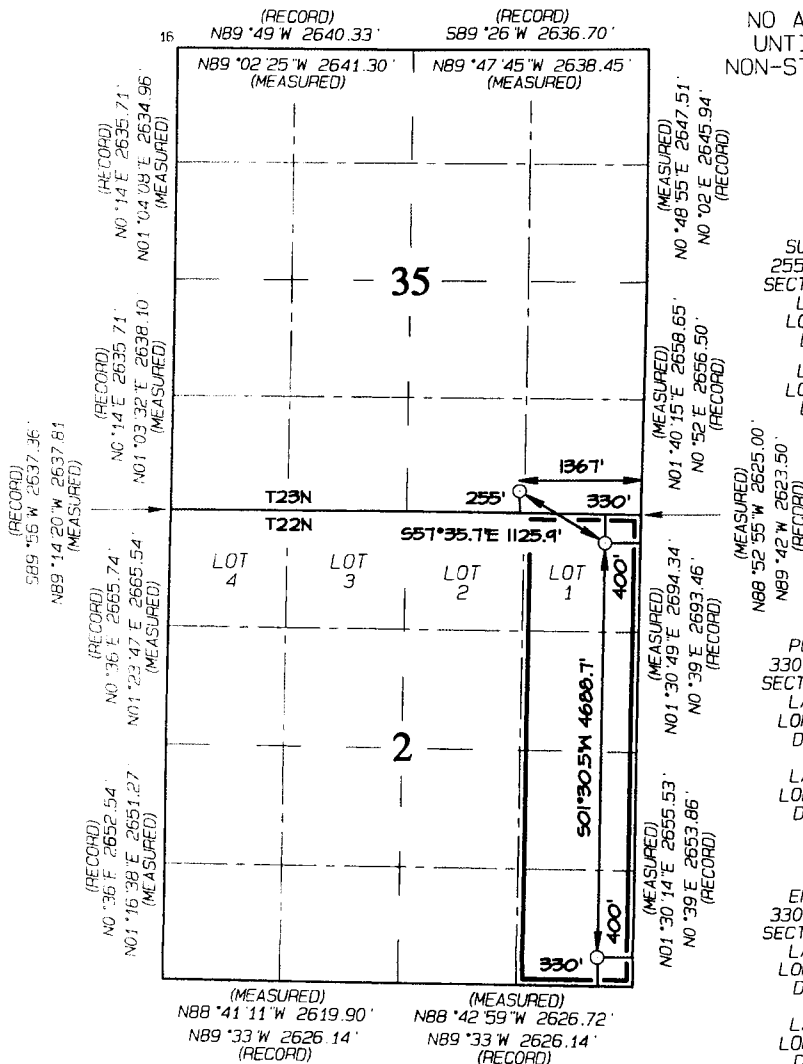
11 Lot or lot no	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	35	23N	8W		255	SOUTH	1367	EAST	SAN JUAN

11 Bottom Hole Location If Different From Surface

12 Lot or lot no	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	2	22N	8W		330	SOUTH	400	EAST	SAN JUAN

13 Dedicated Acres 161.10 Acres E/2 E/2 - Section 2					14 Joint or Infill	15 Consolidation Code	16 Order No.
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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



SURFACE LOCATION
255' FSL 1367' FEL
SECTION 35, T23N, R8W
LAT: 36.17682°N
LONG: 107.64615°W
DATUM: NAD1927

LAT: 36.17684°N
LONG: 107.64676°W
DATUM: NAD1983

POINT-OF-ENTRY
330' FNL 400' FEL
SECTION 2, T22N, R8W
LAT: 36.17520°N
LONG: 107.64290°W
DATUM: NAD1927

LAT: 36.17522°N
LONG: 107.64351°W
DATUM: NAD1983

END-OF-LATERAL
330' FSL 400' FEL
SECTION 2, T22N, R8W
LAT: 36.16233°N
LONG: 107.64309°W
DATUM: NAD1927

LAT: 36.16234°N
LONG: 107.64370°W
DATUM: NAD1983

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: *Jessica Gregg* Date: 7/24/14
Printed Name: Jessica Gregg
E-mail Address: Jessica.Gregg@enlana.com

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: JUNE 4, 2013
Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

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

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

Submit one copy to
Appropriate District Office

☐ AMENDED REPORT

N88°58'00"W 2626.35' (MEASURED)
N89°54'W 2620.53' (RECORD)

Certificate Number 15269

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

Submit one copy to
Appropriate District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 97232 / 1039	*Pool Name BASIN MANCOS / ALAMITO - GALLUP
*Property Code	*Property Name LYBROOK P2B-2307		*Well Number 02H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.		*Elevation 6940'

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	28	23N	7W		1318	SOUTH	43	EAST	SANDOVAL

¹¹ Bottom Hole Location If Different From Surface

U. or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	28	23N	7W		725	SOUTH	330	WEST	SANDOVAL

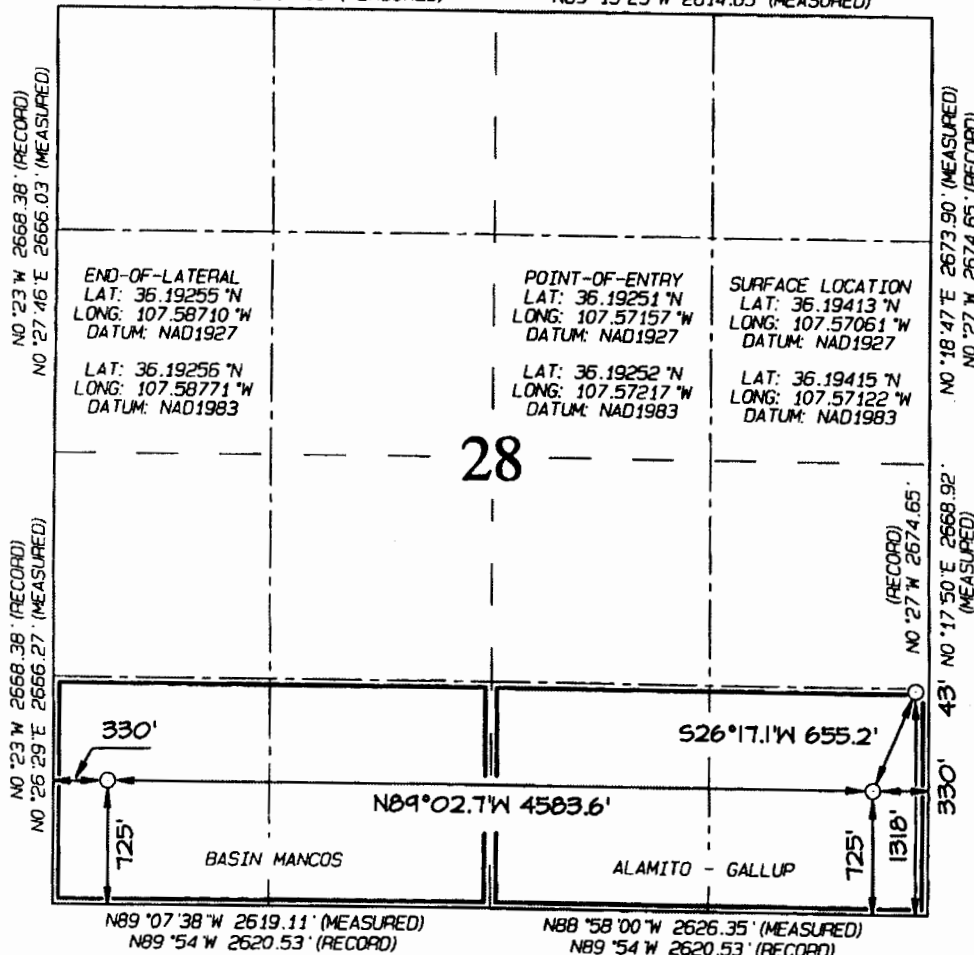
12 Dedicated Acres 160.00 Acres
S/2 S/2 - Section 28

¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
-------------------------------	----------------------------------	-------------------------

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

16 N89°53'W 2614.92' (RECORD)
N89°03'52"W 2617.05' (MEASURED)

N89°53'W 2614.92' (RECORD)
N89°15'23"W 2614.63' (MEASURED)



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 interest and that the pooling is a voluntary pooling agreement or a compulsory pooling order heretofore entered by the Division.

Signature: Holly Hill Date: 1/7/14

Holly Hill

Printed Name _____

holly.hill@encana.com

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 Revised: DECEMBER 12, 2013
Date Survey: OCTOBER 10, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269


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

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.

Survey Date: OCTOBER 3, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
NEW MEXICO
15269
REGISTERED PROFESSIONAL SURVEYOR

JASON C. EDWARDS

Certificate Number 15269

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

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3450 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 97232	*Pool Name BASIN MANCOS
*Property Code	*Property Name LYBROOK P31-2307		*Well Number 02H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.		*Elevation 6821'

¹⁰ Surface Location

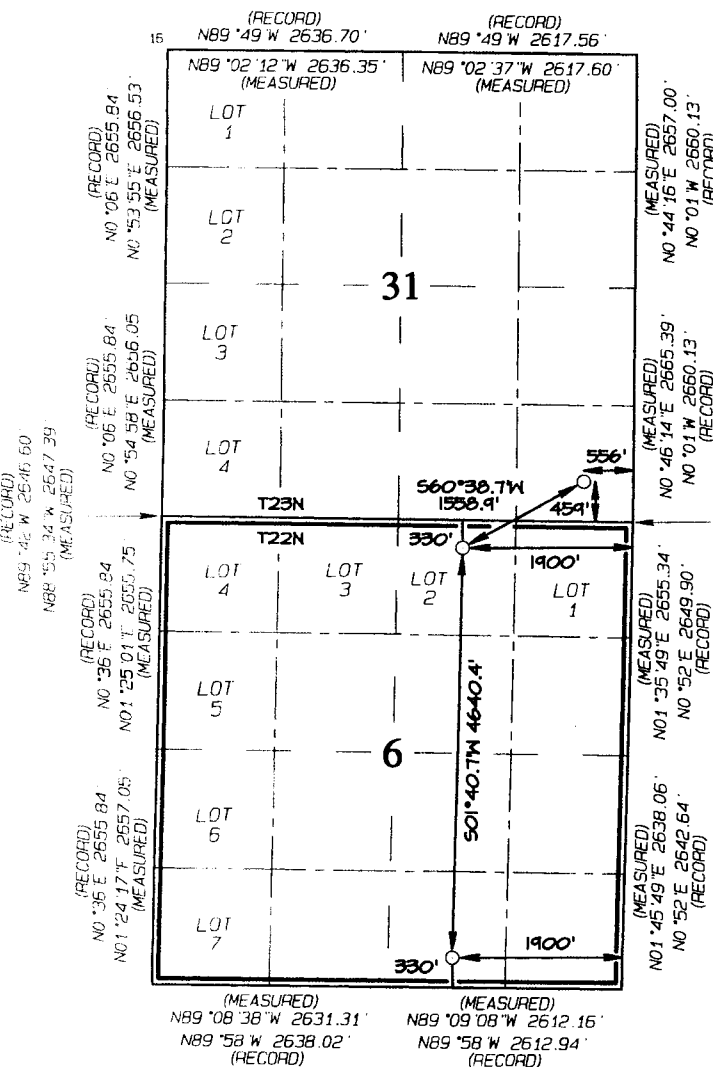
UL or lot no	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	31	23N	7W		459	SOUTH	556	EAST	SANDOVAL

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
0	6	22N	7W		330	SOUTH	1900	EAST	SANDOVAL

¹² Dedicated Acres 643.40 Acres Entire Section 6	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
---	-------------------------------	----------------------------------	-------------------------

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 LOCATION
459 FSL 556' FEL
SECTION 31, T23N, R7W
LAT: 36.17723°N
LONG: 107.60779°W
DATUM: NAD1927
LAT: 36.17725°N
LONG: 107.60840°W
DATUM: NAD1983

POINT-OF-ENTRY
330' FNL 1900' FEL
SECTION 6, T22N, R7W
LAT: 36.17508°N
LONG: 107.61236°W
DATUM: NAD1927
LAT: 36.17510°N
LONG: 107.61297°W
DATUM: NAD1983

END-OF-LATERAL
330' FSL 1900' FEL
SECTION 6, T22N, R7W
LAT: 36.16234°N
LONG: 107.61260°W
DATUM: NAD1927
LAT: 36.16235°N
LONG: 107.61321°W
DATUM: NAD1983

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.

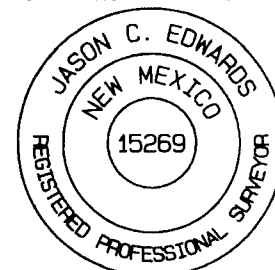
Jessica Gregg 7/24/14
Signature Date
Jessica Gregg
Printed Name
Jessica.Gregg@encana.com
E-mail Address

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.

Survey Date: OCTOBER 3, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

District 11
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

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

Submit one copy to
Appropriate District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 97232	*Pool Name BASIN MANCOS
*Property Code	*Property Name LYBROOK P31-2307		*Well Number 03H
*OERID No 282327	*Operator Name ENCANA OIL & GAS (USA) INC.		*Elevation 6821'

¹⁰ Surface Location

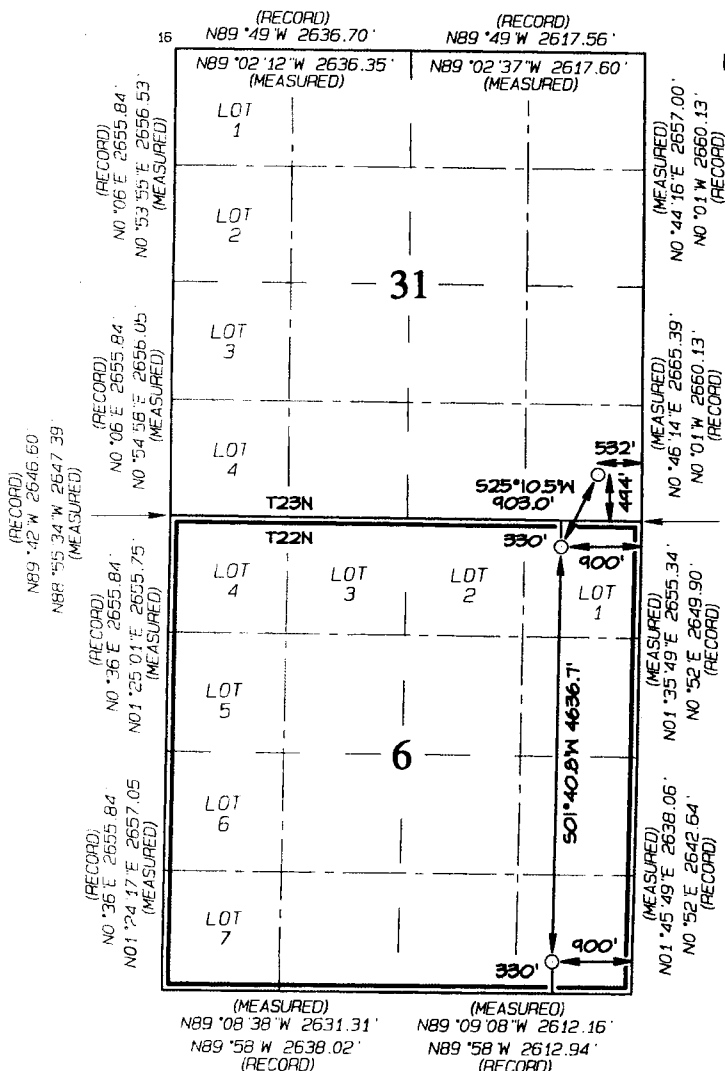
LA or lot no.	Section	Township	Range	Lot Ion	Feet from the	North/South line	Feet from the	East/West line	County
P	31	23N	7W		494	SOUTH	532	EAST	SANDOVAL

¹¹ Bottom Hole Location If Different From Surface

Lot or lot no	Section	Township	Range	Lot Ion	Feet from the	North/South line	Feet from the	East/West line	County
P	6	22N	7W		330	SOUTH	900	EAST	SANDOVAL

12 Dedicated Acres	643.40 Acres Entire Section 6	13 Joint or Infill	14 Consolidation Code	15 Order No.
--------------------	----------------------------------	--------------------	-----------------------	--------------

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 LOCATION
494' FSL 532' FEL
SECTION 31, T23N, R7W
LAT: 36.17733°N
LONG: 107.60771°W
DATUM: NAD1927

LAT: 36.17734°N
LONG: 107.60832°W
DATUM: NAD1983

POINT-OF-ENTRY
330' FNL 900' FEL
SECTION 6, T22N, R7W
LAT: 36.17507°N
LONG: 107.60897W
DATUM: NAD1927

LAT: 36.17508 °N
LONG: 107.60958 °W
DATUM: NAD1983

END-OF-LATERAL
330' FSL 900' FEL
SECTION 6, T22N, R7W
LAT: 36.16233°N
LONG: 107.60921°W
DATUM: NAD1927

LAT: 36.16235 °N
LONG: 107.60982 °W
DATUM: NAD1983

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 or agreement, or such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature Jessica Pegg Date 7/24/14

Printed Name Jessica Frey

E-mail Address Jessica.Greyg@encane.com

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.

Survey Date: OCTOBER 3, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS

Certificate Number 15269

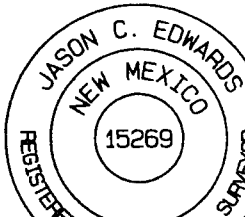
District IV
1220 S. 3rd Francis Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

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.

Survey Date: OCTOBER 3, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS

Certificate Number 15269

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

Submit one copy to
Appropriate District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

'API Number	'Pool Code 1039	'Pool Name ALAMITO - GALLUP
'Property Code	'Property Name LYBROOK P32-2307	'Well Number 01H
'OGRID No 282327	'Operator Name ENCANA OIL & GAS (USA) INC.	'Elevation 6874'

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	32	23N	7W		664	SOUTH	31	EAST	SANDOVAL

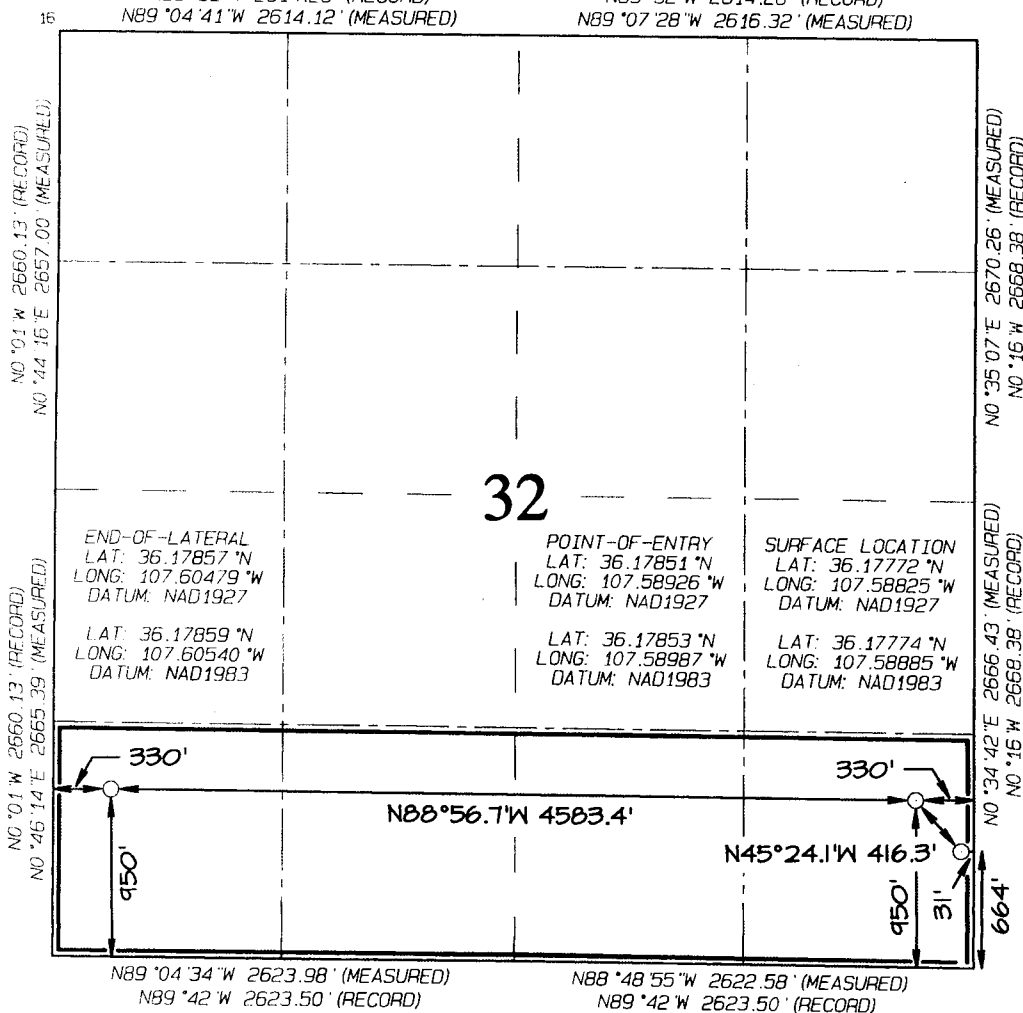
¹¹ Bottom Hole Location If Different From Surface

UL or lot no	Section	Township	Range	Lot 1st	Feet from the	North/South line	Feet from the	East/West line	County
M	32	23N	7W		950	SOUTH	330	WEST	SANDOVAL
12 Dedicated Acres					13 Joint or Infill	14 Consolidation Code	15 Order No.		
160.0 Acres - S/2 S/2									

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

N89°52'W 2614.26' (RECORD)
N89°04'41"W 2614.12' (MEASURED)

N89°52'W 2614.26' (RECORD)
N89°07'28"W 2616.32' (MEASURED)



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 unless 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 a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Holly Hill 8/26/13
Signature Date

Printed Name
Holly.Hill@encana.com

F-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 Revised: AUGUST 22, 2013
Date of Survey: JUNE 3, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

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

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

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1000 Rio Brazos Road, Aztec, NM 87410
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District IV
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State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 97232	*Pool Name BASIN MANCOS
*Property Code	*Property Name LYBROOK G30-2307		*Well Number 01H
*OGFID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.		*Elevation 7076'

¹⁰ Surface Location

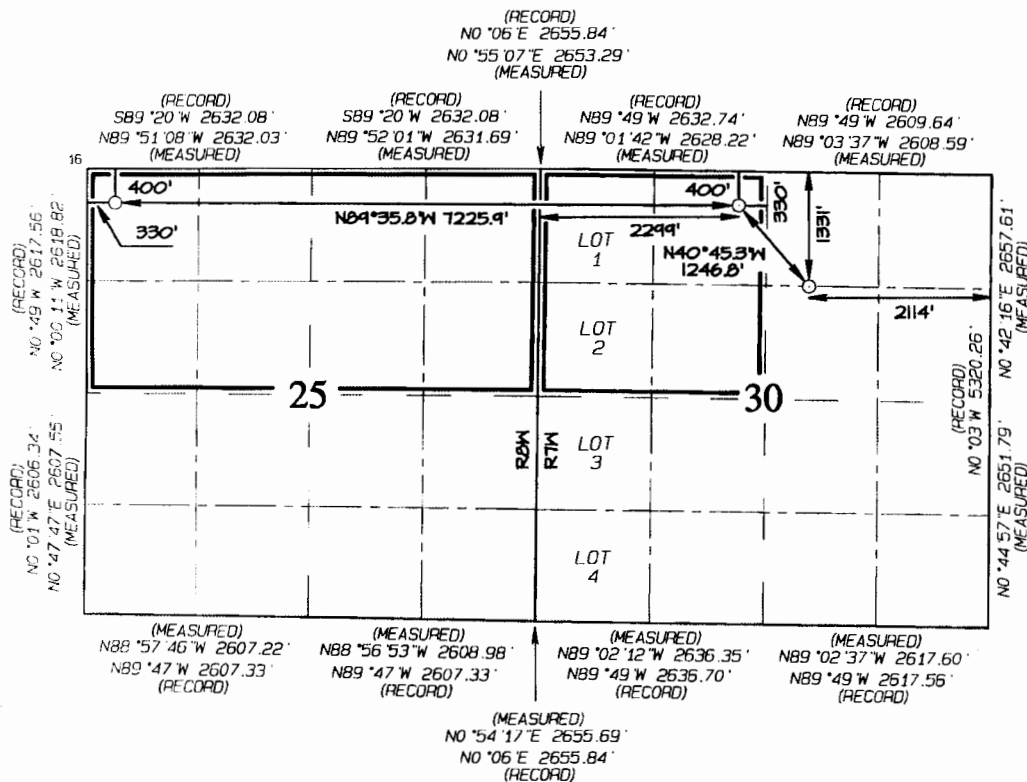
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
G	30	23N	7W		1331	NORTH	2114	EAST	SANDOVAL

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
D	25	23N	8W		400	NORTH	330	WEST	SAN JUAN

¹² Dedicated Acres 481.38 Acres	N/2 of Section 25 NW/4 of Section 30	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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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



END OF LATERAL
400' FNL 330' FNL
SECTION 25, T23N, R7W
LAT: 36.20395°N
LONG: 107.64039°W
DATUM: NAD1927

LAT: 36.20396°N
LONG: 107.64100°W
DATUM: NAD1983

POINT-OF-ENTRY
400' FNL 229' FNL
SECTION 30, T23N, R7W
LAT: 36.20409°N
LONG: 107.61591°W
DATUM: NAD1927

LAT: 36.20410°N
LONG: 107.61651°W
DATUM: NAD1983

SURFACE LOCATION
1331' FNL 2114' FEL
SECTION 30, T23N, R7W
LAT: 36.20152°N
LONG: 107.61310°W
DATUM: NAD1927

LAT: 36.20154°N
LONG: 107.61371°W
DATUM: NAD1983

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: *Jessica Gregg* Date: 7/24/14
Printed Name: Jessica Gregg
E-mail Address: *Jessica.Gregg@eniana.com*

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 Revised: APRIL 3, 2014
Survey Date: NOVEMBER 13, 2013
Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

District II
811 S. First Street, Artesia, NM 88210
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OIL CONSERVATION DIVISION
1220 South St. Francis Drive
Santa Fe, NM 87505

Submit one copy to
Appropriate District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number	*Pool Code 97232	*Pool Name BASIN MANCOS
*Property Code	*Property Name LYBROOK G30-2307	*Well Number 02H
*OGRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.	*Elevation 7076'

¹⁰ Surface Location

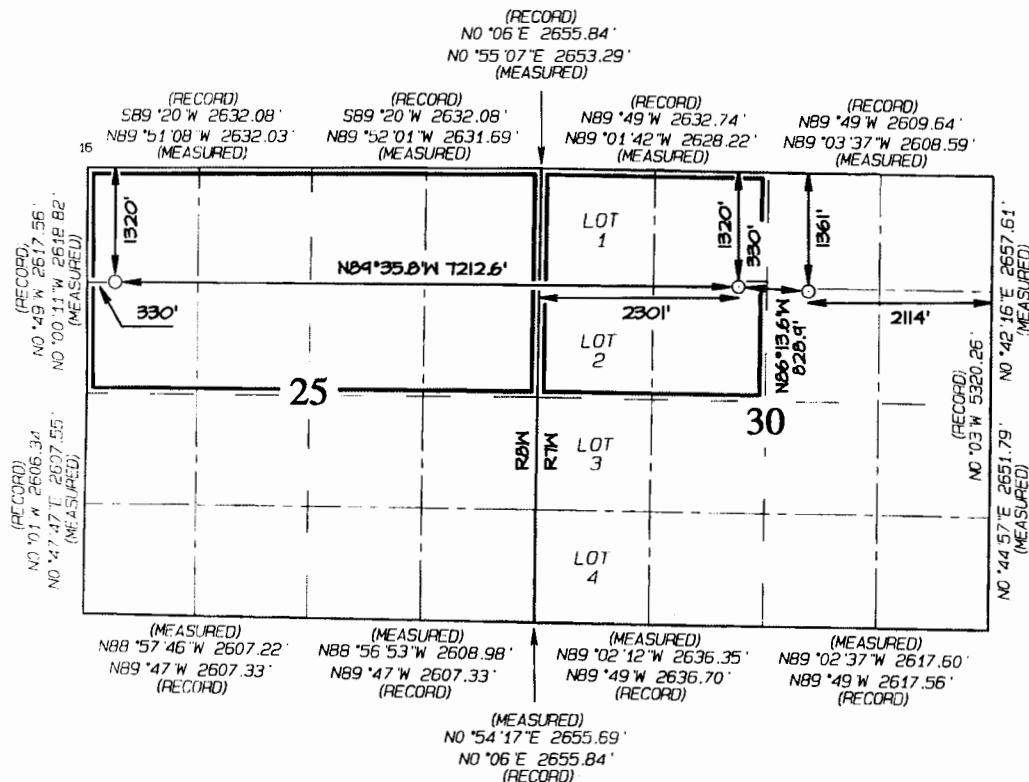
J. or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
G	30	23N	7W		1361	NORTH	2114	EAST	SANDOVAL

¹¹ Bottom Hole Location If Different From Surface

J. or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	25	23N	8W		1320	NORTH	330	WEST	SAN JUAN

12 Dedicated Acres 481.38 Acres	N/2 of Section 25 NW/4 of Section 30	13 Joint or Infill	14 Consolidation Code	15 Order No.
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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



END-OF-LATERAL
1320' FNL 330' FWL
SECTION 25, T23N, R8W
LAT: 36.20142°N
LONG: 107.64035°W
DATUM: NAD1927

LAT: 36.20143 *N
LONG: 107.64096 *W
DATUM: NAD1983

POINT-OF-ENTRY
1320' FNL 2301' FWL
SECTION 30, T23N, R7W
LAT: 36.20156°N
LONG: 107.61591°W
DATUM: NAD1927

LAT: 36.20157°N
LONG: 107.61652°W
DATUM: NAD1983

SURFACE LOCATION
1361' FNL 2114' FEL
SECTION 30, T23N, R7W
LAT: 36.20144 °N
LONG: 107.61310 °W
DATUM: NAD1927

LAT: 36.20146°N
LONG: 107.61371°W
DATUM: NAD1983

17 OPERATOR CERTIFICATION

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Jessica Gregg 7/24/14
Signature Date
Jessica Gregg
Printed Name
Jessica.Gregg@encana.com
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 Revised: APRIL 3, 2014
 Survey Date: NOVEMBER 13, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number: 15269

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

Submit one copy to
Appropriate District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

AMENDED REPORT

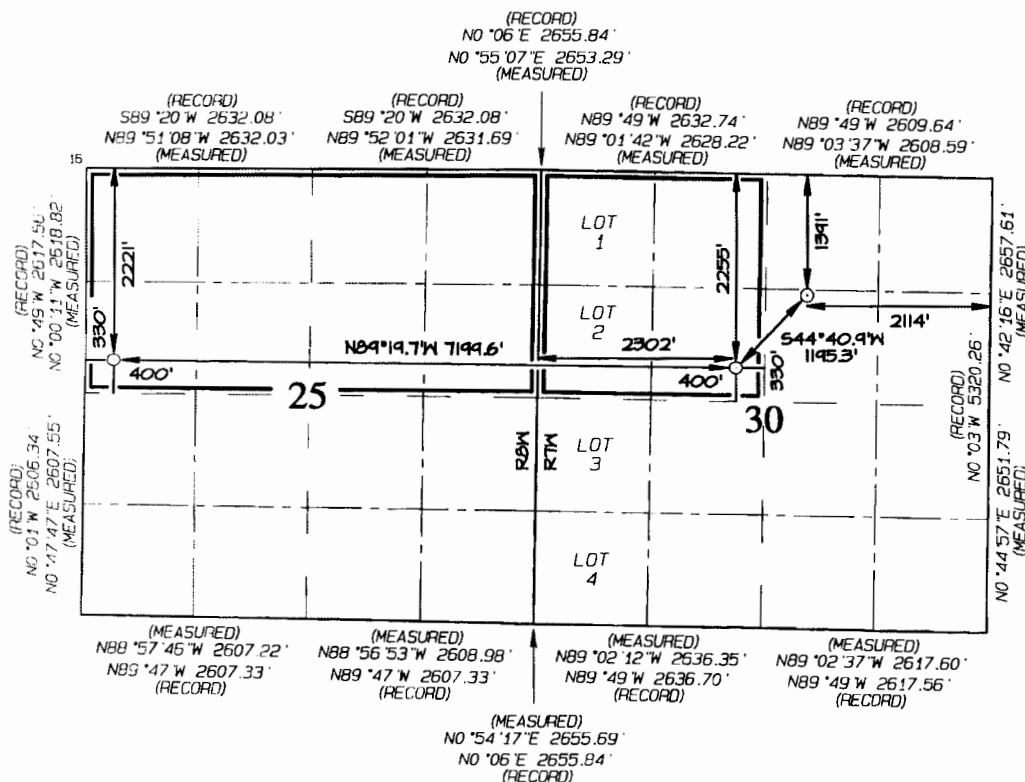
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1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 97232		*Pool Name BASIN MANCOS					
*Property Code		*Property Name LYBROOK G30-2307						*Well Number 03H	
*OGRID No. 282327		*Operator Name ENCANA OIL & GAS (USA) INC.						*Elevation 7076'	
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
G	30	23N	7W		1391	NORTH	2114	EAST	SANDOVAL
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
G	25	23N	8W		2221	NORTH	330	WEST	SAN JUAN
12 Dedicated Acres 481.38 Acres					13 Joint or Infill		14 Consolidation Code		15 Order No.
N/2 of Section 25 NW/4 of Section 30									

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



END-OF-LATERAL
2221' FNL 330' FWL
SECTION 25, T23N, R8W
LAT: 36.19894°N
LONG: 107.64030°W
DATUM: NAD1927

LAT: 36.19896°N
LONG: 107.64091°W
DATUM: NAD1983

POINT-OF-ENTRY
2255' FNL 2302' FWL
SECTION 30, T23N, R7W

LAT: 36.19899 °N
LONG: 107.61591 °W
DATUM: NAD1927

LAT: 36.19901 °N
LONG: 107.61652 °W
DATUM: NAD1983

SURFACE LOCATION
1391' FNL 2114' FEL
SECTION 30 T23N R7W

LAT: 36.20136°N
LONG: 107.61310°W
DATUM: NAD1927

LAT: 36.20137°N
LONG: 107.61371°W
DATUM: NAD1983

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, or a lease, or a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature Jessica Trage Date 7/24/14

Printed Name Jessica Gregg

E-mail Address Jessica.Gregg@encana.com

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 Revised: APRIL 3, 2014
Survey Date: NOVEMBER 13, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

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

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Phone: (505) 334-6178 Fax: (505) 334-6170

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

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

'API Number	'Pool Code 97232	'Pool Name BASIN MANCOS
'Property Code	'Property Name LYBROOK G30--2307	'Well Number 04H
'OGRID No. 282327	'Operator Name ENCANA OIL & GAS (USA) INC.	'Elevation 7079'

¹⁰ Surface Location

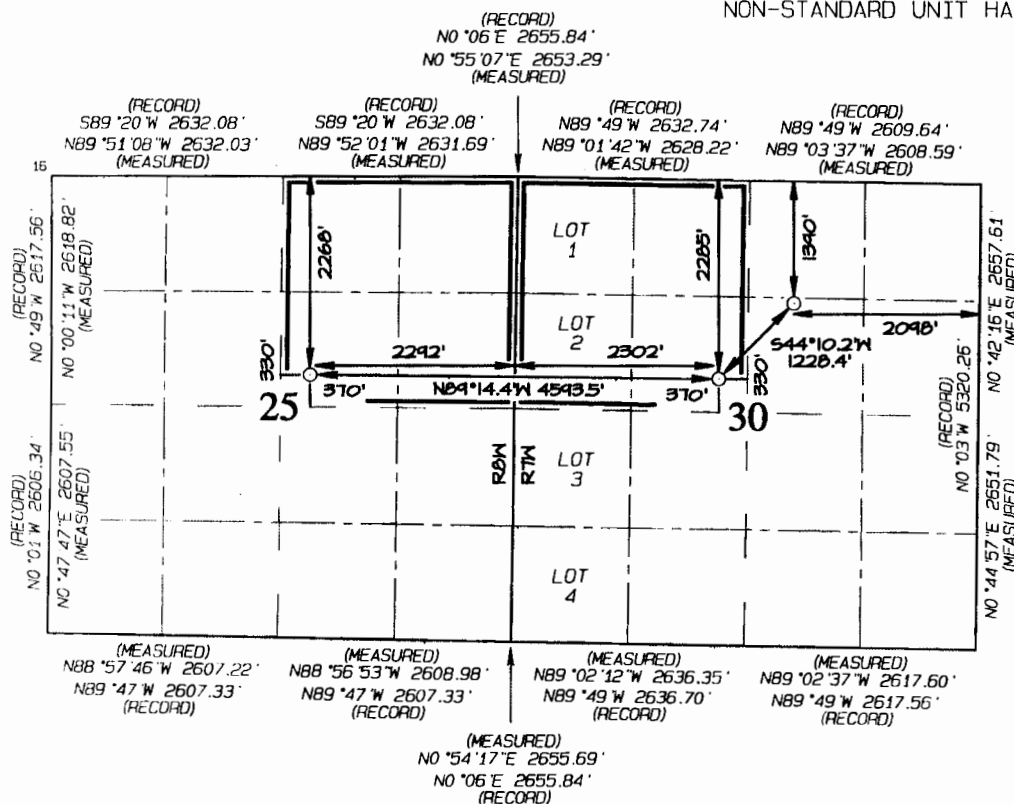
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
G	30	23N	7W		1390	NORTH	2098	EAST	SANDOVAL

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
G	25	23N	8W		2268	NORTH	2292	EAST	SAN JUAN

12	Dedicated Acres	NE/4 of Section 25	13	Joint or Infill	14	Consolidation Code	15	Order No.
	321.38 Acres	NW/4 of Section 30						

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



END-OF-LATERAL
2268' FNL 2292' FEL
SECTION 25, T23N, R8W
LAT: 36.19890°N
LONG: 107.63147°W
DATUM: NAD1927

LAT: 36.19891°N
LONG: 107.63208°W
DATUM: NAD1983

POINT-OF-ENTRY
2285' FNL 2302' FWL
SECTION 30, T23N, R7W
LAT: 36.19891°N
LONG: 107.61591°W
DATUM: NAD1927

LAT: 36.19892 *N
LONG: 107.61652 *W
DATUM: NAD1983

SURFACE LOCATION
1390' FNL 2098' FEL
SECTION 30, T23N, R7W
LAT: 36.20136°N
LONG: 107.61305°W
DATUM: NAD1927

LAT: 36.20138 *N
LONG: 107.61366 *W
DATUM: NAD1983

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 James Prigg Date 7/24/14

Signature Jessica Gregg Date _____
Printed Name _____

E-mail Address Jessica.Gragg@tntiana.com

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 Revised: FEBRUARY 7, 2014
Survey Date: NOVEMBER 13, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

District II
811 S. First Street, 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

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

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number	*Pool Code 97232	*Pool Name BASIN MANCOS
*Property Code	*Property Name LYBROOK G31-2307	*Well Number 01H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.	*Elevation 6995'

¹⁰ Surface Location

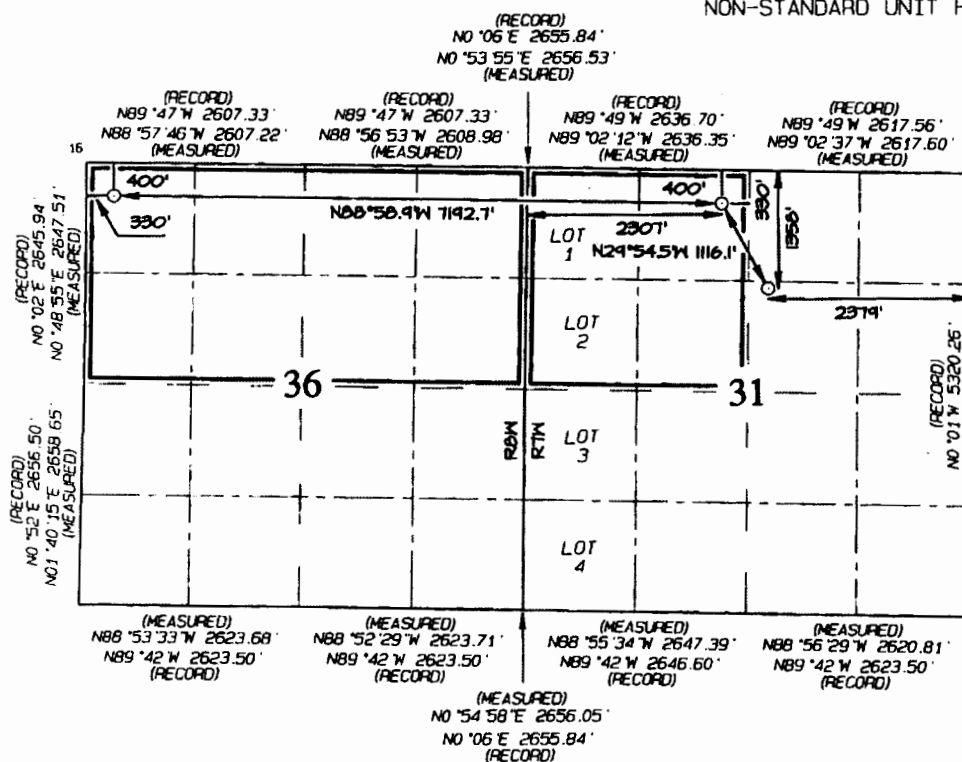
U. or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
G	31	23N	7W		1358	NORTH	2379	EAST	SANDOVAL

¹¹ Bottom Hole Location If Different From Surface

U. or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	36	23N	8W		400	NORTH	330	WEST	SAN JUAN

12 Dedicated Acres 481.24 Acres	NW/4 of Section 31 N/2 of Section 36	13 Joint or Infill	14 Consolidation Code	15 Order No.
------------------------------------	---	--------------------	-----------------------	--------------

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



END-OF-LATERAL
400 FNL 330 FWL
SECTION 36, T23N, R8W
LAT: 36.18958 'N
LONG: 107.64028 'W
DATUM: NAD1927

LAT: 36.18959 'N
LONG: 107.64089 'W
DATUM: NAD1983

POINT-OF-ENTRY
400' FWL 2307' FWL
SECTION 31, T23N, R7W
LAT: 36.18951°N
LONG: 107.61591°W
DATUM: NAD1927

LAT: 36.18952°N
LONG: 107.61652°W
DATUM: NAD1983

SURFACE LOCATION
1358' FNL 2379' FEL
SECTION 31, T23N, R7W
LAT: 36.18687°N
LONG: 107.61398°W
DATUM: NAD1927

LAT: 36.18688°N
LONG: 107.61459°W
DATUM: NAD1983

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 or an agreement with a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

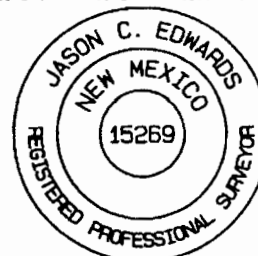
Signature Holly Hill Date 5/22/14
Printed Name Holly Hill
E-mail Address holly.hill@pencare.com

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 Revised: APRIL 15, 2014
Survey Date: NOVEMBER 12, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

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

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State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code	*Pool Name
		97232	BASIN MANCOS
*Property Code	*Property Name		*Well Number
	LYBROOK 631-2307		02H
*OGRID No.	*Operator Name		*Elevation
282327	ENCANA OIL & GAS (USA) INC.		6995'

¹⁰ Surface Location

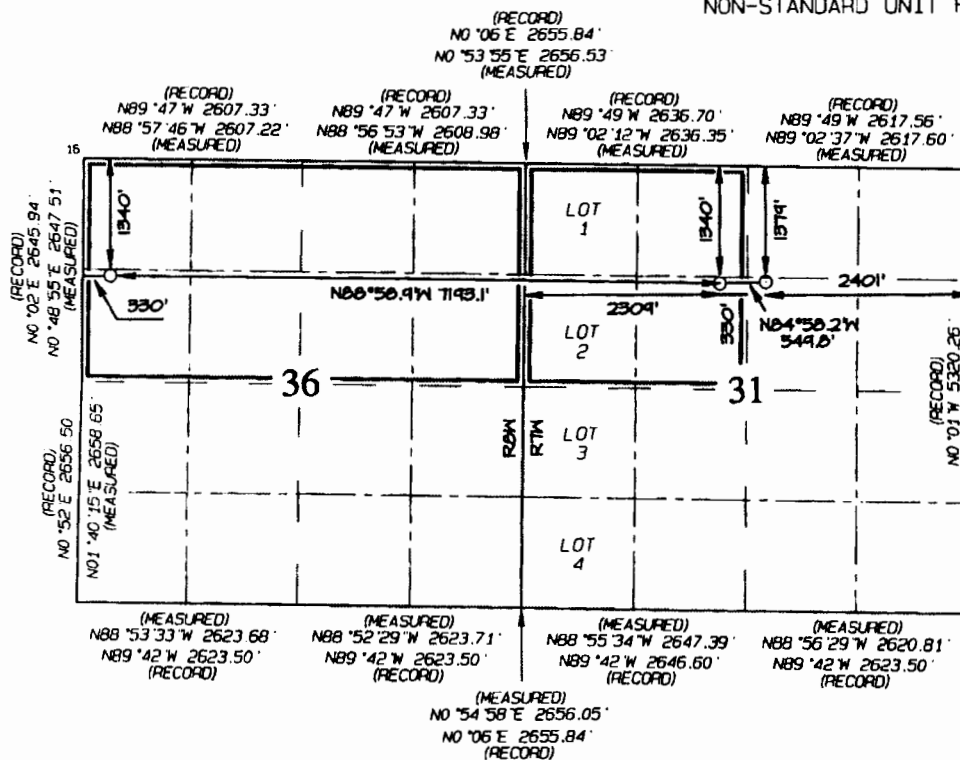
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
G	31	23N	7W		1379	NORTH	2401	EAST	SANDOVAL

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
G	36	23N	8W		1340	NORTH	330	WEST	SAN JUAN

¹² Dedicated Acres	NW/4 of Section 31 N/2 of Section 36	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
481.24 Acres				

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



END-OF-LATERAL
1340' FNL 330' FNL
SECTION 36, T23N, R7W
LAT: 36.18699°N
LONG: 107.64028°W
DATUM: NAD1927

LAT: 36.18701°N
LONG: 107.64089°W
DATUM: NAD1983

POINT-OF-ENTRY
1340' FNL 2309' FNL
SECTION 31, T23N, R7W
LAT: 36.18692°N
LONG: 107.61591°W
DATUM: NAD1927

LAT: 36.18684°N
LONG: 107.61652°W
DATUM: NAD1983

SURFACE LOCATION
1379' FNL 2401' FEL
SECTION 31, T23N, R7W
LAT: 36.18681°N
LONG: 107.61405°W
DATUM: NAD1927

LAT: 36.18683°N
LONG: 107.61466°W
DATUM: NAD1983

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: Holly Hill Date: 5/22/14
Printed Name: Holly Hill
E-mail Address: holly.hill@encana.com

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 Revised: APRIL 15, 2014
Survey Date: NOVEMBER 12, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

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1525 N. French Drive, Hobbs, NM 88240
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State of New Mexico
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Revised August 1, 2011

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1220 South St. Francis Drive
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code	*Pool Name
		97232	BASIN MANCOS
*Property Code	*Property Name		*Well Number
	LYBROOK G31-2307		03H
*GRID No.	*Operator Name		*Elevation
282327	ENCANA OIL & GAS (USA) INC.		6995'

10 Surface Location

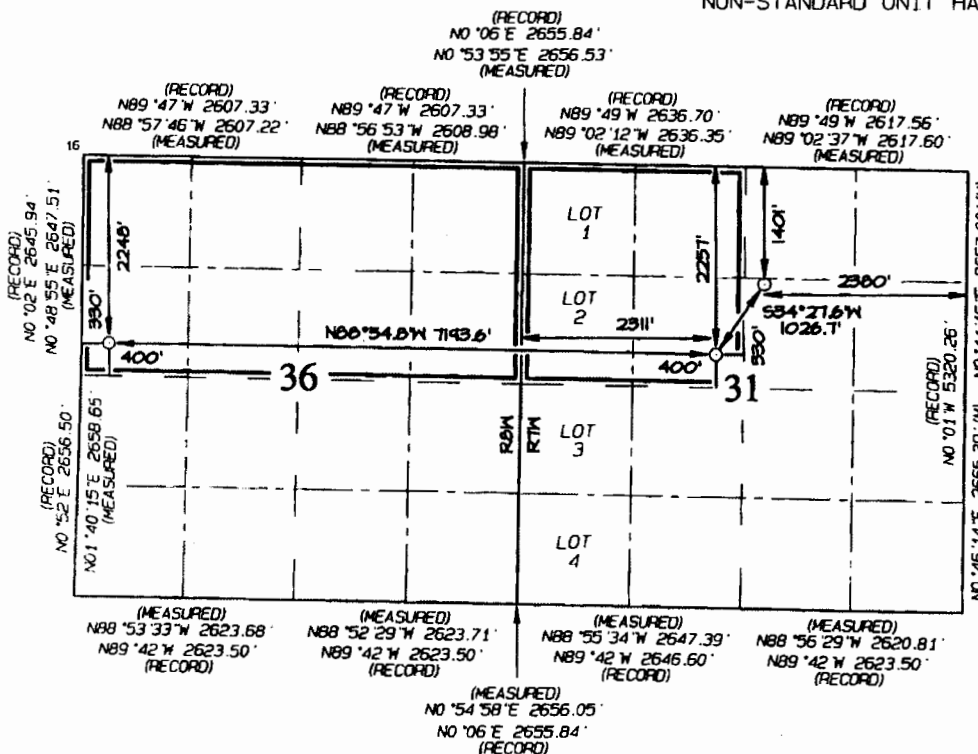
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
G	31	23N	7W		1401	NORTH	2380	EAST	SANDOVAL

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
E	36	23N	8W		2248	NORTH	330	WEST	SAN JUAN

*Dedicated Acres		*Joint or Infill		*Consolidation Code		*Order No.	
481.24 Acres NW/4 of Section 31 N/2 of Section 36							

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



END-OF-LATERAL
2248' FNL 330' FNL
SECTION 36, T23N, R7W
LAT: 36.18450°N
LONG: 107.64028°W
DATUM: NAD1927

LAT: 36.18451°N
LONG: 107.64089°W
DATUM: NAD1983

POINT-OF-ENTRY
2257' FNL 2311' FNL
SECTION 31, T23N, R7W
LAT: 36.18441°N
LONG: 107.61591°W
DATUM: NAD1927

LAT: 36.18442°N
LONG: 107.61652°W
DATUM: NAD1983

SURFACE LOCATION
1401' FNL 2380' FEL
SECTION 31, T23N, R7W
LAT: 36.18675°N
LONG: 107.61398°W
DATUM: NAD1927

LAT: 36.18677°N
LONG: 107.61459°W
DATUM: NAD1983

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: John Hill Date: 5/22/14
Printed Name: John Hill
E-mail Address: john.hill@encana.com

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 Revised: APRIL 16, 2014
Survey Date: NOVEMBER 12, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

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

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

OIL CONSERVATION DIVISION

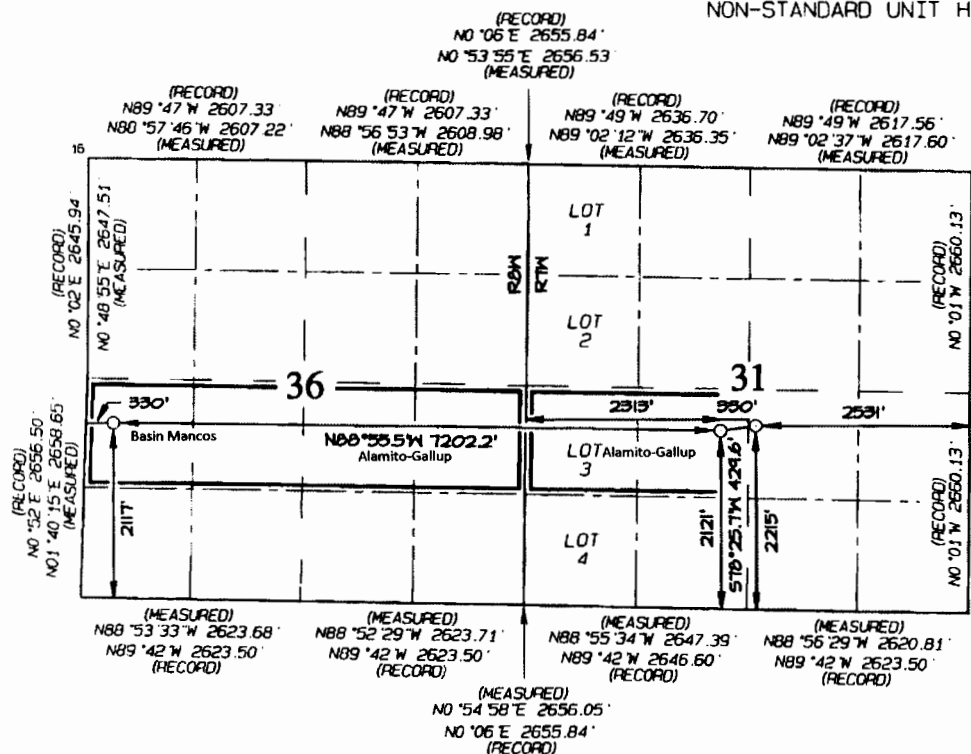
1220 South St. Francis Drive
Santa Fe, NM 87505

☒ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number 30-043-21214		*Pool Code 97232/1039		*Pool Name Basin Mancos Gas/Alamito-Gallup					
*Property Code		*Property Name LYBROOK J31-2307						*Well Number 01H	
*GRID No. 282327		*Operator Name ENCANA OIL & GAS (USA) INC.						*Elevation 6974'	
10 Surface Location									
UL or lot no. J	Section 31	Township 23N	Range 7W	Lot Idn	Feet from the 2215	North/South line SOUTH	Feet from the 2531	East/West line EAST	County SANDOVAL
11 Bottom Hole Location If Different From Surface									
UL or lot no. L	Section 36	Township 23N	Range 8W	Lot Idn	Feet from the 2117	North/South line SOUTH	Feet from the 330	East/West line WEST	County SAN JUAN
12 Dedicated Acres N2SW Sec 31, N2SE Sec 36 - Alamito-Gallup 160.65; N2SW Sec 36 - Basin Mancos (80 ac)		13 Joint or Infill		14 Consolidation Code		15 Order No.			

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



END-OF-LATERAL
2117' FSL 330' FWL
SECTION 36, T23N, R8W
LAT: 36.18191°N
LONG: 107.64031°W
DATUM: NAD1927

LAT: 36.18193°N
LONG: 107.64092°W
DATUM: NAD1983

POINT-OF-ENTRY
2121' FSL 2313' FWL
SECTION 31, T23N, R7W
LAT: 36.18182°N
LONG: 107.61591°W
DATUM: NAD1927

LAT: 36.18184°N
LONG: 107.61652°W
DATUM: NAD1983

SURFACE LOCATION
2215' FSL 2531' FEL
SECTION 31, T23N, R7W
LAT: 36.18208°N
LONG: 107.61449°W
DATUM: NAD1927

LAT: 36.18209°N
LONG: 107.61509°W
DATUM: NAD1983

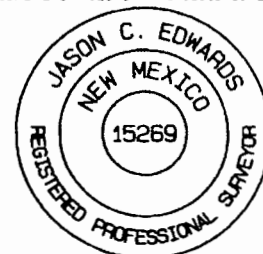
17 OPERATOR CERTIFICATION
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom-hole location or has a right to 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: Holly Hill Date: 5/22/14
Printed Name: Holly Hill
E-mail Address: holly.hill@encana.com

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 Revised: APRIL 15, 2014
Survey Date: NOVEMBER 12, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

District II
811 S. First Street, 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 Drive, Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

Submit one copy to
Appropriate District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number	*Pool Code 1039	*Pool Name ALAMITO - GALLUP
*Property Code	*Property Name LYBROOK J31-2307	*Well Number 02H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.	*Elevation 6974'

10 Surface Location

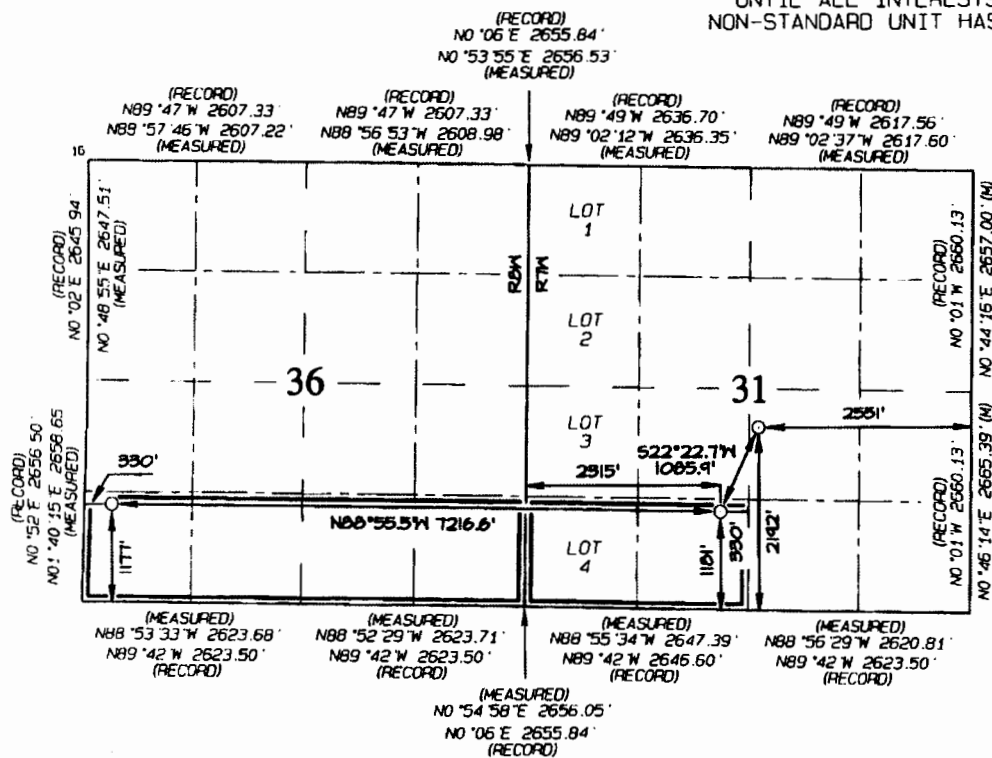
UL or lot no	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	31	23N	7W		2192	SOUTH	2551	EAST	SANDOVAL

¹¹ Bottom Hole Location If Different From Surface

U. or lot no.	Section	Township	Range	Lot idn	Feet from the	North/South line	Feet from the	East/West line	County
0	36	23N	8W		1177	SOUTH	330	WEST	SAN JUAN

12 Dedicated Acres	S/2 SW/4 Section 31	13 Joint or Infill	14 Consolidation Code	15 Order No.
240.67 Acres	S/2 S/2 Section 36			

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



END-OF-LATERAL
1177' FSL 330' FWL
SECTION 36, T23N, R8W
LAT: 36.17933 'N
LONG: 107.64035 'W
DATUM: NAD1927

LAT: 36.17935 'N
LONG: 107.64096 'W
DATUM: NAD1983

POINT-OF-ENTRY
1181 FSL 2315 FWL
SECTION 31, T23N, R7W
LAT: 36.17924°N
LONG: 107.61591°W
DATUM: NAD1927

LAT: 36.17926°N
LONG: 107.61651°W
DATUM: NAD1983

SURFACE LOCATION
2192' FSL 2551' FEL
SECTION 31, T23N, R7W
LAT: 36.18202°N
LONG: 107.61455°W
DATUM: NAD1927

LAT: 36.18203°N
LONG: 107.61516°W
DATUM: NAD1983

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, can or can such a mineral or working interest or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Holly Hill 5/22/14
 Signature Date
 Holly Hill
 Printed Name
 holly.hill@pencana.com
 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 Revised: APRIL 15, 2014
Survey Date: NOVEMBER 12, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

District I
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State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number	*Pool Code 97232 / 1039	*Pool Name BASIN MANCOS / ALAMITO - GALLUP
*Property Code	*Property Name LYBROOK 030-2307	*Well Number 01H
*GRID No. 282327	*Operator Name ENCANA OIL & GAS (USA) INC.	*Elevation 7023'

¹⁰ Surface Location

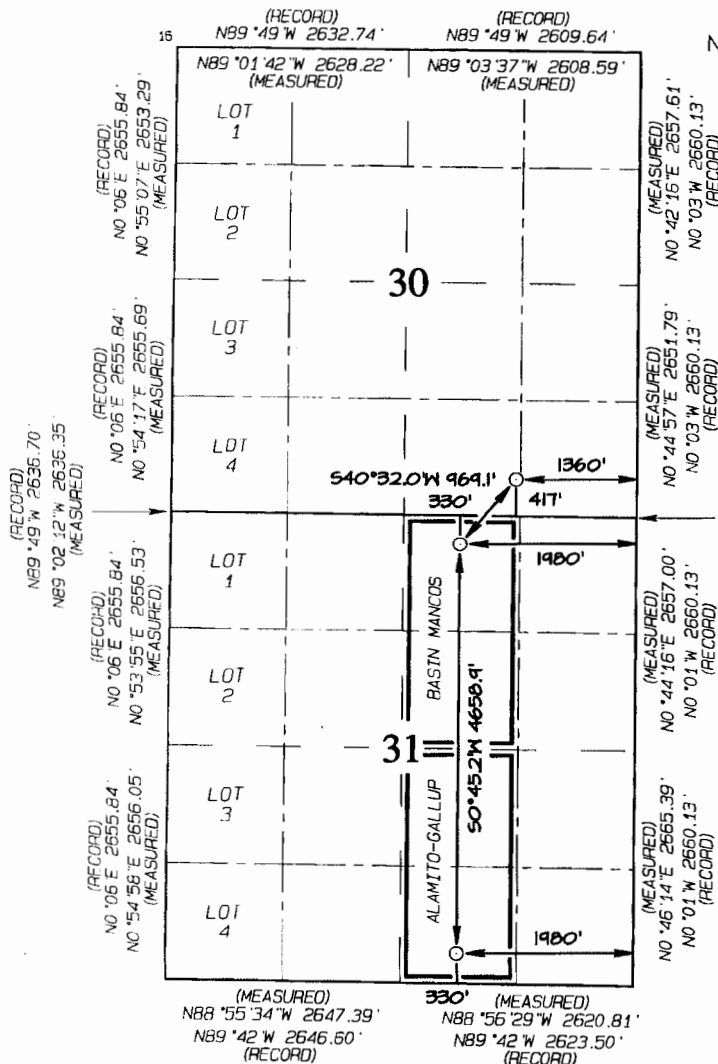
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	30	23N	7W		417	SOUTH	1360	EAST	SANDOVAL

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
0	31	23N	7W		330	SOUTH	1980	EAST	SANDOVAL

¹² Dedicated Acres 160.00 Acres W/2 E/2 - Section 31	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION
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NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



SURFACE LOCATION
417' FSL 1360' FEL
SECTION 30, T23N, R7W
LAT: 36.19174°N
LONG: 107.61053°W
DATUM: NAD1927

LAT: 36.19175°N
LONG: 107.61114°W
DATUM: NAD1983

(MEASURED)
N89°02'37"W 2617.60'
N89°49'W 2617.56'
(RECORD)

POINT-OF-ENTRY
330' FNL 1980' FEL
SECTION 31, T23N, R7W
LAT: 36.18969°N
LONG: 107.61263°W
DATUM: NAD1927

LAT: 36.18971°N
LONG: 107.61324°W
DATUM: NAD1983

END-OF-LATERAL
330' FSL 1980' FEL
SECTION 31, T23N, R7W
LAT: 36.17689°N
LONG: 107.61262°W
DATUM: NAD1927

LAT: 36.17691°N
LONG: 107.61323°W
DATUM: NAD1983

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.

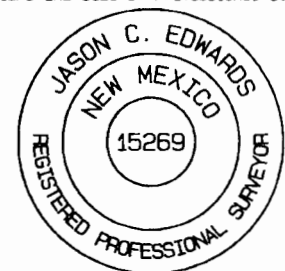
Jessica Gregg 7/24/14
Signature Date
Jessica Gregg
Printed Name
Jessica.Gregg@encana.com
E-mail Address

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 Revised: JUNE 6, 2014
Survey Date: NOVEMBER 13, 2013

Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

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

District II
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District IV
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State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

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Appropriate District Office

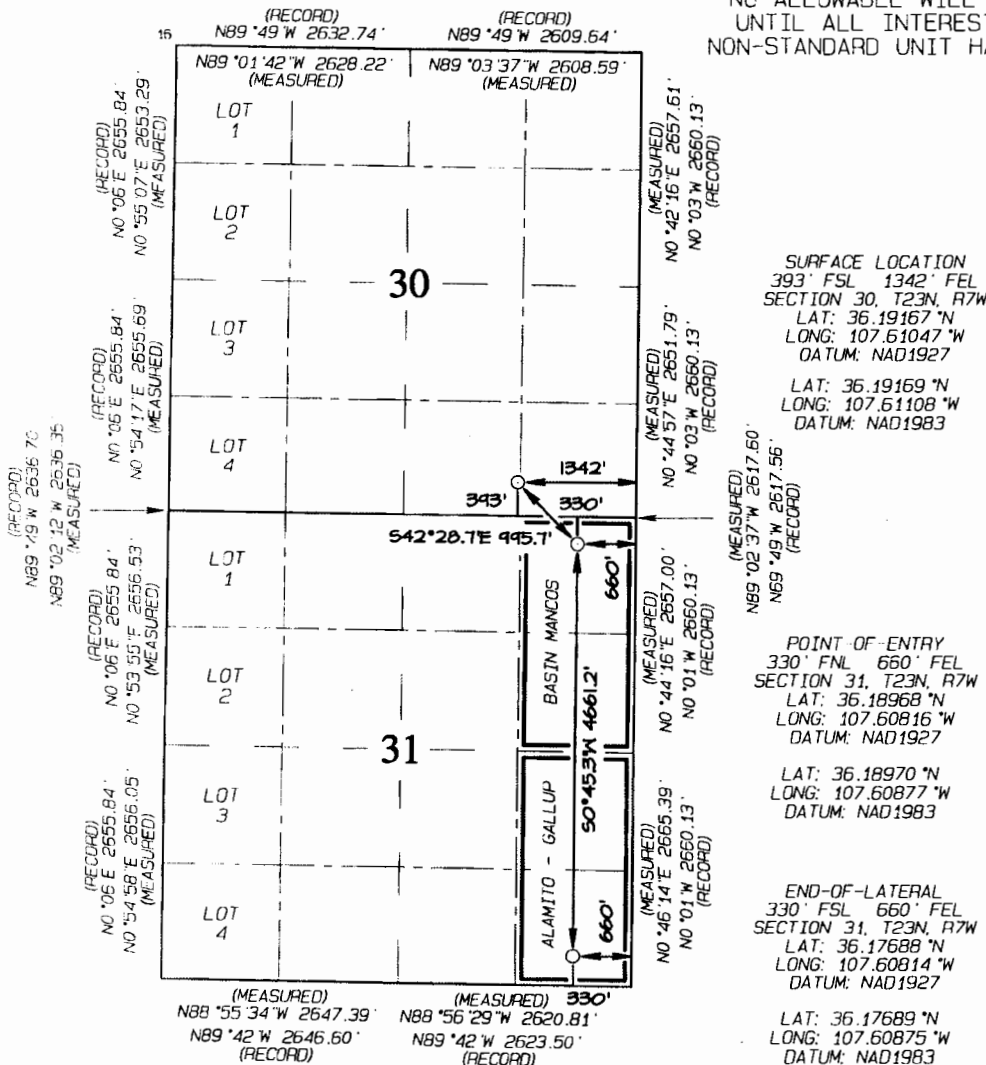
OIL CONSERVATION DIVISION
1220 South St. Francis Drive
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number		2 Pool Code		3 Pool Name						
		97232 / 1039		BASIN MANCOS / ALAMITO - GALLUP						
4 Property Code		5 Property Name						6 Well Number		
		LYBROOK 030-2307						02H		
7 GRID No.		8 Operator Name						9 Elevation		
282327		ENCANA OIL & GAS (USA) INC.						7023		
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	
0	30	23N	7W		393	SOUTH	1342	EAST	SANDOVAL	
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	31	23N	7W		330	SOUTH	660	EAST	SANDOVAL	
12 Dedicated Acres					13 Joint or Infill		14 Consolidation Code		15 Order No.	
160.00 Acres E/2 E/2 - Section 31										

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: *Jessica Gregg* Date: 7/24/14

Printed Name: Jessica Gregg

E-mail Address: Jessica.Gregg@encana.com

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 Revised: JUNE 6, 2014
Survey Date: NOVEMBER 13, 2013

Signature and Seal of Professional Surveyor

JASON C. EDWARDS
NEW MEXICO
REGISTERED PROFESSIONAL SURVEYOR
15269

JASON C. EDWARDS
Certificate Number 15269

District I
1625 N. French Drive, Hobbs, NM 88240
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State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number	*Pool Code	*Pool Name
	97232 / 1039	BASIN MANCOS / ALAMITO - GALLUP
*Property Code	*Property Name	*Well Number
	LYBROOK 030-2307	03H
*GRID No.	*Operator Name	*Elevation
282327	ENCANA OIL & GAS (USA) INC.	7023'

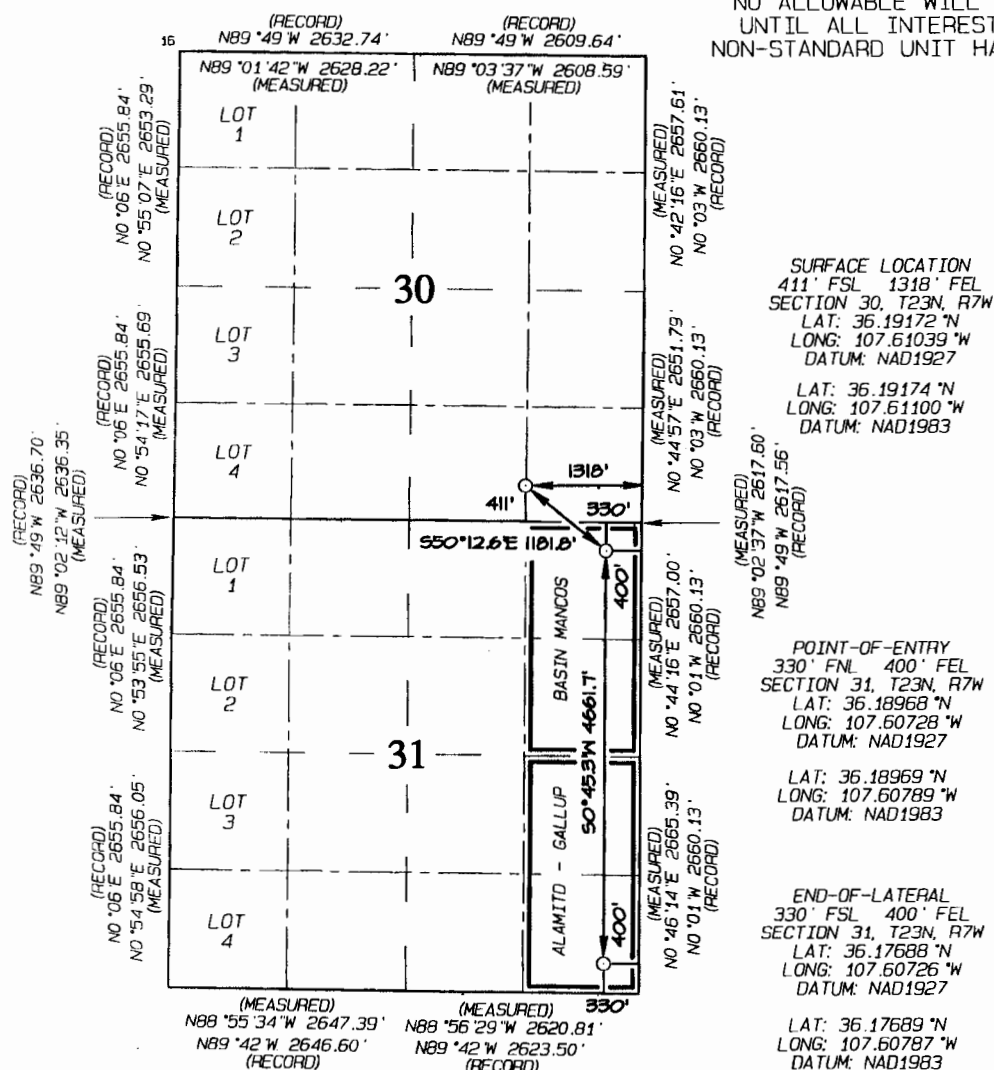
¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	30	23N	7W		411	SOUTH	1318	EAST	SANDOVAL

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	31	23N	7W		330	SOUTH	400	EAST	SANDOVAL
¹² Dedicated Acres					¹³ Joint or Infill				
160.00 Acres E/2 E/2 - Section 31					¹⁴ Consolidation Code				
					¹⁵ Order No.				

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

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Jessica Gregg 7/24/14
Signature Date
Jessica Gregg
Printed Name
Jessica.Gregg@encana.com
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 Revised: FEBRUARY 10, 2014
Survey Date: NOVEMBER 13, 2013

Signature and Seal of Professional Surveyor



Jason C. Edwards
Certificate Number 15269

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

District II
811 S. First Street, Artesia, NM 88210
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Form C-102
Revised August 1, 2011

Submit one copy to
Appropriate District Office

OIL CONSERVATION DIVISION

1220 South St. Francis Drive
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code 97232 / 1039		*Pool Name BASIN MANCOS / ALAMITO - GALLUP	
*Property Code		*Property Name LYBROOK 030-2307			*Well Number 04H
*GRID No. 282327		*Operator Name ENCANA OIL & GAS (USA) INC.			*Elevation 7023'

¹⁰ Surface Location

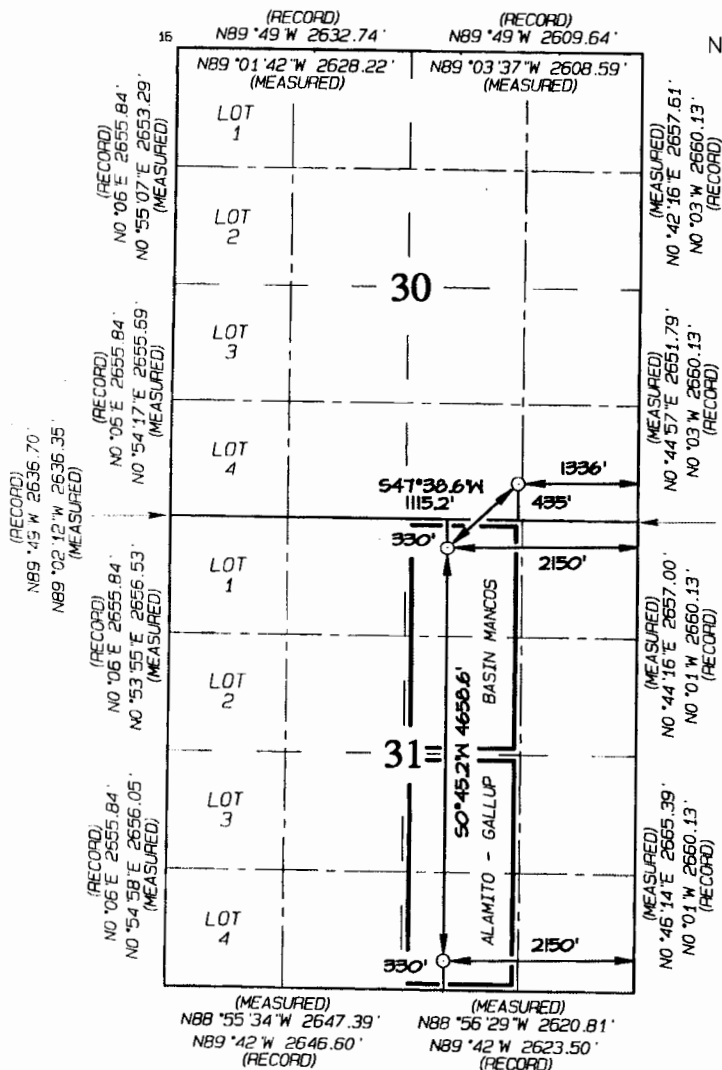
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	30	23N	7W		435	SOUTH	1336	EAST	SANDOVAL

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
0	31	23N	7W		330	SOUTH	2150	EAST	SANDOVAL

¹² Dedicated Acres 160.00 Acres W/2 E/2 - Section 31	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
---	-------------------------------	----------------------------------	-------------------------

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 LOCATION
435' FSL 1336' FEL
SECTION 30, T23N, R7W
LAT: 36.19179°N
LONG: 107.61045°W
DATUM: NAD1927

LAT: 36.19180°N
LONG: 107.61106°W
DATUM: NAD1983

POINT-OF-ENTRY
330' FNL 2150' FEL
SECTION 31, T23N, R7W
LAT: 36.18969°N
LONG: 107.61321°W
DATUM: NAD1927

LAT: 36.18971°N
LONG: 107.61382°W
DATUM: NAD1983

END-OF-LATERAL
330' FSL 2150' FEL
SECTION 31, T23N, R7W
LAT: 36.17690°N
LONG: 107.61319°W
DATUM: NAD1927

LAT: 36.17691°N
LONG: 107.61380°W
DATUM: NAD1983

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: *Julia Gregg* Date: 7/24/14
Printed Name: *Julia Gregg*
E-mail Address: *Julia.Gregg@encana.com*

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.

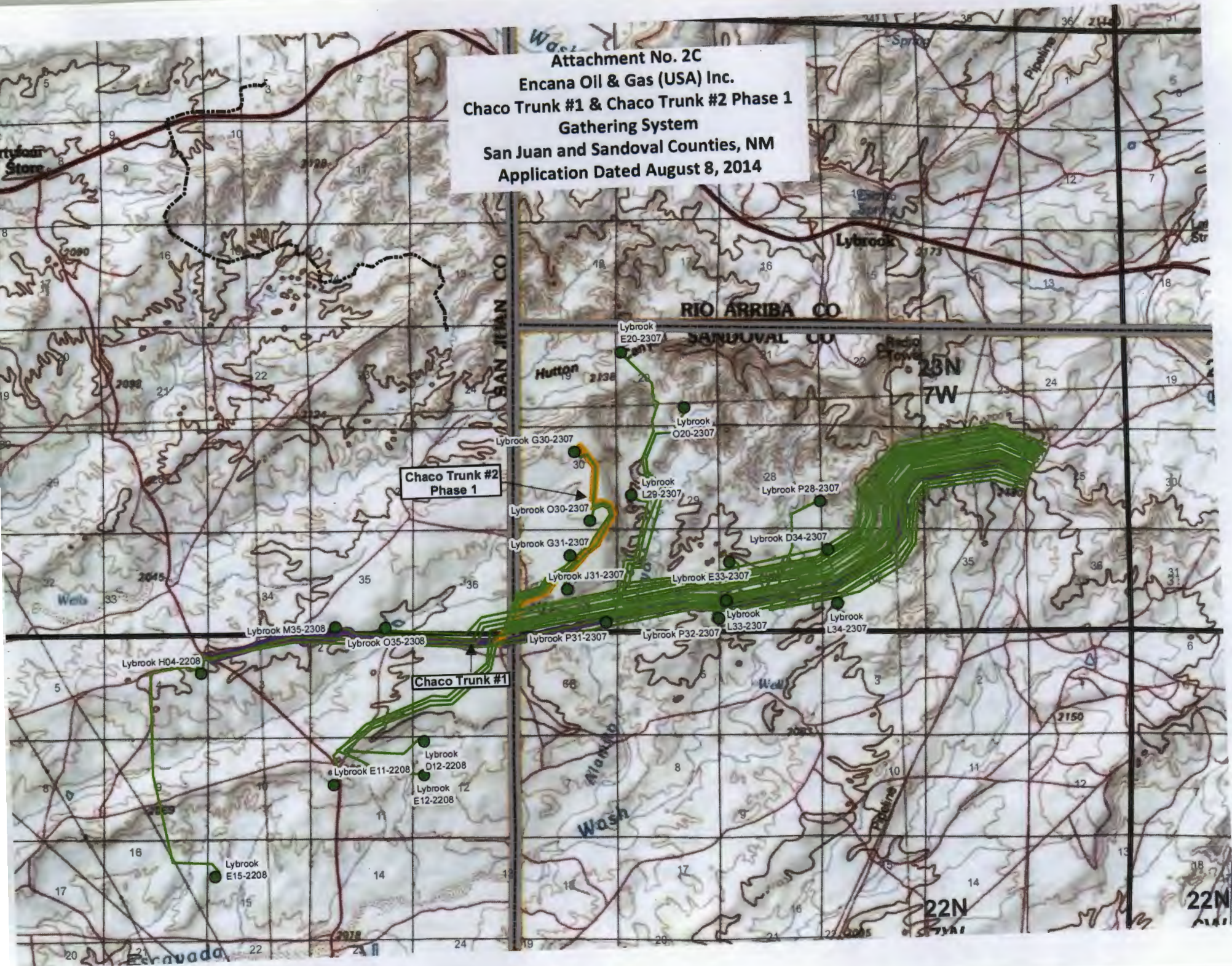
Date Revised: FEBRUARY 10, 2014
Survey Date: NOVEMBER 13, 2013

Signature and Seal of Professional Surveyor



Signature: *Jason C. Edwards*
Certificate Number: 15269

Attachment No. 2C
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 & Chaco Trunk #2 Phase 1
Gathering System
San Juan and Sandoval Counties, NM
Application Dated August 8, 2014

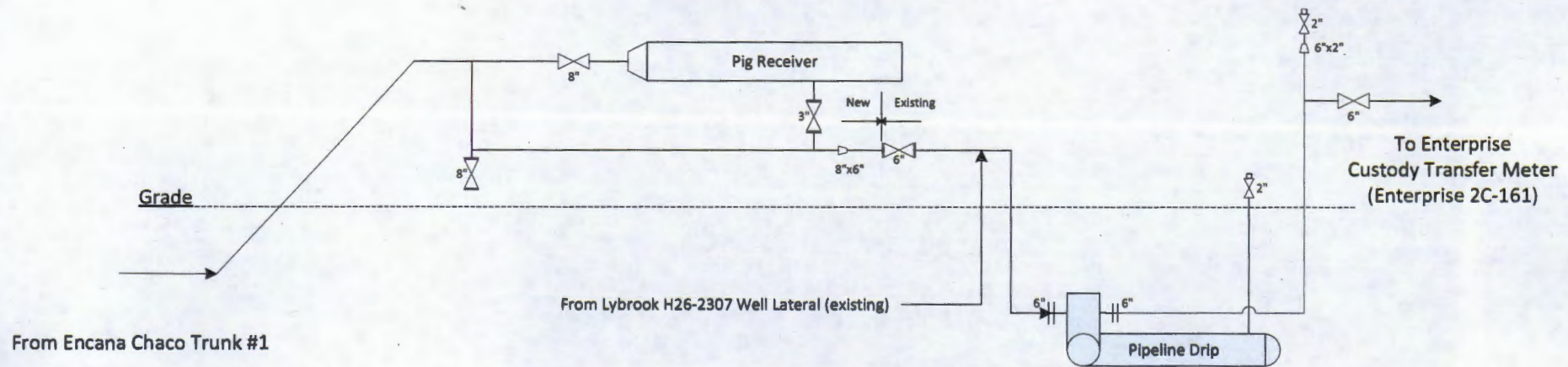


Attachment No. 2c
Encana Oil Gas (USA) Inc.
Chaco Trunk #1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Well Pad	Estimated Pipeline Length in Feet	Estimated Length in Miles	Projected Width for Pipeline ROW	Total Pipeline Disturbed Acreage	Cost (\$55k/mile*4" O.D.)	Pig Launcher/Receiver Disturbance	Pig Launcher/Receiver Cost
Initial Application for Chaco Trunk #1 & Chaco Trunk #2 Phase 1 Gathering System Dated July 22, 2014							
Lybrook D12-2208	44,703	8.47	40'	41.05	\$1,862,625.00	10' x 20'	\$40,000.00
Lybrook E12-2208	45,222	8.56	40'	41.53	\$1,884,250.00	10' x 20'	\$40,000.00
Lybrook D34-2307	14,967	2.83	40'	13.74	\$623,625.00	10' x 20'	\$40,000.00
Lybrook E20-2307	40,588	7.69	40'	37.27	\$1,691,166.67	10' x 20'	\$40,000.00
Lybrook E33-2307	20,454	3.87	40'	18.78	\$852,250.00	10' x 20'	\$40,000.00
Lybrook E11-2208	42,780	8.10	40'	39.28	\$1,782,500.00	10' x 20'	\$40,000.00
Lybrook E15-2208	61,157	11.58	40'	56.16	\$2,548,208.33	10' x 20'	\$40,000.00
Lybrook H04-2208	46,221	8.75	40'	42.44	\$1,925,875.00	10' x 20'	\$40,000.00
Lybrook L29-2307	32,067	6.07	40'	29.45	\$1,336,125.00	10' x 20'	\$40,000.00
Lybrook L33-2307	18,839	3.57	40'	17.30	\$784,958.33	10' x 20'	\$40,000.00
Lybrook L34-2307	14,274	2.70	40'	13.11	\$594,750.00	10' x 20'	\$40,000.00
Lybrook M35-2308	38,348	7.26	40'	35.21	\$1,597,833.33	10' x 20'	\$40,000.00
Lybrook O20-2307	36,848	6.98	40'	33.84	\$1,535,333.33	10' x 20'	\$40,000.00
Lybrook O35-2308	36,214	6.86	40'	33.25	\$1,508,916.67	10' x 20'	\$40,000.00
Lybrook P28-2307	22,580	4.28	40'	20.73	\$940,833.33	10' x 20'	\$40,000.00
Lybrook P31-2307	24,984	4.73	40'	22.94	\$1,041,000.00	10' x 20'	\$40,000.00
Lybrook P32-2307	19,636	3.72	40'	18.03	\$818,166.67	10' x 20'	\$40,000.00
Lybrook G30-2307	44,615	8.45	40'	40.97	\$1,858,958.33	10' x 20'	\$40,000.00
Lybrook G31-2307	36,190	6.85	40'	33.23	\$1,507,916.67	10' x 20'	\$40,000.00
Lybrook J31-2307	36,005	6.82	40'	33.06	\$1,500,208.33	10' x 20'	\$40,000.00
Lybrook O30-2307	41,166	7.80	40'	37.80	\$1,715,250.00	10' x 20'	\$40,000.00
	717,858 Ft	135.96 Miles		659.2 Acres	\$29,910,750.00	0.0964 Acres	\$840,000.00

GRAND TOTAL	717,858 Ft	135.96 Miles		659.2 Acres	\$29,910,750.00	0.0964 Acres	\$840,000.00
						GRAND TOTAL COST	\$30,750,750.00
						GRAND TOTAL ACREAGE	659.29 Acres

Attachment No. 2d
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 & Chaco Trunk #2 Phase 1
Gathering System
San Juan and Sandoval Counties, NM
Application Dated August 8, 2014



FILENAME
ENTERPRISE 2C-161 - ENCANA CHACO TRUNK #1
INTERCONNECT SCHEMATIC.VSD

NOT TO SCALE

DATE
07/14/14

Attachment No. 3
Encana Oil Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Initial Application for Chaco Trunk #1 & Chaco Trunk #2 Phase 1 Gathering System Dated August 8, 2014

Lybrook D12-2208 01H D-NWNW-12-22N-8W N2 Sec 11 22N 8W (320 acres) NM-48989A USA		
	Gross	Net
Interest Owner		
Working Interest		
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	87.500%
Royalty Interest		
United States of America	0.000%	12.500%
Overriding Royalty Interest		
	0.000%	0.000%
TOTAL ***	<u>100.000%</u>	<u>100.000%</u>

Lybrook D34-2307 01H D-NWNW-34-23N-7W N2N2 Sec 33 23N 7W (160 acres) NM-16586 USA		
	Gross	Net
Interest Owner		
Working Interest		
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	86.500%
Royalty Interest		
United States of America	0.000%	12.500%
Overriding Royalty Interest		
Michael Lyle Payne 20110 Echo Falls Dr. Katy, TX 77450	0.000%	0.667%
Lyle L. Payne, Jr. 4733 Santala Dr. Knoxville, TN 37909	0.000%	0.333%
TOTAL	<u>100.000%</u>	<u>100.000%</u>

Lybrook E20-2307 01H E-SWNW-20-23N-7W All Sec 19 (640 acres) 23N 7W NM-81638 USA		
	Gross	Net
Interest Owner		
Working Interest		
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	43.750%
Royalty Interest		
United States of America	0.000%	12.500%
Overriding Royalty Interest		
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	2.500%
TOTAL ***	<u>100.000%</u>	<u>100.000%</u>

Lybrook E12-2208 01H E-SWNW-12-22N-8W N2 Sec 11 22N 8W (320 acres) NM-48989A USA		
	Gross	Net
Interest Owner		
Working Interest		
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	87.500%
Royalty Interest		
United States of America	0.000%	12.500%
Overriding Royalty Interest		
	0.000%	0.000%
TOTAL ***	<u>100.000%</u>	<u>100.000%</u>

Lybrook D34-2307 02H D-NWNW-34-23N-7W S2N2 Sec 33 23N 7W (160 acres) NM-16586 USA		
	Gross	Net
Interest Owner		
Working Interest		
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	86.500%
Royalty Interest		
United States of America	0.000%	12.500%
Overriding Royalty Interest		
Michael Lyle Payne 20110 Echo Falls Dr. Katy, TX 77450	0.000%	0.667%
Lyle L. Payne, Jr. 4733 Santala Dr. Knoxville, TN 37909	0.000%	0.333%
TOTAL	<u>100.000%</u>	<u>100.000%</u>

Lybrook E20-2307 02H E-SWNW-20-23N-7W All Sec 19 (640 acres) 23N 7W NM-81638 USA		
	Gross	Net
Interest Owner		
Working Interest		
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	43.750%
Royalty Interest		
United States of America	0.000%	12.500%
Overriding Royalty Interest		
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	2.500%
TOTAL ***	<u>100.000%</u>	<u>100.000%</u>

Attachment No. 3
Encana Oil Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Lybrook E33-2307 01H E-SWNW-33-23N-7W N2N2 Sec 32 23N 7W (160 acres) NM-6682 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	83.417%
<u>Royalty Interest</u> State of New Mexico (12.5% X 50%)	0.000%	6.250%
State of New Mexico 16.6667 X 50%)	0.000%	8.333%
<u>Overriding Royalty Interest</u> R & J Miller Partnership 2702 Crestline Rd. Big Spring, TX 79720	0.000%	1.000%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	1.000%
TOTAL	100.000%	100.000%

Lybrook E11-2208 01H F-SENW-11-22N-8W SW Sec 11 (160 acres) / NW Sec 14 (160 acres) 22N 8W NM-48989A / NM-48989 USA / USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	75.000%	64.375%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	25.000%	21.875%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	1.250%
TOTAL ***	100.000%	100.000%

Lybrook E15-2208 01H E-SWNW-15-22N-8W N2 Sec 16 22N 8W (320 acres) B-10894 / VA-1119 NM STATE / NM STATE		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	39.167%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	41.667%
<u>Royalty Interest</u> State of New Mexico	0.000%	16.667%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murry Drive Farmington, NM 87401 ***	0.000%	2.500%
TOTAL	100.000%	100.000%

Lybrook E33-2307 02H E-SWNW-33-23N-7W S2N2 Sec 32 23N 7W (160 Acres) NM-6682 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	83.417%
<u>Royalty Interest</u> State of New Mexico (12.5% X 50%)	0.000%	6.250%
State of New Mexico 16.6667 X 50%)	0.000%	8.333%
<u>Overriding Royalty Interest</u> R & J Miller Partnership 2702 Crestline Rd. Big Spring, TX 79720	0.000%	1.000%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	1.000%
TOTAL	100.000%	100.000%

Lybrook E11-2208 02H F-SENW-11-22N-8W SW Sec 11 (160 acres) / NW Sec 14 (160 acres) 22N 8W NM-48989A / NM-48989 USA / USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	75.000%	64.375%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	25.000%	21.875%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	1.250%
TOTAL ***	100.000%	100.000%

Lybrook E15-2208 01H E-SWNW-15-22N-8W N2 Sec 16 22N 8W (320 acres) B-10894 / VA-1119 NM STATE / NM STATE		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	39.167%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	41.667%
<u>Royalty Interest</u> State of New Mexico	0.000%	16.667%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murry Drive Farmington, NM 87401 ***	0.000%	2.500%
TOTAL	100.000%	100.000%

Attachment No. 3
Encana Oil Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Lybrook H04-2208 01H H-SENE-4-22N-8W All Sec 4 22N 8W (644.03 acres) NM-55836 / NM-90468 NM STATE / NM STATE		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	40.000%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	41.995%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Cathy Jean Henrickson 7375 Rollingdell Drive Apt. 79 Cupertino, California 95014	0.000%	2.236%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	1.995%
Harvey Royalty Partners, L.P. 3811 Turtle Creek Blvd. Suite 21250 Dallas, TX 75219	0.000%	1.273%
TOTAL	100.000%	100.000%

Lybrook L29-2307 02H L-NWSW-29-23N-7W S2 Sec 30 23N 7W (321.26 acres) NM-36943 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	43.750%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	2.500%
TOTAL ***	100.000%	100.000%

Lybrook L29-2307 04H L-NWSW-29-23N-7W S2 Sec 30 23N 7W (321.26 acres) NM-36943 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	43.750%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	2.500%
TOTAL ***	100.000%	100.000%

Lybrook L29-2307 01H L-NWSW-29-23N-7W S2 Sec 30 23N 7W (321.26 acres) NM-36943 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	43.750%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	2.500%
TOTAL	100.000%	100.000%

Lybrook L29-2307 03H L-NWSW-29-23N-7W S2 Sec 30 23N 7W (321.26 acres) NM-36943 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	43.750%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	2.500%
TOTAL ***	100.000%	100.000%

Lybrook L33-2307 01H L-NWSW-33-23N-7W N2S2 Sec 32 23N 7W (160 acres) V-1697 / V-3924 NM STATE / NM STATE		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	83.417%
<u>Royalty Interest</u> State of New Mexico (12.5% X 50%) (16.6667% X 50%)	0.000%	6.250%
	0.000%	8.333%
<u>Overriding Royalty Interest</u> R & J Miller Partnership 2702 Crestline Rd. Big Spring, TX 79720	0.000%	1.000%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	1.000%
TOTAL ***	100.000%	100.000%

Attachment No. 3
Encana Oil Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Lybrook L34-2307 01H L-NWSW-34-23N-7W N2S2 Sec 33 23N 7W (160 acres) NM-16586 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	86.500%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Michael Lyle Payne 20110 Echo Falls Dr. Katy, TX 77450	0.000%	0.867%
Lyle L. Payne, Jr. 4733 Santala Dr. Knoxville, TN 37909	0.000%	0.333%
TOTAL	100.000%	100.000%

Lybrook M35-2308 01H M-SWSW-35-23N-8W W2W2 Sec 2 22N 8W (180.50 acres) NM-48989A USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	87.500%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u>	0.000%	0.000%
TOTAL ***	100.000%	100.000%

Lybrook M35-2308 03H M-SWSW-35-23N-8W E2W2 Sec 2 22N 8W (160.70 acres) NM-48989A USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	87.500%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u>	0.000%	0.000%
TOTAL ***	100.000%	100.000%

Lybrook L34-2307 02H L-NWSW-34-23N-7W S2S2 Sec 33 23N 7W (160 acres) NM-16586 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	86.500%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Michael Lyle Payne 20110 Echo Falls Dr. Katy, TX 77450	0.000%	0.667%
Lyle L. Payne, Jr. 4733 Santala Dr. Knoxville, TN 37909	0.000%	0.333%
TOTAL	100.000%	100.000%

Lybrook M35-2308 02H M-SWSW-35-23N-8W E2W2 Sec 2 22N 8W (160.70 acres) NM-48989A USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	87.500%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u>	0.000%	0.000%
TOTAL ***	100.000%	100.000%

Lybrook M35-2308 04H M-SWSW-35-23N-8W W2W2 Sec 2 22N 8W (160.50 acres) NM-48989A USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	87.500%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u>	0.000%	0.000%
TOTAL ***	100.000%	100.000%

Attachment No. 3
Encana Oil Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Lybrook O20-2307 01H
O-SWSE-20-23N-7W
W2 Sec 20 (320 acres) / All Sec 19 (640 acres)
NM-81638

		USA	
		Gross	Net
Interest Owner			
Working Interest			
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%		41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%		43.750%
Royalty Interest			
United States of America	0.000%		12.500%
Overriding Royalty Interest			
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%		2.500%
TOTAL ***	100.000%		100.000%

Lybrook O35-2308 01H
O-SWSE-35-23N-8W
W2E2 Sec 2 22N 8W (160.90 acres)
NM-48989A

		USA	
		Gross	Net
Interest Owner			
Working Interest			
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%		87.500%
Royalty Interest			
United States of America	0.000%		12.500%
Overriding Royalty Interest			
	0.000%		0.000%
TOTAL ***	100.000%		100.000%

Lybrook P28-2307 01H
P-SESE-28-23N-7W
N2S2 Sec 28 23N 7W (160 acres)
NM-58878

		USA	
		Gross	Net
Interest Owner			
Working Interest			
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%		87.500%
Royalty Interest			
United States of America	0.000%		12.500% * Sliding Royalty
Overriding Royalty Interest			
	0.000%		0.000%
TOTAL	100.000%		100.000%

Lybrook O20-2307 02H
O-SWSE-20-23N-7W
W2 Sec 20 (320 acres) / All Sec 19 (640 acres)
NM-81638

		USA	
		Gross	Net
Interest Owner			
Working Interest			
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%		41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%		43.750%
Royalty Interest			
United States of America	0.000%		12.500%
Overriding Royalty Interest			
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%		2.500%
TOTAL ***	100.000%		100.000%

Lybrook O35-2308 02H
O-SWSE-35-23N-8W
E2E2 Sec 2 22N 8W (160.10 acres)
NM-48989A

		USA	
		Gross	Net
Interest Owner			
Working Interest			
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%		87.500%
Royalty Interest			
United States of America	0.000%		12.500%
Overriding Royalty Interest			
	0.000%		0.000%
TOTAL ***	100.000%		100.000%

Lybrook P28-2307 02H
P-SESE-28-23N-7W
S2S2 Sec 28 23N 7W (160 acres)
NM-58878

		USA	
		Gross	Net
Interest Owner			
Working Interest			
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%		87.500%
Royalty Interest			
United States of America	0.000%		12.500% * Sliding Royalty
Overriding Royalty Interest			
	0.000%		0.000%
TOTAL	100.000%		100.000%

Attachment No. 3
Encana Oil Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Lybrook P31-2307 01H P-SESE-31-23N-7W All Sec 6 22N 7W (643.40 acres) NM-89023 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	43.750%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	2.500%
TOTAL ***	100.000%	100.000%

Lybrook P31-2307 03H P-SESE-31-23N-7W All Sec 6 22N 7W (643.40 acres) NM-89023 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	43.750%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	2.500%
TOTAL ***	100.000%	100.000%

Lybrook P32-2307 01H P-SESE-32-23N-7W S2S2 Sec 32 23N 7W (160 acres) V-1697 / V-3924 NM STATE / NM STATE		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	83.417%
<u>Royalty Interest</u> State of New Mexico (12.5% X 50%)	0.000%	6.250%
State of New Mexico (16.6667% X 50%)	0.000%	8.334%
<u>Overriding Royalty Interest</u> R & J Miller Partnership 2702 Crestline Rd. Big Spring, TX 79720	0.000%	1.000%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	1.000%
TOTAL	100.000%	100.000%

Lybrook P31-2307 02H P-SESE-31-23N-7W All Sec 6 22N 7W (643.40 acres) NM-89023 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	43.750%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	2.500%
TOTAL ***	100.000%	100.000%

Lybrook P31-2307 04H P-SESE-31-23N-7W All Sec 6 22N 7W (643.40 acres) NM-89023 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	43.750%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	2.500%
TOTAL ***	100.000%	100.000%

Lybrook G30-2307 01H G-SWNE-30-23N-7W N2 Sec 25 23N 8W BIA-1403-1912 / NM-81638 / NM-36943 ALLOTTEE / USA / USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	83.347%	69.598%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	16.653%	14.572%
<u>Royalty Interest</u> United States of America	0.000%	4.173%
United States of America	0.000%	4.163%
Allottee Royalty	0.000%	6.661%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	0.833%
	0.000%	0.000%
TOTAL ***	100.000%	100.000%

Attachment No. 3
Encana Oil Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Lybrook G30-2307 02H G-SWNE-30-23N-7W N2 Sec 25 23N 8W BIA-1403-1912 / NM-81638 / NM-36943 ALLOTTEE / USA / USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	83.347%	69.598%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	16.653%	14.572%
<u>Royalty Interest</u> United States of America United States of America Allottee Royalty	0.000% 0.000% 0.000%	4.173% 4.163% 6.681%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	0.833%
TOTAL ***	100.000%	100.000%

Lybrook G30-2307 04H G-SWNE-30-23N-7W NE4 Sec 25 23N 8W NM-81838 / NM-36943 USA / USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	50.000%	41.250%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	50.000%	43.750%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	2.500%
TOTAL ***	100.000%	100.000%

Lybrook G31-2307 02H G-SWNE-31-23N-7W NW4 Sec 31 23N 7W LG-9090 / NM-6681 / BIA 1949 NM STATE / USA / ALLOTTEE		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	83.333%	69.583%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	16.667%	14.583%
<u>Royalty Interest</u> United States of America State of New Mexico Allottee Royalty	0.000% 0.000% 0.000%	4.167% 4.167% 6.667%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	0.833%
TOTAL ***	100.000%	100.000%

Lybrook G30-2307 03H G-SWNE-30-23N-7W N2 Sec 25 23N 8W BIA-1403-1912 / NM-81638 / NM-36943 ALLOTTEE / USA / USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	83.347%	69.598%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	16.653%	14.572%
<u>Royalty Interest</u> United States of America United States of America Allottee Royalty	0.000% 0.000% 0.000%	4.173% 4.163% 6.661%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	0.833%
TOTAL ***	100.000%	100.000%

Lybrook G31-2307 01H G-SWNE-31-23N-7W NW4 Sec 31 23N 7W LG-9090 / NM-6681 / BIA 1949 NM STATE / USA / ALLOTTEE		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	83.333%	69.583%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	16.667%	14.583%
<u>Royalty Interest</u> United States of America State of New Mexico Allottee Royalty	0.000% 0.000% 0.000%	4.167% 4.167% 6.667%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	0.833%
TOTAL ***	100.000%	100.000%

Lybrook G31-2307 03H G-SWNE-31-23N-7W NW4 Sec 31 23N 7W LG-9090 / NM-6681 / BIA 1949 NM STATE / USA / ALLOTTEE		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	83.333%	69.583%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	16.667%	14.583%
<u>Royalty Interest</u> United States of America State of New Mexico Allottee Royalty	0.000% 0.000% 0.000%	4.167% 4.167% 6.667%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	0.833%
TOTAL ***	100.000%	100.000%

Attachment No. 3
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Lybrook J31-2307 01H J-NWSE-31-23N-7W N2SW Sec 31 23N 7W (80.65 acres) BIA-1882 / LG-9090 / V-9194 / NM-6681 ALLOTTEE / NM STATE / NM STATE / USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	91.689%	76.627%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	8.311%	7.272%
<u>Royalty Interest</u> United States of America State of New Mexico State of New Mexico Allottee Royalty	0.000% 0.000% 0.000% 0.000%	4.189% 2.078% 2.770% 6.649%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	0.416%
TOTAL ***	100.000%	100.000%

Lybrook J31-2307 02H J-NWSE-31-23N-7W S2SW Sec 31 23N 7W BIA-1882 / LG-9090 / V-9194 / NM-6681 ALLOTTEE / NM STATE / NM STATE / USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	91.689%	76.627%
Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	8.311%	7.272%
<u>Royalty Interest</u> United States of America State of New Mexico State of New Mexico Allottee Royalty	0.000% 0.000% 0.000% 0.000%	4.189% 2.078% 2.770% 6.649%
<u>Overriding Royalty Interest</u> Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401	0.000%	0.416%
TOTAL ***	100.000%	100.000%

Lybrook O30-2307 01H O-SWSE-30-23N-7W W2E2 Sec 31 23N 7W NM-6681 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	87.500%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u>	0.000%	0.000%
TOTAL ***	100.000%	100.000%

Lybrook O30-2307 02H O-SWSE-30-23N-7W E2E2 Sec 31 23N 7W NM-6681 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	87.500%
<u>Royalty Interest</u> United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u>	0.000%	0.000%
TOTAL ***	100.000%	100.000%

Lybrook O30-2307 03H O-SWSE-30-23N-7W E2E2 Sec 31 23N 7W NM-6681 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	87.500%
United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u>	0.000%	0.000%
TOTAL ***	100.000%	100.000%

Lybrook O30-2307 04H O-SWSE-30-23N-7W W2E2 Sec 31 23N 7W NM-6681 USA		
<u>Interest Owner</u>	<u>Gross</u>	<u>Net</u>
<u>Working Interest</u> Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	87.500%
United States of America	0.000%	12.500%
<u>Overriding Royalty Interest</u>	0.000%	0.000%
TOTAL ***	100.000%	100.000%

*** Current title is unavailable. Totals estimated from prior leasehold interests. When title becomes available, Encana will submit an amendment to this document.

Attachment No. 4
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, NM
Application Dated August 8, 2014

As evidence that all interest ownership parties in the subject well have been given notice of Encana's application, attached please find:

- 1) The Leasehold Interest Owner's Address List for the wells tying into the Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System.
- 2) A copy of Encana's letter, dated July 21, 2014, used to send copies of the subject application to the leasehold interest owners for the additional wells connecting to the Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System. The letters were transmitted via certified mail/return receipt. Upon receiving receipts, a copy will be sent to NMOCD.
- 3) Copy of Encana's letter to The Daily Times, requesting a legal ad run August 10, 2014 in order to provide effective notice to interest owners of the amendment to the Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System.
- 4) All royalty interest is State, BLM, and Indian Allottee. Since the NMSLO and the BLM are receiving this application requesting their approval, a separate notice letter was not sent to these royalty interest owners. The application to the NMSLO and BLM were transmitted via certified mail/return receipt.

Attachment No. 4
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Working Interest

Encana Oil & Gas (USA) Inc.
370 17th Street, Suite 1700
Denver, CO 80202

Dugan Production Corp.
709 East Murray Drive
Farmington, NM 87401

Royalty Interest

United States of America
Bureau of Land Management
Farmington Field Office
6251 College Blvd., Suite A
Farmington, NM 87402

State of New Mexico
Mr. Larry Roybal
Oil, Gas & Minerals Division
New Mexico State Land Office
PO Box 1148
Santa Fe, NM 87504

***400 plus Allottees

Overriding Interest

Michael Lyle Payne
20110 Echo Falls Dr.
Katy, TX 77450

Lyle L. Payne, Jr.
4733 Santala Dr.
Knoxville, TN 37909

Dugan Production Corp.
709 East Murray Drive
Farmington, NM 87401

R & J Miller Partnership
2702 Crestline Rd.
Big Spring, TX 79720

Attachment No. 4
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Cathy Jean Henrickson
7375 Rollingdell Drive Apt. 79
Cupertino, California 95014

Harvey Royalty Partners, L.P.
3811 Turtle Creek Blvd. Suite 21250
Dallas, TX 75219



July 21, 2014

Example Letter to Interest Owners

**Re: Chaco Trunk #1 Gathering System Application
Application for Pool and Lease Commingling
San Juan and Sandoval Counties, New Mexico**

Dear Interest Owner:

Encana Oil & Gas (USA) Inc.'s (Encana) is seeking administrative approval from the New Mexico Oil Conservation Division (NMOCD) to connect wells to Encana's Chaco Trunk #1 Gathering System (CT1GS). The CT1GS is operated by Encana, and the connection of wells will require surface commingling of gas, and in some cases off-lease measurement and sale of produced natural gas, as well as off-lease transportation and sale of oil and condensate. All of the wells proposed to tie into the CT1GS will be operated by Encana. Encana has applied for the necessary rights-of-way to install, operate and maintain the CT1GS.

Off-Lease Measurement and Sale of produced natural gas, as well as Off-Lease Transportation and Sale of crude oil and condensate, may also be applicable for some of the proposed wells tying into the CT1GS. If applicable, Off-Lease Measurement of natural gas will occur at the well head by a well allocation meter and again at the pipeline tie-in to Enterprise Products Partner's central delivery point, gas custody transfer meter.

The wells will be equipped with individual gas measurement equipment for allocation purposes and will benefit from central compression which should keep wellhead operating pressure as low as possible. There will not be any downhole commingling of oil or condensate.

If applicable, Off-Lease Measurement, Transportation and Sale of produced oil and condensate will occur at the well surface location where Encana will install the necessary number of 400-barrel oil storage tanks and water tanks. A gathering company will purchase and transport the product to refining. A strapping table measurement for each oil tank will determine the volume in each tank and run tickets will be filled out at the surface location for each load. Tank seal information will also be recorded to accompany transport.

This matter does not require any action on your part. Current NMOCD Regulations require that all affected interest owners receive notice of Off-Lease Measurement, Transportation and Sale, and receive notice of proposed connections to the CT1GS. Included in Encana's Gathering System application is a request that for future additions to the CT1GS, only the interest owners in the wells to be added will require notification provided that the proposed additions do not adversely affect the existing wells in the CT1GS. This will greatly simplify adding wells to the CT1GS.

Should you have any questions, concerns or need additional information please contact me at your earliest convenience at (720)-876-3881 and/or skylar.fast@encana.com. Should you have any objections to our application, please contact the undersigned; you should also contact the NMOCD directly with your objections within twenty (20) days from the

Encana Oil & Gas (USA) Inc.

1701 17th Street, Suite 1700, Denver Colorado 80202

The Encana logo, featuring the word "encana" in a bold, lowercase sans-serif font, with a thin, curved line arching over the letters.

date the NMOCD receives our application. The mailing address for the NMOCD is 1220 St. Francis Drive, Santa Fe, New Mexico 87505. We would appreciate a copy of your objection.

Yours Truly,
Encana Oil & Gas (USA) Inc.

Skylar Fast

Skylar Fast
Land Negotiator - San Juan
(720)-876-3881
email: skylar.fast@encana.com

Enc:

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Michael Lyle Payne
20110 Echo Falls Dr.
Katy, TX 77450

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2212

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lyle L. Payne, Jr.
4733 Santala Dr.
Knoxville, TN 37909

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2205

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Dugan Production Corp.
709 East Murray Drive
Farmington, NM 87401

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 0133

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <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; margin-top: 20px;">Nomanita J. Begay PO Box 536 Shiprock, NM 87420</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number 7013 2250 0000 6498 2380 (Transfer from service label)</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <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; margin-top: 20px;">Ronald R. Peters HC 63 Box 401 Winslow, AZ 86047</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number 7013 2250 0000 6498 2397 (Transfer from service label)</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <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; margin-top: 20px;">Rosalie M. Speck 6501 W. Monte Vista RD Phoenix, AZ 85035</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number 7013 2250 0000 6498 2403 (Transfer from service label)</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jones-Werito, Blanche
PO BOX 5615
FARMINGTON, NM 87499

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2764

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Julian, Rebecca
PO BOX 457
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2771

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Martinez (Guerito), Alice
PO BOX 255
NAGEEZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2788

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Griffith (Pinto), Sammy
HC 17 BOX 600
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2733

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Guerito, Lucy
PO BOX 1871
KIRTLAND, NM 87417

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2740

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harrison, Patty
PO BOX 1412
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2757

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Charley, Shirley
38 ROAD 5255
BLOOMFIELD, NM 87413-9747

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2702

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Francisco, Anita
505 NORTH BEHREND
FARMINGTON, NM 87401

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2719

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gleason, Lendora
PO BOX 2586
BLOOMFIELD, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2726

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cayadito, Isiah - GUARDIAN
PO BOX 54
NAGEEZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2672

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cayadito, Lucita
PO BOX 272
NAGEEZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2689

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cayaditto, Helen
PO BOX 1351
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2696

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cavazone, Rachelle
7201 CHANTELE
FARMINGTON, NM 87410

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2641

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cayadito, Calvin
PO BOX 54
NAGEEZI, NM 87037

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2658

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cayadito, Darlene
PO BOX 366
NAGEEZI, NM 87037-0366

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2665

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Castillo, Patrick
PO BOX 38
COUNSELOR, NM 87018

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2610

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Castillo, Samson
PO BOX 44
COUNSELOR, NM 87018

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2627

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Castillo, Sanderson
GENERAL DELIVERY
COUNSELOR, NM 87018

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2634

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Beyale, Emily
324 W BLANCO BLVD #36
BLOOMFIELD, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2580

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Castillo Sr, Wallace
PO BOX 44
COUNSELOR, NM 87018

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2597

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Castillo, Alice
HCR 79 BOX 3064
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2603

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Atencio (Haceesa), Ella Mae
PO BOX 137
NAGEEZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2559

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Atencio, Emerson
PO BOX 457
NAGEEZI, NM 87037-0457

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2566

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Atencio, Pauline
PO BOX 54
NAGEEZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2573

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Anthony, Siephrene
PO BOX 54
NAGEEZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2528

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Antone, Shirene
521 MESCILLA ST NE
ALBUQUERQUE, NM 87108

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2535

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Atencia, Nina
BOX 175
NAGEEZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2542

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

R & J Miller Partnership
2702 Crestline Rd.
Big Spring, TX 79720

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2502

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cathy Jean Henrickson
7375 Rollingdell Drive Apt. 79
Cupertino, California 95014

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2489

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harvey Royalty Partners, L.P.
3811 Turtle Creek Blvd.
Suite 21250
Dallas, TX 75219

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2496

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <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;">Rita Nez (Castillo) PO Box 4445 Shiprock, NM 87420</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7013 2250 0000 6498 4735</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <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;">Roger Warito PO Box 1032 Fruitland, NM 87416</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7013 2250 0000 6498 2366</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <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;">Roland B. Mitchell PO Box 34 Shiprock, NM 87420</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7013 2250 0000 6498 2373</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rex Beniah
PO Box 1645
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4704

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Richard Lee Begay
PO Box 3091
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4711

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rita M. Cason
801 S. Pauline Ave. Apt. # B
El Reno, OK 73036

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4728

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Raymond Peter
PO Box 219
Sanostee, NM 87461

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4674

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Reginald Peter
PO Box 1055
Sheep Springs, NM 87364

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4681

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rena S. Werito
PO Box 215
Nageezi, NM 87037

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4698

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Perryene R. Etcitty
PO Box 1506
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4643

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Phoebe Ann Curtis
PO Box 1533
Kirtland, NM 87417

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4650

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pierre Etcitty
PO Box 1506
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4667

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pauline Atencio
PO Box 54
Nageezi, NM 87037

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4612

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pauline Sandoval
PO Box 298
Kirtland, NM 87417

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4629

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Perrena R. Etcitty
PO Box 1506
Shiprock, NM 87420

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4636

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Osmund Sam
PO Box 234
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4582

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Patty Sue Benjamin (Ankeah)
PO Box 1243
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4599

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Paul C. Augustine
9301 Volcano RD NW TRLR #98
Albuquerque, NM 87121

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4605

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nelson Harrison
PO Box 1592
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4551

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nina Atencio
Box 175
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4568

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Norris Benally
PO Box 226
Sanostee, NM 87461

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4575

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <p style="text-align: center;">Natalie K. Roy 557 Tramway BLVD NE Apt. 10 Albuquerque, NM 87123</p>		B. Received by (Printed Name) C. Date of Delivery	
2. Article Number (Transfer from service label) 7013 2250 0000 6498 4520		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PS Form 3811, July 2013		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <p style="text-align: center;">Nathaniel S. Roy 4201 Atrisco NW Apt. Q Albuquerque, NM 87120</p>		B. Received by (Printed Name) C. Date of Delivery	
2. Article Number (Transfer from service label) 7013 2250 0000 6498 4537		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PS Form 3811, July 2013		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <p style="text-align: center;">Navajo Nation Navajo Nation Window Rock, AZ 86504</p>		B. Received by (Printed Name) C. Date of Delivery	
2. Article Number (Transfer from service label) 7013 2250 0000 6498 4544		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
PS Form 3811, July 2013		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Melvin Sam
#14 County Road 4903
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4490

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Murphy Peter
HC 63 Box 6013
Winslow, AZ 86047

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4506

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nasben Sam
Box 212
Counselor, NM 87018

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4513

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X </div> <div style="display: flex; border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="flex: 1; border-right: 1px solid black; padding-right: 5px;">B. Received by (Printed Name)</div> <div style="flex: 1; padding-left: 5px;">C. Date of Delivery</div> </div> <div style="padding: 5px;"> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No </div>
1. Article Addressed to: <div style="text-align: center; padding: 10px;"> Willie Chiquito GENERAL DELIVERY Counselor, NM 87018 </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> 3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes </div>
2. Article Number (Transfer from service label) 7013 2250 0000 6498 2243	
PS Form 3811, July 2013 Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X </div> <div style="display: flex; border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="flex: 1; border-right: 1px solid black; padding-right: 5px;">B. Received by (Printed Name)</div> <div style="flex: 1; padding-left: 5px;">C. Date of Delivery</div> </div> <div style="padding: 5px;"> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No </div>
1. Article Addressed to: <div style="text-align: center; padding: 10px;"> Willie Keetso GENERAL DELIVERY Counselor, NM 87018 </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> 3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes </div>
2. Article Number (Transfer from service label) 7013 2250 0000 6498 2236	
PS Form 3811, July 2013 Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X </div> <div style="display: flex; border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="flex: 1; border-right: 1px solid black; padding-right: 5px;">B. Received by (Printed Name)</div> <div style="flex: 1; padding-left: 5px;">C. Date of Delivery</div> </div> <div style="padding: 5px;"> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No </div>
1. Article Addressed to: <div style="text-align: center; padding: 10px;"> Wilson Joe Chiquito GENERAL DELIVERY Counselor, NM 87018 </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> 3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes </div>
2. Article Number (Transfer from service label) 7013 2250 0000 6498 2229	
PS Form 3811, July 2013 Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <hr/> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </p> <hr/> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7013 2250 0000 6498 4469</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <hr/> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </p> <hr/> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7013 2250 0000 6498 4476</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <hr/> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </p> <hr/> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7013 2250 0000 6498 4483</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lucy Guerito Lopez
PO Box 1871
Kirtland, NM 87417

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4438

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail* ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lula Jake
GENERAL DELIVERY
Counselor, NM 87018

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4445

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail* ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lula K. Sandoval
PO Box 3445
Shiprock, NM 87420

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4452

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail* ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lorraine Peters
HC 63 Box 6041
Winslow, AZ 86047

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4407

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Louise Werito
PO Box 541
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4414

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lucita Cayadito
PO Box 272
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4421

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Linus J. Lee
PO Box 3526
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4377

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Lolita Yazzie
PO Box 42
Waterflow, NM 87421

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4384

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Loretta H. Foster
PO Box 603
Waterflow, NM 87421

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4391

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Leonard Jimmy Lee
PO Box 1025
Shiprock, NM 87420

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4346

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Leroy Etcitty
PO Box 3284
Shiprock, NM 87420

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4353

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lili M. Naranjo
PO Box 90344
Albuquerque, NM 87109

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4360

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Leo "Kee Ya" Chiquito
Box 9
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4315

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Leo Pacheco
PO Box 281
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4335

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Leo H. Benally III
45 County Road 252
Durango, CO 81301

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4322

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lean B. Capitan
Box 102
Montezuma Creek, UT 84534

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4285

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lenora Peters
HC 63 Box 6020
Winslow, AZ 86047

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4292

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lenora S. Gleason
PO Box 2586
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4308

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Laverna Peters
HC 63 Box 6041
Winslow, AZ 86047

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4254

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lawrence Peter
PO Box 384
Sanostee, NM 87461

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4261

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lee B. Roy Sr.
PO Box 1972
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4278

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Kenneth Kim George PO Box 1216 Durango, CO 81302</p>	
<p>2. Article Number (Transfer from service label) 7013 2250 0000 6498 4223</p>	

PS Form 3811, July 2013 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Larry Harrison PO Box 301 Bloomfield, NM 87413</p>	
<p>2. Article Number (Transfer from service label) 7013 2250 0000 6498 4230</p>	

PS Form 3811, July 2013 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Laura Etcitty PO Box 1213 El Reno, OK 73036</p>	
<p>2. Article Number (Transfer from service label) 7013 2250 0000 6498 4247</p>	

PS Form 3811, July 2013 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Katherine R. King
PO Box 3445
Shiprock, NM 87420

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4193

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kee Joe Etcitty
PO Box 2071
Shiprock, NM 87420

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4209

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kee Vigil, Jr.
PO Box 1563
Crownpoint, NM 87313

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4216

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Vera O'John
PO Box 842
Ignacio, CO 81137

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2274

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Vina Mae Joe (Cantsee)
PO Box 1163
Window Rock, AZ 86515

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2267

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Virginia R. Washburn
PO Box 681
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2250

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jones Benjamin
PO Box 1366
Shiprock, NM 87420

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4162

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jones Lee Sam
HCR 79 Box 1602
Cuba, NM 87013

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4179

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Julian Sam
PO Box 221
Counselor, NM 87018

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 4186

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John Pettigrew
PO Box 3154
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4131

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Johnny Begay
PO Drawer 1228
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4148

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Johnson Chiquito
PO Box 203
Counselor, NM 87018

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4155

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Joe A James
PO Box 3891
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 5000

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Joe Kee Begay
PO Box 981
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4117

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John M. Naranjo
PO Box 1403
Albuquerque, NM 87103

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4124

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jessie Martinez Sam
PO Box 212
Counselor, NM 87018

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4973

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jimmie E. Joe
PO Box 452
Fruitland, NM 87416

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4980

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jimmy Benjamin
208 West 14th St. #216
Los Angeles, CA 90015

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4997

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Irene K. George
GENERAL DELIVERY
Counselor, NM 87018

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4942

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Irvin Sam
434 N. 3rd
Bloomsfield, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4959

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jerry Vigil
PO Box 1836
Farmington, NM 87499

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4966

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ilene Woods
PO Box 2572
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4911

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail* ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ira M. Willie
758 Stagecoach Trl.
Durango, CO 81301

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4928

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail* ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Irene Augustine
301 Bette Clair St. SE
Albuquerque, NM 87123

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4935

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail* ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Henry James
PO Box 1144
Fruitland, NM 87416

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4881

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Henry Washburn
PO Box 2748
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4898

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Huxley Leo Sam
PO Box 1087
Cuba, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4904

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harrison Herbert
HCR 17 Box 1000
Cuba, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4850

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harry Vigil
PO Box 10597
Santa Fe, NM 87504

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4867

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Helen Dodge
PO Box 3462
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4874

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Grant J. Begay PO Box 536 Shiprock, NM 87420</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 4829</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Harold James Sr. PO Box 355 Tohatchi, NM 87325</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 4836</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Harold Pacheco PO Box 2021 Bloomfield, NM 87413</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 4843</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gilbert H. Yazzie, Jr.
PO Box 111
Waterflow, NM 87421

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4799

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gilbert Werito, Jr.
PO Box 5615
Farmington, NM 87499

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4805

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Glen Chiquito
PO Box 184
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4812

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Tom Sam
PO Box 7589
Newcomb, NM 87455

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2304

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Tony Benjamin
PO Box 1243
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2298

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Treva Benally
5 RD 5457
Farmington, NM 87401

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2281

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Frances J. Lee
445 Lyell St.
Monte Vista, CO 81144

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4768

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Freddie Sam
PO Box 1822
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4775

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gertrude H. King
PO Box 3445
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4782

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Etta W. Wilson
PO Box 66
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4737

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Eva Pacheco Kenneth
42 Road 5580
Farmington, NM 87407

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4744

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Florence Harrison
PO Box 3694
Farmington, NM 87499

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4751

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Paul John Mark
PO Box 193
Sanostee, NM 87461

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4706

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Rose L. Benjamin
Bureau of Indian Affairs Shiprock Agency
Probate & Estate Services
PO Box 3538
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4713

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Esther Chiquito (Toledo)
321 Tennessee SE #C
Albuquerque, NM 87108

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4720

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Lucy Joe (Dawes)
PO Box 488
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4676

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of May Roy (Barber)
PO Box 64
Waterflow, NM 87421

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4683

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Nellie Phillips
c/o Superintendent Shiprock Agency
PO Box 3538
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4690

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Curtis E. Joe
Box 1261
Waterflow, NM 87421

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4645

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Donald Harrison
PO Box 345
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4652

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Eleanor Lee (Charley)
PO Box 401
Sanostee, NM 87461

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4669

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Roger Etcitty
PO Box 397
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4614

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Ameya J. Begay
2456 Michael RD
Bellingham, WA 98226

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4621

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Charles H. Yazzie
PO Box 515
Sanostee, NM 87461

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4638

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Erma Jean Werito
c/o Rena Werito
PO Box 215
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4584

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ernestine Angela Morning Owl
3220 1/2 NE Riverside Ave.
Pendleton, OR 97801

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4591

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ernie James
PO Box 563
Fruitland, NM 87416

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4607

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<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>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Ella Mae Atencio (Hacessa) PO Box 137 Nageezi, NM 87037</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 4553</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<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>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Emerson Atencio PO Box 457 Nageezi, NM 87037</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 4560</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<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>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Emily Beyale 324 W. Blanco Blvd. #36 Bloomfield, NM 87413</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 4577</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Eddie Augustine
PO Box 2110
Kaibeto, AZ 86053

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4522

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Edward Etcitty
PO Box 681
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4539

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Elizabeth Carol Robertson
PO Box 7726
Myrtle Beach, SC 29572

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4546

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Donald H. Yazzie
PO Box 516
Sanostee, NM 87461

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☒ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4492

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Donny Russell Peters
HC 63 Box 361
Winslow, AZ 86047

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☒ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4508

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dorothea Pettigrew
PO Box 6481
Navajo Dam, NM 87419

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☒ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4515

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Stephanie A. Arviso
13105 Fruit Ave. Apt. D
Albuquerque, NM 87123

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4742

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sylvia Ann Benioh
313 E. 28th St. Apt. 333
Farmington, NM 87401

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2359

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sylvia Davis
PO Box 1762
Fruitland, NM 87416

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2342

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Delvis Marvin Mark 5640 S. Thompson Street Tacoma, WA 98408</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number 7014 0510 0001 3955 4461 (Transfer from service label)</p> <p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Dennis Benjamin c/o Ilene Woods PO Box 2572 Shiprock, NM 87420</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number 7014 0510 0001 3955 4478 (Transfer from service label)</p> <p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Donald Benjamin PO Box 1366 Shiprock, NM 87420</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number 7014 0510 0001 3955 4485 (Transfer from service label)</p> <p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Deborah M. Stallings
971 E. Monterey St.
Chandler, AZ 85225

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4430

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Delta Yazzie
PO Box 1474
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4447

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Delvin Marshall Roy
c/o Roselyn M. Roy, Guardian
PO Box 249
Red Valley, AZ 86544

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4454

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Danielle Lynn Roy
c/o Roselyn M. Roy Guardian
PO Box 249
Red Valley, AZ 86544

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4409

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

David John Mark
Box 334
Sanostee, NM 87461

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4423

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Darlene Cayadito Augustine
PO Box 366
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4416

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Claudia A. Clitso
PO Box 832
Tonalea, AZ 86044

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4379

PS Form 3811 July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Clifford Werito
113 East Pine
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4386

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Daisy L. James (Ellison)
PO Box 886
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4393

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Carol M. Rogers
PO Box 4402
Shiprock, NM 87420

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 4348

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☒ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cecelia Werito
PO Box 1274
Fruitland, NM 87416

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 4355

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☒ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cheryl Jane Martin
PO Box 1569
Shiprock, NM 87420

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 4362

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☒ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Blanche Jones Werito
PO Box 5615
Farmington, NM 87499

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4317

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bobby A. James
PO Box 161
Waterflow, NM 87421

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4324

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Calvin Cayadito
PO Box 54
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4331

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Betty C. Lameman
PO Box 884
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4287

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Betty D. Tsosie
PO Box 3826
Window Rock, AZ 86515

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4294

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bill Chiquito
GENERAL DELIVERY
Counselor, NM 87018

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4300

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <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; padding: 20px 0;">Bertha K. Begay PO Box 443 Churchrock, NM 87311</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 4256</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <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; padding: 20px 0;">Berna Y. Largo PO Box 286 Nageezi, NM 87037</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 4263</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <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; padding: 20px 0;">Bessie Marie Yazzie PO Box 111 Waterflow, NM 87421</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 4270</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Anna M. Manygoat
PO Box 115
Kirtland, NM 87417

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 4225

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Annie C. Begay
PO Box 431
Shiprock, NM 87420

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 4232

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Arthur Werito Jr.
PO Box 2046
Bloomfield, NM 87413

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 4249

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Alice Guerito Martinez
PO Box 255
Nageezi, NM 87037

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 4195

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Amos Sloan
HC 61 Box 38-612
Teec Nos Pos, AZ 86514

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 4201

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Andrew James
PO Box 107
Sanostee, NM 87461

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 4218

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Thelma J. Nelson 126 East Main Farmington, NM 87401		B. Received by (Printed Name)	C. Date of Delivery
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		7013 2250 0000 6498 2335	
PS Form 3811, July 2013		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Timothy D. James PO Box 500 Sanostee, NM 87461		B. Received by (Printed Name)	C. Date of Delivery
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		7013 2250 0000 6498 2328	
PS Form 3811, July 2013		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Tom C. Begay PO Box 1191 Shiprock, NM 87420		B. Received by (Printed Name)	C. Date of Delivery
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		7013 2250 0000 6498 2311	
PS Form 3811, July 2013		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Albert James
PO Box 1509
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4164

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Alfred Harrison, Sr.
PO Box 73
Counselor, NM 87018

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4171

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Alice Chavez
PO Box 23
Mexican Springs, NM 87320

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4188

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harrison, Judy
PO Box 453
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4133

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Vigil JR., Kee
PO Box 1563
Crownpoint, NM 87313

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4140

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sam, Nasben
PO Box 212
Counselor, NM 87018

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4157

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sam, Osmund
PO Box 234
Nageezi, NM 87037

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4102

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harrison, Sarah
PO Box 111
Nageezi, NM 87037

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4119

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harrison Jr., Johnson
PO Box 111
Nageezi, NM 87037

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4126

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Vigil, Harry
PO Box 10597
Santa Fe, NM 87504

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4072

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Holyan, Alberta
PO Box 1674
Crownpoint, NM 87313

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4089

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Curtis, Phoebe Ann
PO Box 1533
Kirtland, NM 87417

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4096

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sam, Edith
PO Box 26703
Albuquerque, NM 87125

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4010

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☒ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lewis, Jefferson
PO Box 241
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4027

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☒ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lewis, Thomas
PO Box 314
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4034

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☒ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lewis, Susan
PO Box 785
Cuba, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4041

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☒ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lewis, Robinson
PO Box 31
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4058

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☒ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sam, Melvin
#14 County Road 4903
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4065

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☒ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sam, Julian
PO Box 221
Counselor, NM 87018

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3983

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sam, Freddie
PO Box 1822
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3990

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sam, Irvin
434 N. 3rd
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 4003

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Aurelia Werito
PO Box 205
Counselor, NM 87018

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3952

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hasuse, Amos
PO Box 1607
Shiprock, NM 87420

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3969

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito, Cecelia Ann
6087 Moonlight Sonata Ave.
Las Vegas, NV 89122

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3976

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

O'John, Vera
PO Box 842
Ignacio, CO 81137

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3914

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito, Teddy
PO Box 83
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3921

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Willie, Robert
PO Box 2233
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3938

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <hr/> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <hr/> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Siephreno Ryan Anthony c/o Pauline Atencio, Guardian PO Box 54 Nageezi, NM 87037</p>	
<p>2. Article Number (Transfer from service label)</p>	<p style="text-align: center;">7013 2250 0000 6498 2472</p>
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <hr/> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <hr/> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Sonya Faye Werito PO Box 417 Nageezi, NM 87037</p>	
<p>2. Article Number (Transfer from service label)</p>	<p style="text-align: center;">7013 2250 0000 6498 4766</p>
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <hr/> <p>B. Received by (Printed Name) C. Date of Delivery</p> <hr/> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <hr/> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Stanley Benjamin PO box 3973 Shiprock, NM 87420</p>	
<p>2. Article Number (Transfer from service label)</p>	<p style="text-align: center;">7013 2250 0000 6498 4759</p>
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Willie, Ira M.
758 Stagecoach Trl.
Durango, CO 81301

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3884

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Vigil, Jerry
PO Box 1836
Farmington, NM 87499

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3891

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

George, Kenneth Kim
PO Box 1216
Durango, CO 81302

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3907

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pacheco, Leo
PO Box 281
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2504

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kenneth, Eva Pacheco
42 Road 5580
Farmington, NM 87407

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2511

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pacheco, Harold
PO Box 2021
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3877

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Wilson, Etta
PO BOX 66
NAGEEZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2474

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Yazzie, Frank
7230 CR 24.3
CORTEZ, CO 81321

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2481

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Navajo Nation
Navajo Nation
Window Rock, AZ 86504

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2498

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito, Rena
PO BOX 215
NAGEEZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2443

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito, Roger
PO BOX 1032
FRUITLAND, NM 87416

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2450

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito, Sonya
PO BOX 417
NAGEEZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2467

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito, Erma Jean
PO BOX 215
NAGEEZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2412

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito, Louise
PO BOX 541
BLOOMFIELD, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2429

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito, Monica
PO BOX 5652
FARMINGTON, NM 87499

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2436

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito Jr, Gilbert
PO BOX 5615
FARMINGTON, NM 87499

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2382

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito, Cecelia
PO BOX 1274
FRUITLAND, NM 87416

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2399

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito, Clifford
113 EAST PINE
BLOOMFIELD, NM 87413

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2405

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Veneno-Lukee, Ronda
8412 TROTTER RD SW
ALBUQUERQUE, NM 87121

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2351

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Wanoskia, Loudine
PO BOX 208
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2368

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Werito Jr, Arthur
PO BOX 2046
BLOOMFIELD, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2375

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Lindberg
PO BOX 15
LINDRITH, NM 87029

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2320

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Mary
9208 MIRA MAR LANE NW
ALBUQUERQUE, NM 87114

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2337

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Sharon
PO BOX 5003
WINDOW ROCK, AZ 86515

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2344

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Harry
365 CR 5500
BLOOMFIELD, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2290

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Jimi
PO BOX 1442
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2306

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Judy
PO BOX 418
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2313

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Dorothy
PO BOX 58
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2269

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Eddie
PO BOX 737
34 PUMPHOUSE
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2276

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Gilbert
BOX 953
BLOOMFIELD, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2283

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rosita Werito Trujillo
PO Box 352
Nageezi, NM 87037

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2441

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Shawna Etcitty
440-C Monroe NE Apt. C
Albuquerque, NM 87108

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2458

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Shirley Ann Charley
38 Road 5255
Bloomfield, NM 87413

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 2465

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Bob
HC 74 BOX 5
REGINA, NM 87046

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2238

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Daniel
PO BOX 490
BLOOMFIELD, NM 87413

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2245

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Darrell
PO BOX 745
4951 CEDRO WAY
LOS LUNAS, NM 87031

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2252

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Trujillo, Kathy
PO BOX 82
MOSCA, CO 81146

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2207

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde Jr, David
PO BOX 295
DULCE, NM 87528-0295

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2214

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Velarde, Alberta
PO BOX 994
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2221

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p>	
<p>1. Article Addressed to:</p> <p style="text-align: center;">Serafin, Roberta 612 ORTEGA ROAD NW ALBUQUERQUE, NM 87114</p>		<p>B. Received by (Printed Name)</p>	<p>C. Date of Delivery</p>
<p>2. Article Number (Transfer from service label)</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>PS Form 3811, July 2013</p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p>	
<p>7014 0510 0001 3955 2177</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
Domestic Return Receipt			

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p>	
<p>1. Article Addressed to:</p> <p style="text-align: center;">Tiller, Veronica 4833 CHARLOTTE COURT NE ALBUQUERQUE, NM 87109</p>		<p>B. Received by (Printed Name)</p>	<p>C. Date of Delivery</p>
<p>2. Article Number (Transfer from service label)</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>PS Form 3811, July 2013</p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p>	
<p>7014 0510 0001 3955 2184</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
Domestic Return Receipt			

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p>	
<p>1. Article Addressed to:</p> <p style="text-align: center;">Trujillo, Arlene PO BOX 403 NAGEEZI, NM 87037</p>		<p>B. Received by (Printed Name)</p>	<p>C. Date of Delivery</p>
<p>2. Article Number (Transfer from service label)</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>PS Form 3811, July 2013</p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p>	
<p>7014 0510 0001 3955 2191</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
Domestic Return Receipt			

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Stuart
PO BOX 937
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2146

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Vera
306A N OLIVER
AZTEC, NM 87410

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2153

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Walt
PO BOX 821
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2160

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Sandoval, Pauline PO BOX 298 KIRTLAND, NM 87417</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input checked="" type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 2115</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Sandoval, Randy PO BOX 2216 BLOOMFIELD, NM 87413</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input checked="" type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 2122</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Sandoval, Rubina PO BOX 919 DULCE, NM 87528</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input checked="" type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 2139</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Lester
PO BOX 412
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2085

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Merton
PO BOX 1118
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2092

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Myra
BOX 493
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2108

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Hobson
BOX 394
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2054

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☒ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Jacque
PO BOX 493
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2061

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☒ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Kurt
PO BOX 471
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2078

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☒ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Dixon
PO BOX 770
DULCE, NM 87528

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2023

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Duane
PO BOX 612
DULCE, NM 87528

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2030

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval, Elmo
PO BOX 633
DULCE, NM 87528

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2047

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Rose Mary
PO BOX 65
CROWNPOINT, NM 87313

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3129

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Romero, Rena
5652 CHERBOURG
COLORADO SPRINGS, CO 80902

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2009

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sandoval Estate, Russell
EASTERN NAVAJO AGENCY
ATTN: PROBATE AND ESTATE SERVICES
PO BOX 328
CROWNPOINT, NM 87313

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2016

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Nellie
PO BOX 188
NAGEZZI, NM 87037

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3099

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Paul
HCR 79 BOX 46
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3105

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Phillip
12000 COPPER NE APT B
ALBUQUERQUE, NM 87123

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3112

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Roselyn Marshall Roy
PO Box 249
Red Valley, AZ 86544

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 2410

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rosie K. Toledo
PO Box 75
Counselor, NM 87018

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 2427

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rosita Augustine
301 Bette Clair St. SE
Albuquerque, NM 87123

2. Article Number
(Transfer from service label)

7013 2250 0000 6498 2434

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Katie
HCR 79 BOX 3035
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3068

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☒ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Lucille
BOX 12
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3075

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☒ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Martin
1605 FINCH AV
FARMINGTON, NM 87401

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3082

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☒ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Edith
HCR 79 BOX 3082
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3037

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Eva
PO BOX 814
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3044

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, James
PUEBLO PINTADO STORE
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3051

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Avonne (Deceased)
C/O EASTERN NAVAJO AGENCY
BUREAU OF INDIAN AFFAIRS
PO BOX 328
CROWNPOINT, NM 87313

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3006

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Bennie
PO BOX 3998
GALLUP, NM 87305

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3013

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Dorothy
HCR 79 BOX 3035
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 3020

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pinto, Steven
PO BOX 192
DULCE, NM 87528

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2979

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pinto, Wayne
PO BOX 803
DULCE, NM 87528

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2986

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rafael, Alice
PO BOX 1097
CUBA, NM 87013

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 2993

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Montoya, Maronda
PO BOX 1543
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2887

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Muskrat, Bernice
PO BOX 1296
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2894

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nez, Arloa
PO BOX 1781
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2900

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pinto, Jimmie (Deceased)
PO BOX 1412
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2948

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pinto, Patrick
PO BOX 803
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2955

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pinto, Philbert
PO BOX 546
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2962

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Pinto, Elvira PO BOX 803 DULCE, NM 87528</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 2917</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Pinto, Jake PO BOX 803 DULCE, NM 87528</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 2924</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee X</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Pinto, Jennifer PO BOX 803 DULCE, NM 87528</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7014 0510 0001 3955 2931</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Montoya, Cherish
PO BOX 781
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2856

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Montoya, Donna
PO BOX 1476
DULCE, NM 87528-1476

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2863

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Montoya, Earl (Deceased)
C/O EASTERN NAVAJO AGENCY
ATTN: PROBATE AND ESTATE SERVICES
PO BOX 328
CROWNPOINT, NM 87313

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2870

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Martinez, Roland
PO BOX 1172
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2825

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

McDonald, Tommy
TWO GREY HILLS TP
TOHATCHI, NM 87325

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2832

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Montoya, Berdina
PO BOX 370
DULCE, NM 87528

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2849

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Martinez, David
PO BOX 36
CUBA, NM 87013

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2795

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Martinez, Gibson
1097 ROAD 44
CENTER, CO 81125

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2801

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Martinez, Helen
1016 SAN JUAN AVE
ALAMOSA, CO 81101-3340

2. Article Number

(Transfer from service label)

7014 0510 0001 3955 2818

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harrison, Pauline
PO Box 307
Nageezi, NM 87037

2. Article Number
(Transfer from service label)

7014 0510 0001 3955 3945

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cheryl Jane Martin
 PO Box 1569
 Shiprock, NM 87420

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail®

☐ Priority Mail Express®

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4810

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

United States of America
Federal Indian Minerals Office
6251 College BLVD., Suite A
Farmington, NM 87402

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X☐ Agent
☐ AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

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

3. Service Type

☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (*Extra Fee*)☐ Yes

2. Article Number

(Transfer from service label)

7013 2250 0000 6498 4827

PS Form 3811, July 2013

Domestic Return Receipt

encana

August 7, 2014

Transmitted Via Email: legals@daily-times.com

Attention: Legal Clerk
The Daily Times
201 N. Allen
Farmington, New Mexico 87401

Re: Legal Ad Placement Request
SUNDAY AUGUST 10, 2014
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico

Ladies and Gentlemen:

Encana Oil & Gas (USA) Inc. (Encana) respectfully requests The Daily Times place the following notice in the Legal Ads section for the Sunday, August 10, 2014 publication. Once the ad has run, please send an Affidavit of Publication to the undersigned.

Encana oil & Gas (USA) Inc. (Encana) is seeking administrative approval from the New Mexico Oil Conservation Division (NMOCD), the Bureau of Land Management (BLM), and the New Mexico State Land Office for a gathering system, known as the Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System. Encana is requesting the interconnection of forty-eight (48) wells to the Gathering System, which will require surface commingling. Said application also requests administrative approval of Off-Lease Measurement and sale of naturally produced gas and in some instances Off-Lease Transportation and Sale of oil and condensate for various wells operated by Encana in San Juan and Sandoval Counties, New Mexico. The Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System interconnects with Enterprise Products Partners' (Enterprise) pipeline in Section 25, Township 23 North, Range 7 West which will be known as the Central Delivery Point (CDP). At this point in time, Encana is unable to confirm with absolute certainty interest ownership in wells that will produce from the following Project Areas (PA): All Section 6 T22N R7W (Federal Lease NM-809023), All Section 19 T23N R7W (Federal Lease NM-81638), W2 Section 20 T23N R7W (Federal Lease NM-81638), S2 Section 30 T23N R7W (Federal Lease NM-36943), NW4 Section 31 T23N R7W (State Lease LG-9090, Federal Lease NM-6681, Allottee Lease BIA-1949), N2SW Section 31 T23N R7W (Allottee Lease BIA-1882, State Leases LG9090, V-9194, Federal Lease NM-6681), E2 Section 31, T23N R7W (Federal Lease NM-6681), N2S2 Section 33 T23N R7W (State Leases V-1697, V-3924), All Section 2 T22N R8W (Federal Lease NM-48989A), N2 Section 11 T22N R8W (Federal Lease NM-48989A), SW Section 11 T22N R8W (Federal Lease NM-48989A), NW Section 14 T22N R8W (Federal Lease NM-48989), N2 Section 16 T22N R8W (State Leases B-10894, VA-1119), N2 Section 25 T23N R8W (Allottee Lease BIA-1403-1912, Federal Leases NM-81638, NM-36943). Encana is currently in the process of ordering title opinions for said PAs. There will not be any commingling of oil or condensate with natural gas in the pipeline. The project areas described above will be completed in the Lybrook Gallup Pool (Order No. 42289). Any person holding an interest in the leases listed above may contact Encana for additional information (Attn: Skylar Fast, (720) 876-3881, 370 17th Street, Suite 1700, Denver, CO 80202; skylar.fast@encana.com). Any objection or request for a formal hearing should be filed in writing with the NMOCD's Santa Fe Office (1220 South St. Francis Drive, Santa Fe, NM 87505) within 20 days from the date of this publication. In the absence of objections, Encana is requesting that the NMOCD approve the application administratively.

Encana Oil & Gas (USA) Inc.
Jessica Gregg
Regulatory Analyst

Encana Oil & Gas (USA) Inc., acting by and through its authorized agent,
Encana Services Company Ltd.

370 17th Street, Suite 1700, Denver, Colorado 80202 720.876.3926 (O) 720.838.5458 (C) jessica.gregg@encana.com

Post-it [®] Fax Note 7671		Date 8-7	# of pages ▶
To Jessica R. Grigg		From Melissa	
Co./Dept. Encana		Co. Daily Times	
Phone # 720 876 3926		Phone # 505 564 4566	
Fax # 720 876 3936		Fax # 505 564 4567	

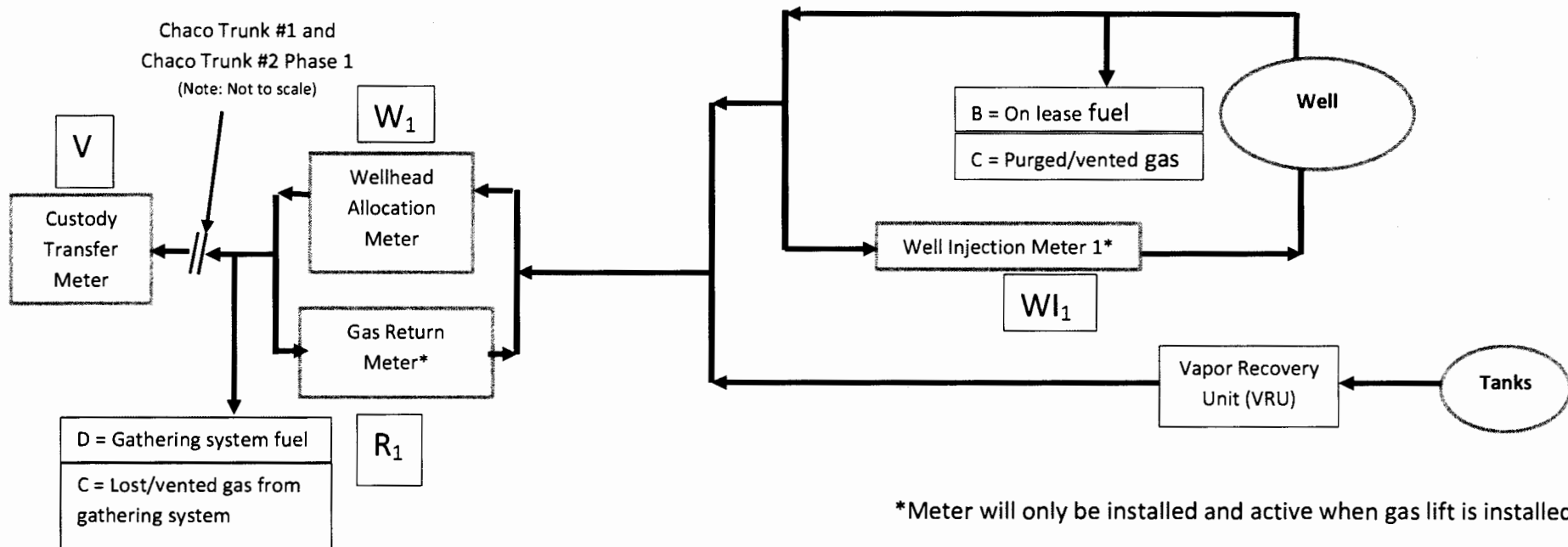
~~Faxed 8-7~~

Encana oil & Gas (USA) Inc. (Encana) is seeking administrative approval from the New Mexico Oil Conservation Division (NMOCD), the Bureau of Land Management (BLM), and the New Mexico State Land Office for a gathering system, known as the Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System. Encana is requesting the interconnection of forty-eight (48) wells to the Gathering System, which will require surface commingling. Said application also requests administrative approval of Off-Lease Measurement and sale of naturally produced gas and in some instances Off-Lease Transportation and Sale of oil and condensate for various wells operated by Encana in San Juan and Sandoval Counties, New Mexico. The Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System interconnects with Enterprise Products Partners' (Enterprise) pipeline in Section 25, Township 23 North, Range 7 West which will be known as the Central Delivery Point (CDP). At this point in time, Encana is unable to confirm with absolute certainty interest ownership in wells that will produce from the following Project Areas (PA): All Section 6 T22N R7W (Federal Lease NM-809023), All Section 19 T23N R7W (Federal Lease NM-81638), W2 Section 20 T23N R7W (Federal Lease NM-81638), S2 Section 30 T23N R7W (Federal Lease NM-36943), NW4 Section 31 T23N R7W (State Lease LG-9090, Federal Lease NM-6681, Allottee Lease BIA-1949), N2SW Section 31 T23N R7W (Allottee Lease BIA-1882, State Leases LG9090, V-9194, Federal Lease NM-6681), E2 Section 31, T23N R7W (Federal Lease NM-6681), N2S2 Section 33 T23N R7W (State Leases V-1697, V-3924), All Section 2 T22N R8W (Federal Lease NM-48989A), N2 Section 11 T22N R8W (Federal Lease NM-48989A), SW Section 11 T22N R8W (Federal Lease NM-48989A), NW Section 14 T22N R8W (Federal Lease NM-48989), N2 Section 16 T22N R8W (State Leases B-10894, VA-1119), N2 Section 25 T23N R8W (Allottee Lease BIA-1403-1912, Federal Leases NM-81638, NM-36943). Encana is currently in the process of ordering title opinions for said PAs. There will not be any commingling of oil or condensate with natural gas in the pipeline. The project areas described above will be completed in the Lybrook Gallup Pool (Order No. 42289). Any person holding an interest in the leases listed above may contact Encana for additional information (Attn: Skylar Fast, (720) 876-3881, 370 17th Street, Suite 1700, Denver, CO 80202; skylar.fast@encana.com). Any objection or request for a formal hearing should be filed in writing with the NMOCD's Santa Fe Office (1220 South St. Francis Drive, Santa Fe, NM 87505) within 20 days from the date of this publication. In the absence of objections, Encana is requesting that the NMOCD approve the application administratively.

Legal No. 70579 published in The Daily Times on August 10, 2014.

Attachment No. 5
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico

Gas Measurement Allocation Procedure for Single Well Pads



Base Data:

V = Gas Volume (MCF) from Custody Transfer Meter during allocation period (Enterprise Products Partners)
 R = Gas Volume (MCF) from Gas Return Meter (Encana)*
 W_1 = Gas Volume (MCF) from Wellhead Allocation Meter at individual wells during allocation period. (Encana)
 WI_1 = Gas Volume (MCF) from Well Injection Meter at individual wells during allocation period. (Encana)*
 Y = Heating Value (BTU/scf) from Custody Transfer Meter during allocation period. (Enterprise Products Partners)
 Z = Heating Value (BTU/scf) from individual Wellhead Allocation Meter and Well Injection Meter. (Encana)

Allocation Period is typically a calendar month and will be the same for all individual wells.

Attachment No. 5
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico

Individual Well Gas Production = A + B + C + D + E

A = Allocated Gas production off lease, MCF: $[(W_1-R_1)/((W_1-R_1)+(W_2-R_2)+(W_n-R_n))]*(V)$

B = On lease fuel usage, MCF. Determined from equipment specification and operating conditions. This includes, but is not limited to, compression, vapor recovery unit (VRU) compression, burners, and pump jacks.

C = Lost and/or vented gas from well and/or lease equipment, MCF. Calculated using equipment and piping specifications and operating pressures.

D = Allocated fuel from gathering system equipment, MCF. The total fuel required to operate gathering system equipment will be allocated to the individual wells benefiting from the equipment using allocation factors determined by $[(W_1-R_1)/((W_1-R_1)+(W_2-R_2)+(W_n-R_n))]$.

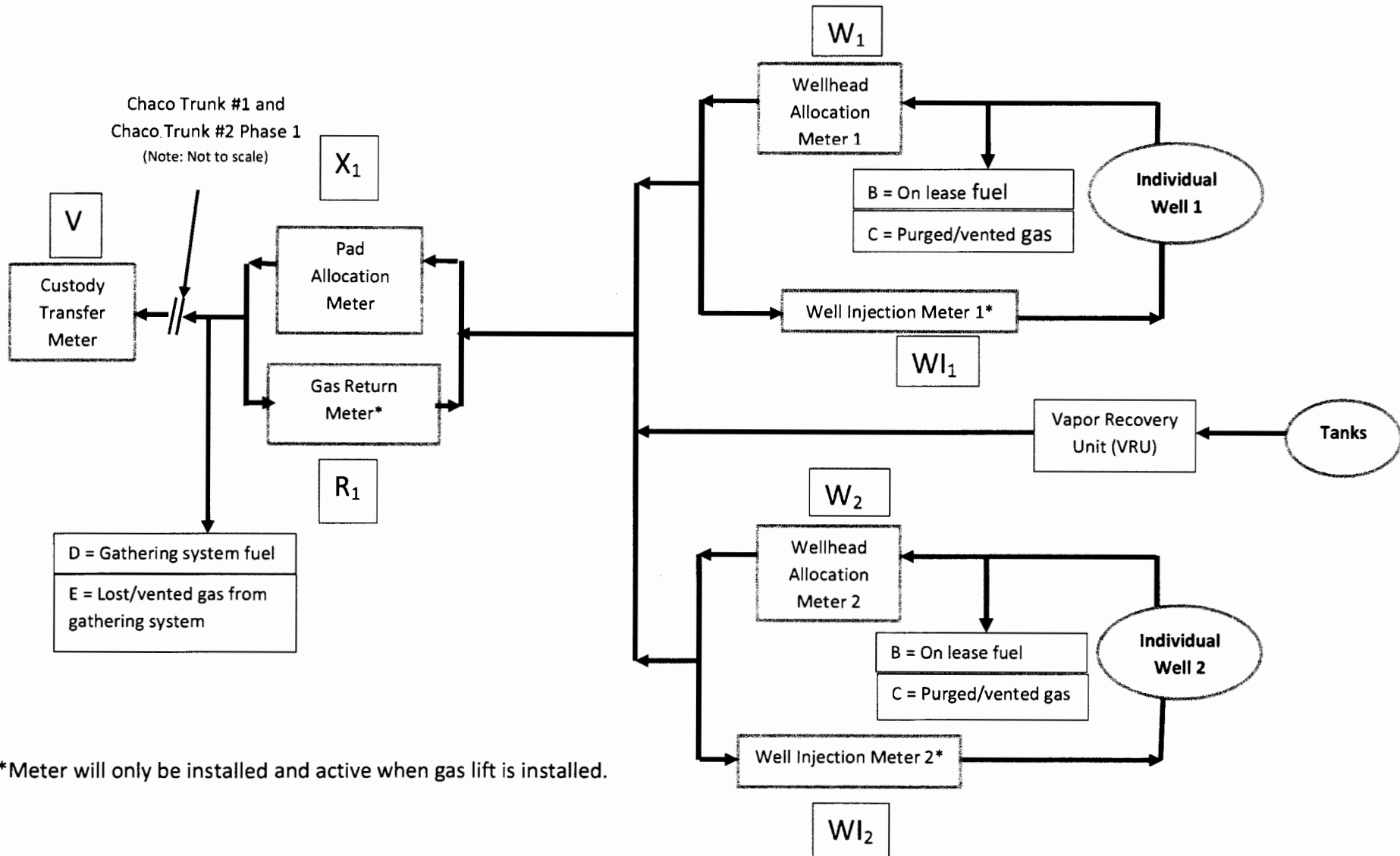
E = Allocated volume of gas lost and/or vented from the gathering system, gathering system equipment, condensate collection, and water collection in MCF. The total volume will be determined using industry accepted procedures the time of the loss. The total volumes lost and/or vented will be allocated to the individual wells affected using factors determined $[(W_1-R_1)/((W_1-R_1)+(W_2-R_2)+(W_n-R_n))]$.

Individual Well BTU's = $[\{(W_n-W_{In})*Z_n\}/\{SUM((W_n-W_{In})*Z_n)\}*(V*Y)*1000]$

Individual well gas heating values to be determined in accordance with BLM regulations.

Attachment No. 5
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico

Gas Measurement Allocation Procedure for Multi-Well Pads



Attachment No. 5
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico

Base Data:

V = Gas Volume (MCF) from Custody Transfer Meter during allocation period (Enterprise Products Partners)

X_x = Gas Volume (MCF) from Pad Allocation Meter during allocation period. (Encana)

R_x = Gas Volume (MCF) from Gas Return Meter at Well Pad (Encana)*

$(X_x - R_x)$ = Gas Volume (MCF) for total Well Pad Production (Encana)

W_x = Gas Volume (MCF) from Wellhead Allocation Meter at individual wells during allocation period. (Encana)

WI_x = Gas Volume (MCF) from Well Injection Meter at individual wells during allocation period. (Encana)*

Y = Heating Value (BTU/scf) from Custody Transfer Meter during allocation period. (Enterprise Products Partners)

Z = Heating Value (BTU/scf) from individual Wellhead Allocation Meter and Well Injection Meter. (Encana)

Allocation Period is typically a calendar month and will be the same for all Well Pads and individual wells.

Allocate the off lease Custody Transfer volume back to the well pad

$$A_{AL} = \text{Well pad allocated volume (MCF)} = [(X_1 - R_1) / ((X_1 - R_1) + (X_2 - R_2) + \dots + (X_n - R_n))] * (V) + D + E$$

Distribute (allocate) the allocated well pad production, (A_{AL}) back to each well on the pad

Gas production (MCF) allocated back to the individual wells on a Well Pad is calculated using the formula:

$$AL\ Net_n = [(W_1 - WI_1) / ((W_1 - WI_1) + (W_2 - WI_2) + \dots + (W_n - WI_n))] * A_{AL}$$

Determine the final allocated production for each well on the pad

$$\text{Final allocated individual well production (MCF)} = AL\ Net_n + B_n + C_n$$

B_n = On lease fuel usage attributed to an individual well, MCF. Determined from equipment specification and operating conditions. This includes, but is not limited to, compression, vapor recovery unit (VRU) compression, burners, and pump jacks.

Attachment No. 5
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico

C_n = Lost and/or vented gas attributed to an individual well from well and/or lease equipment, MCF. Calculated using equipment and piping specifications and operating pressures.

D = Allocated fuel from gathering system equipment, MCF. The total fuel required to operate gathering system equipment will be allocated to the Well Pads benefiting from the equipment using allocation factors determined by $[(X_1-R_1)/((X_1-R_1)+(X_2-R_2)+(X_n-R_n))]$ and for individual wells using allocation factors determined by $[(W_1-W_{I1})/((W_1-W_{I1})+(W_2-W_{I2})+(W_n-W_{In}))]$.

E = Allocated volume of gas lost and/or vented from the gathering system, gathering system equipment, condensate collection, and water collection in MCF. The total volume will be determined using industry accepted procedures the time of the loss. The total volumes lost and/or vented will be allocated to the Well Pads affected using factors determined by $[(X_1-R_1)/((X_1-R_1)+(X_2-R_2)+(X_n-R_n))]$, and for individual wells using factors determined by $[(W_1-W_{I1})/((W_1-W_{I1})+(W_2-W_{I2})+(W_n-W_{In}))]$.

Individual Well BTU's = $[(W_n-W_{In}) * Z_n] / \{ \text{SUM}((W_n-W_{In}) * Z_n) \} * (V * Y) * 1000$

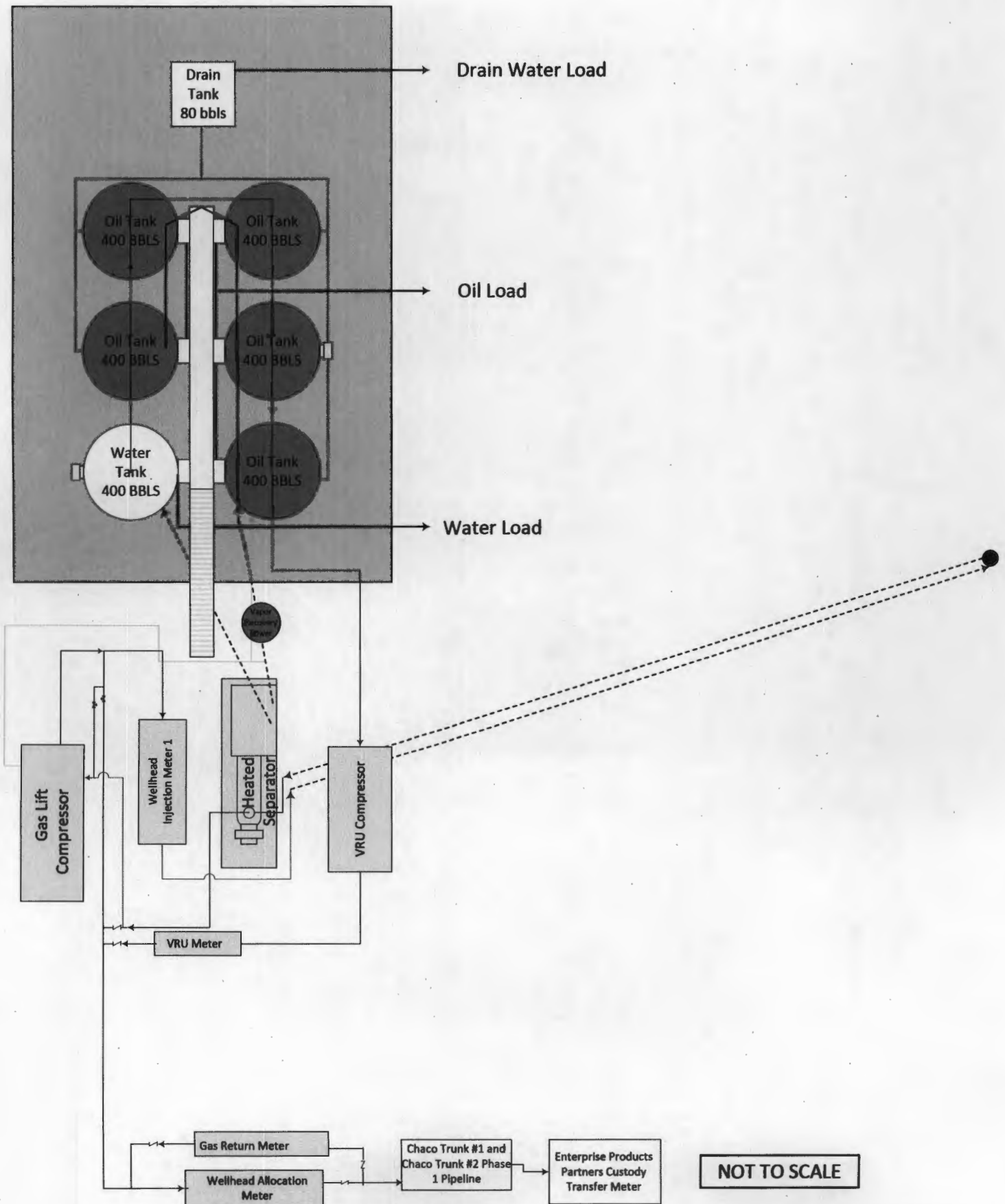
Individual well gas heating values to be determined in accordance with BLM regulations.

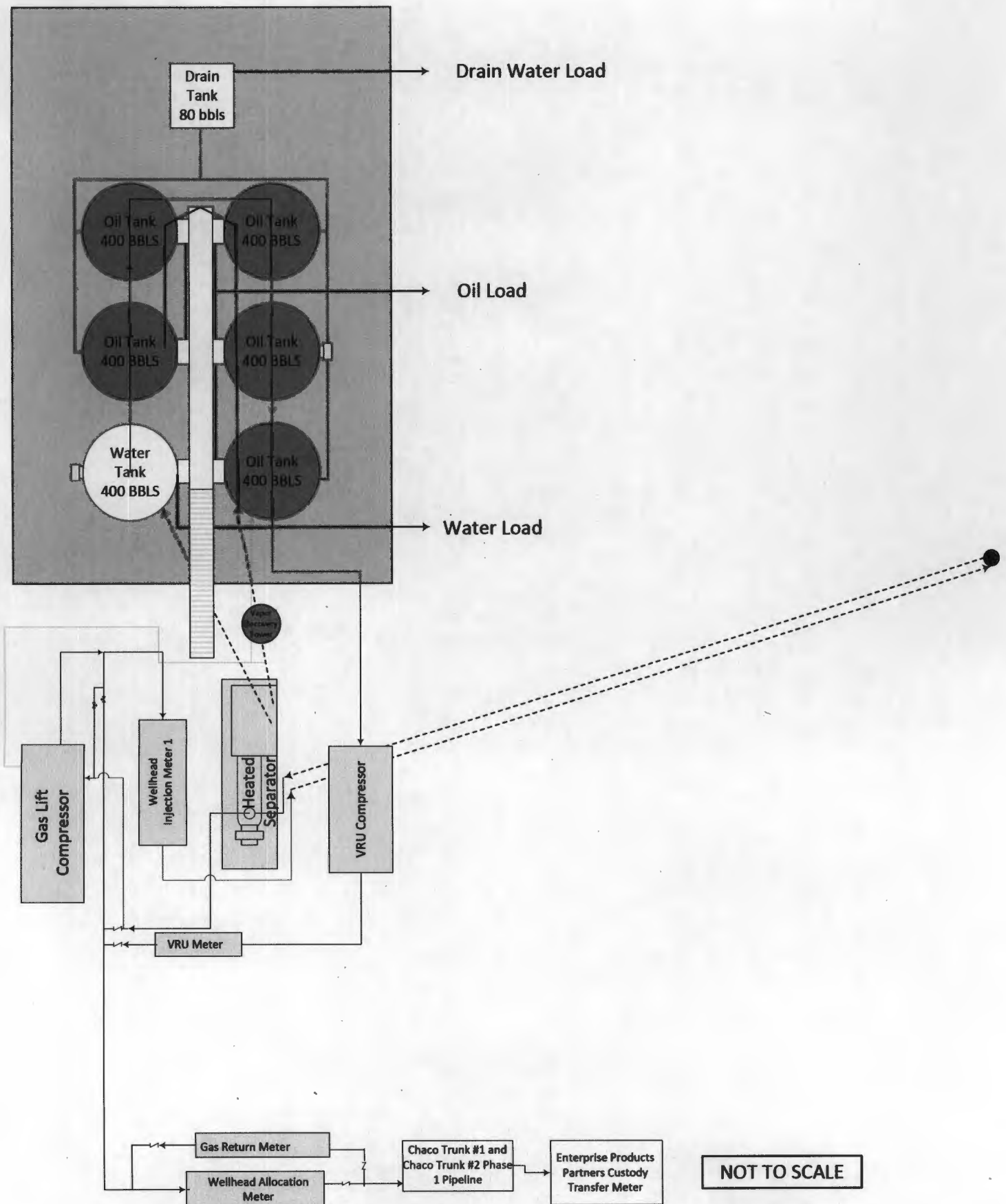
Attachment No. 6
Encana Oil & Gas (USA) Inc.
Chaco Trunk #1 and Chaco Trunk #2 Phase 1 Gathering System
San Juan and Sandoval Counties, New Mexico
Application Dated August 8, 2014

Gas Lift Schematics and descriptions for each of the twenty-one (21) well pads attached herein:

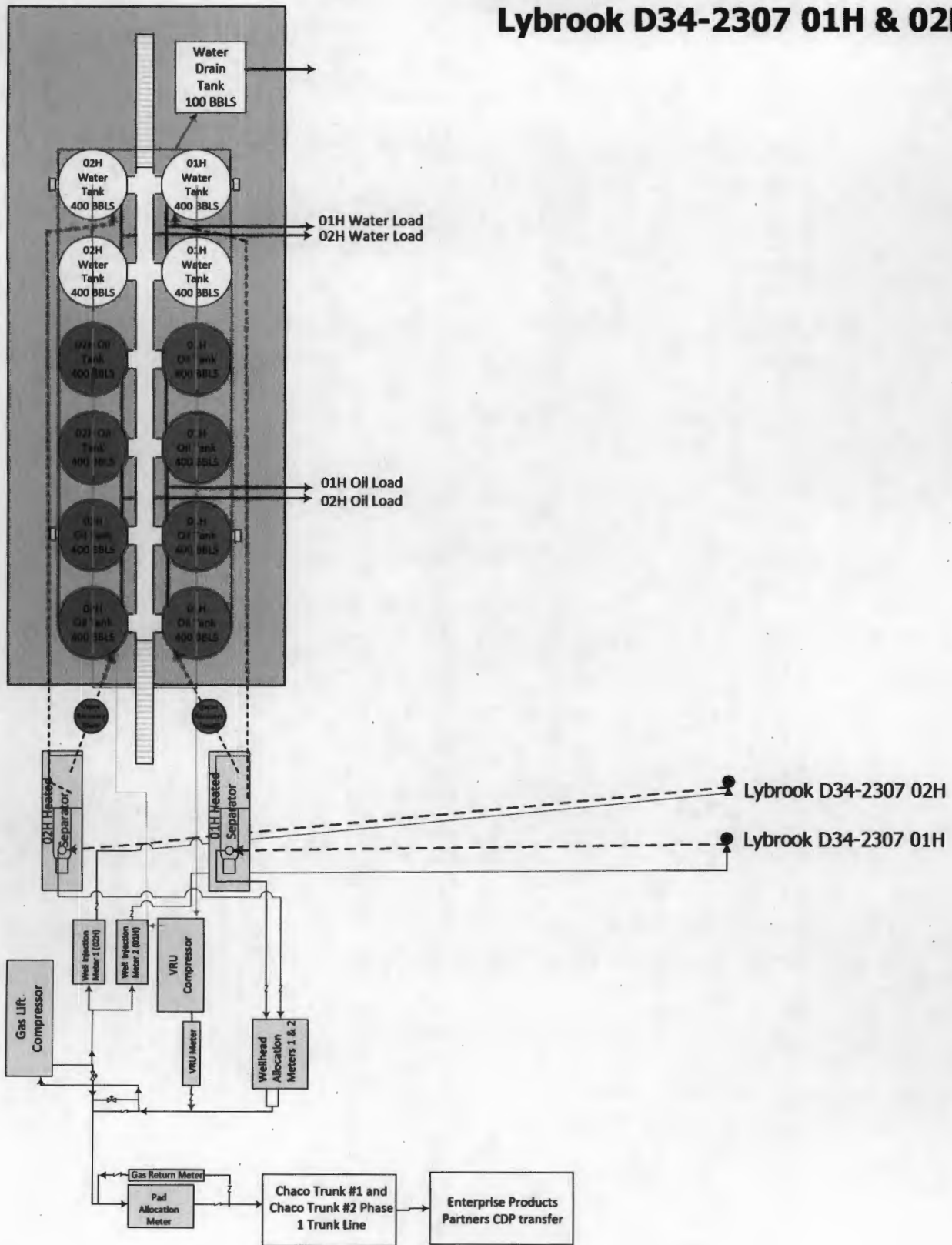
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- Lybrook E12-2208
- Lybrook D34-2307
- Lybrook E20-2307
- Lybrook E33-2307
- Lybrook E11-2208
- Lybrook E15-2208
- Lybrook H04-2208
- Lybrook L29-2307
- Lybrook L33-2307
- Lybrook L34-2307
- Lybrook M35-2308
- Lybrook O20-2307
- Lybrook O35-2308
- Lybrook P28-2307
- Lybrook P31-2307
- Lybrook P32-2307
- Lybrook G30-2307 01H
- Lybrook G31-2307 01H
- Lybrook J31-2307 01H
- Lybrook O30-2307 01H

Lybrook D12-2208 01H



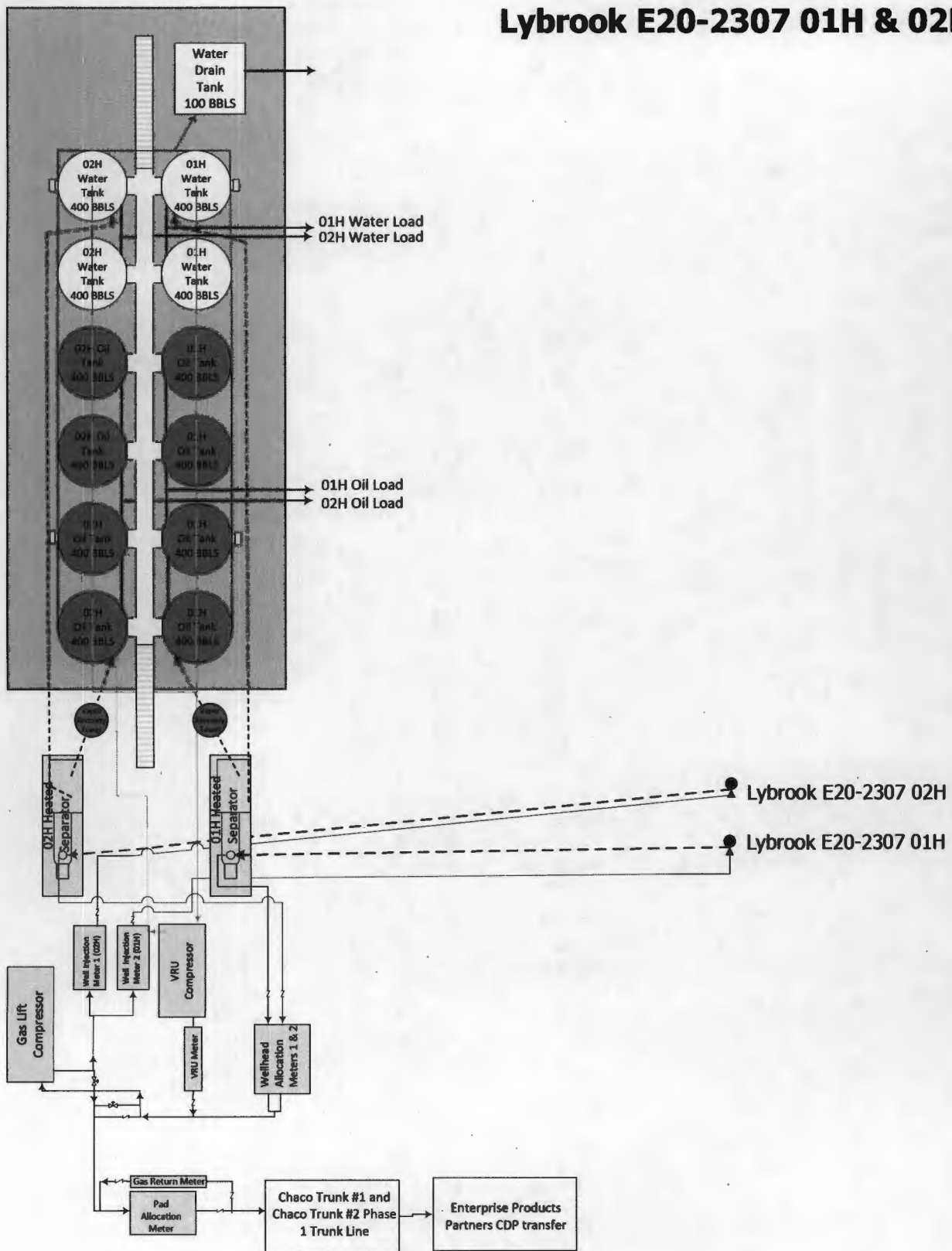


Lybrook D34-2307 01H & 02H



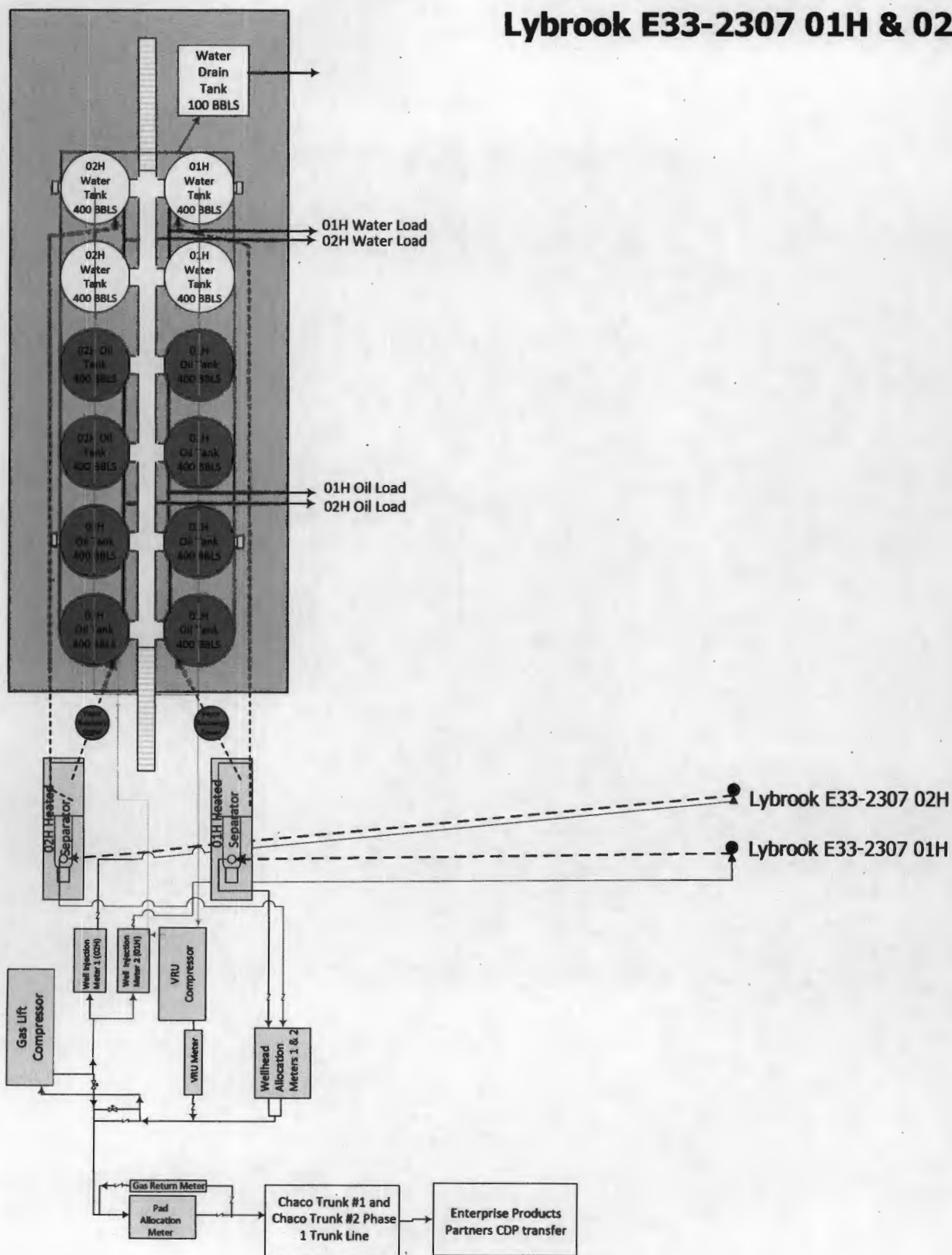
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Lybrook E20-2307 01H & 02H



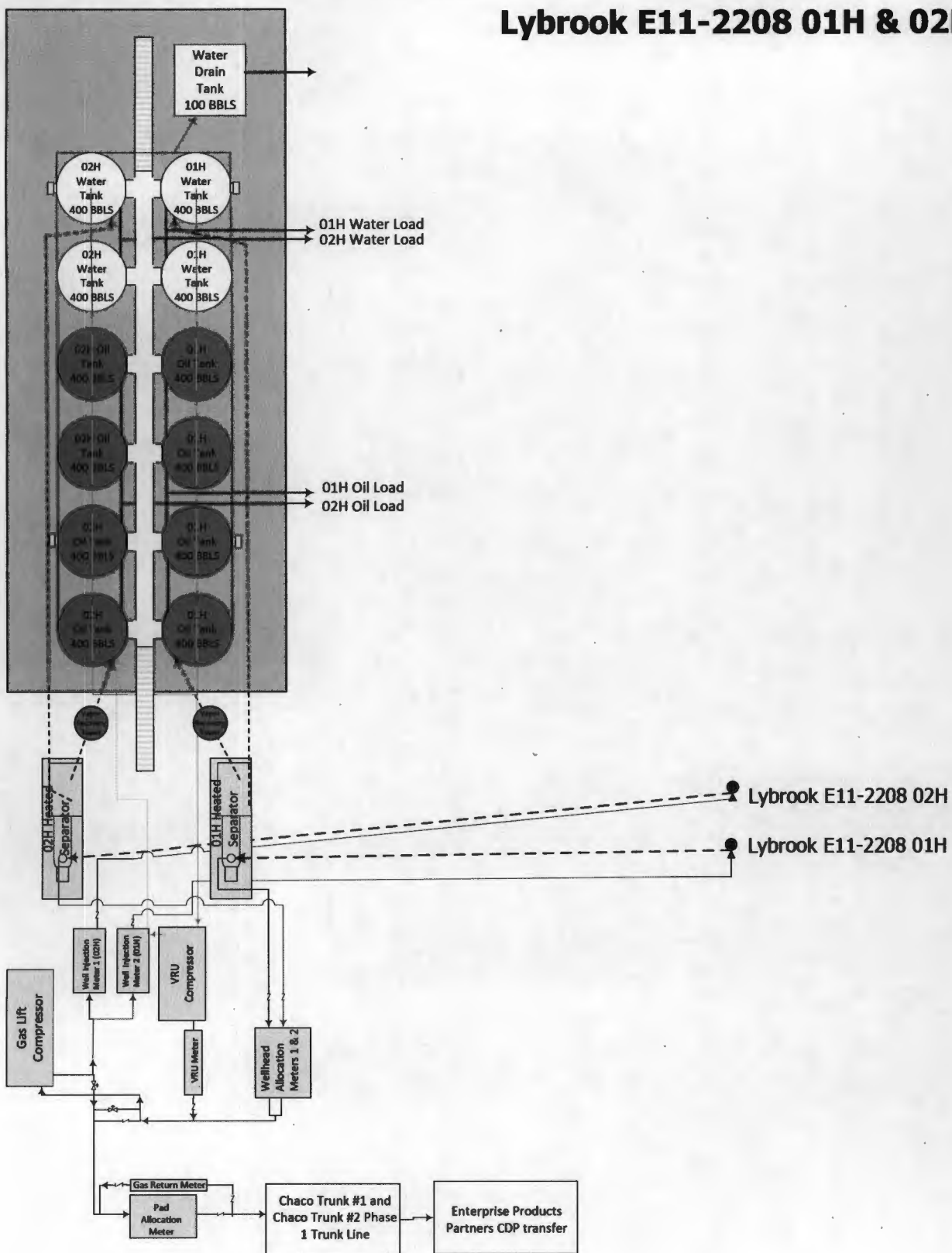
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Lybrook E33-2307 01H & 02H



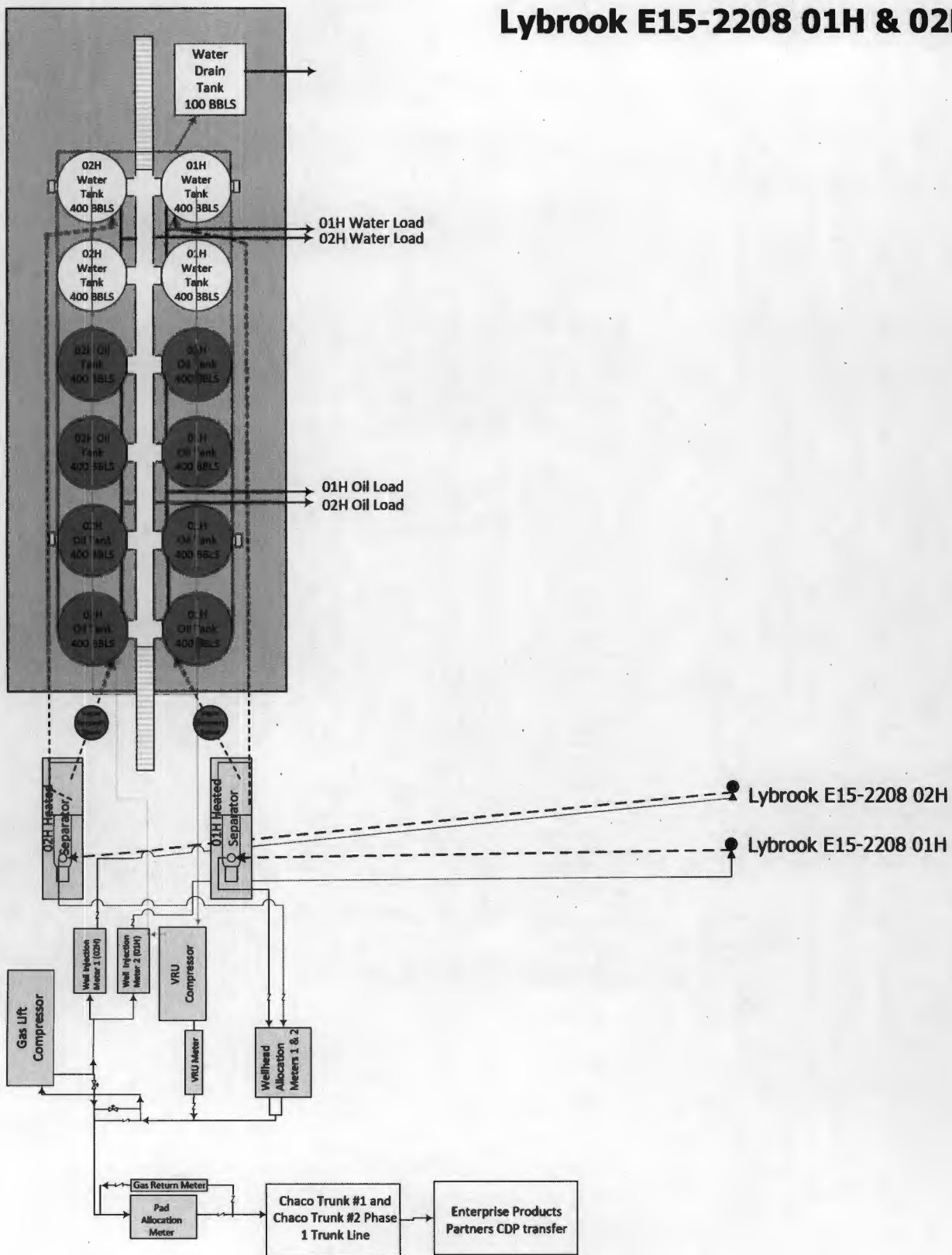
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Lybrook E11-2208 01H & 02H

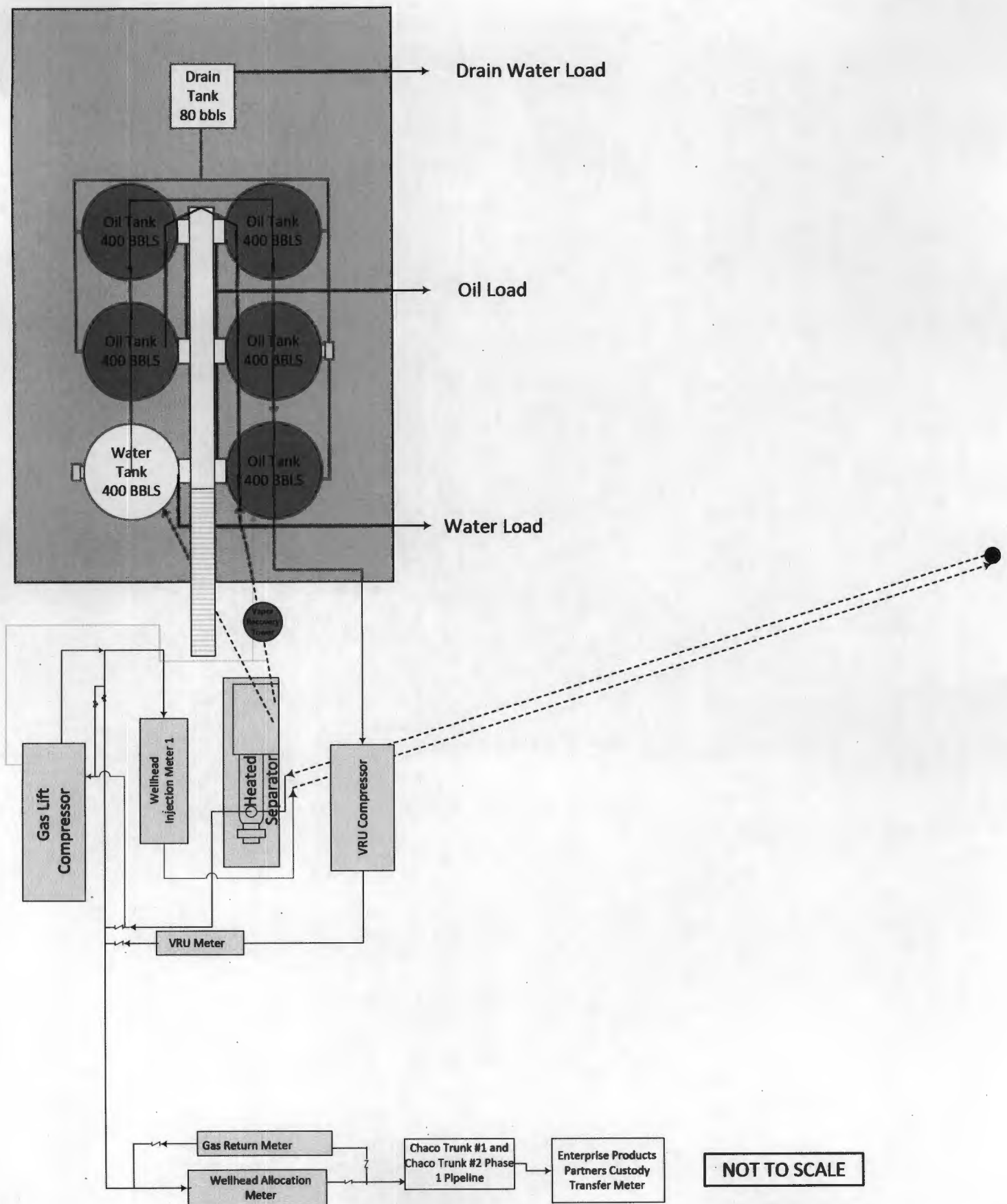


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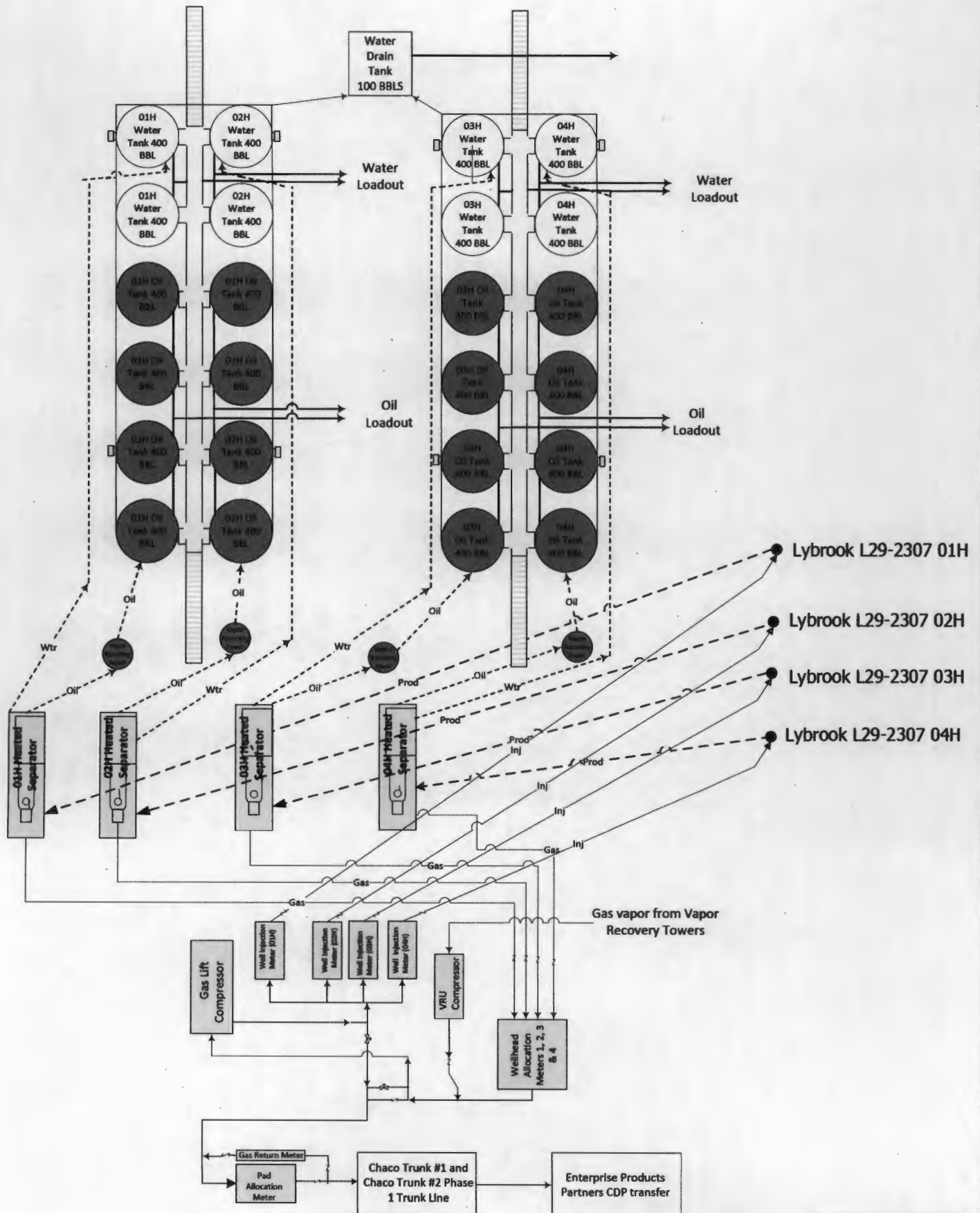
Lybrook E15-2208 01H & 02H



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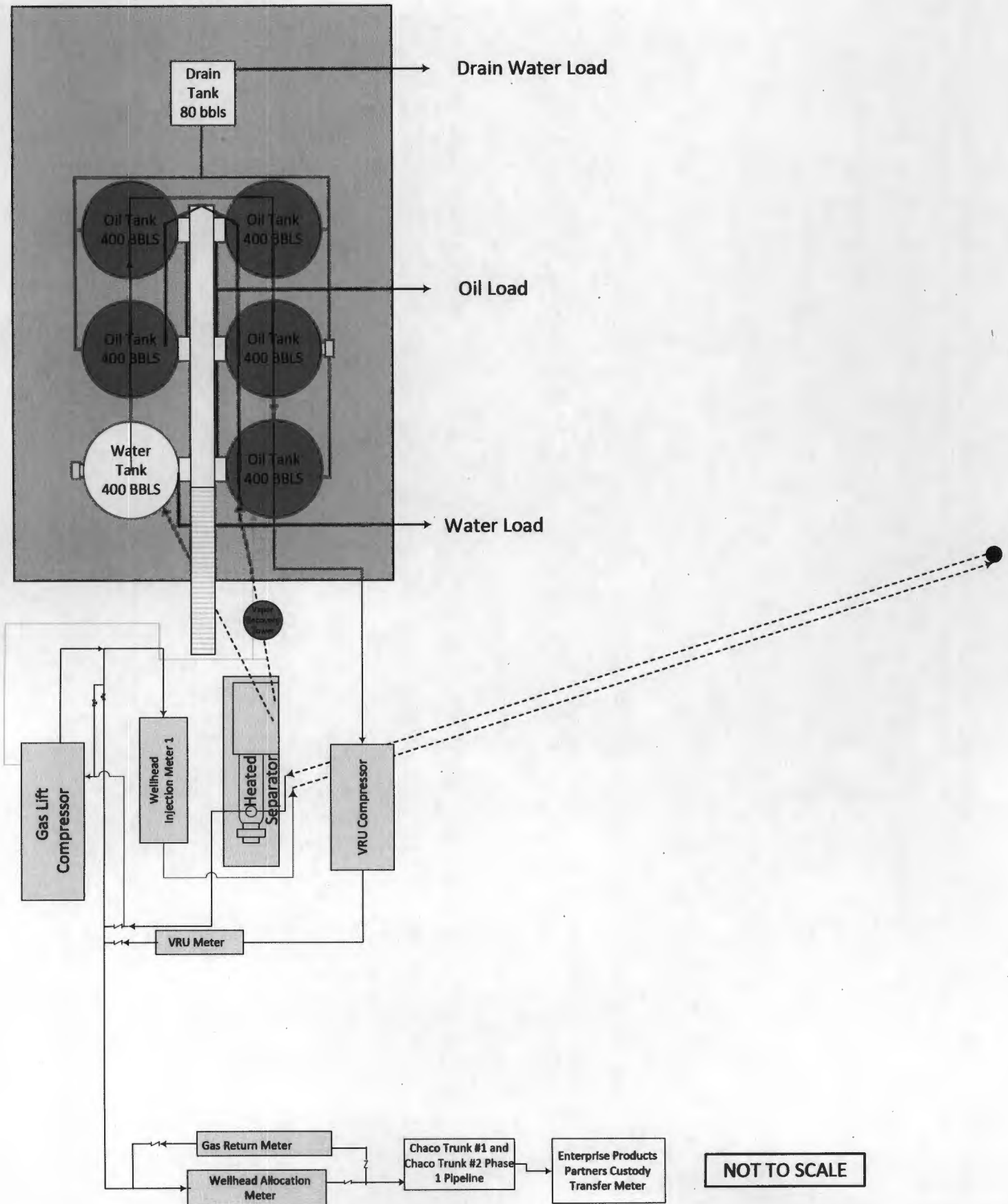


Lybrook L29-2307 01H, 02H, 03H & 04H

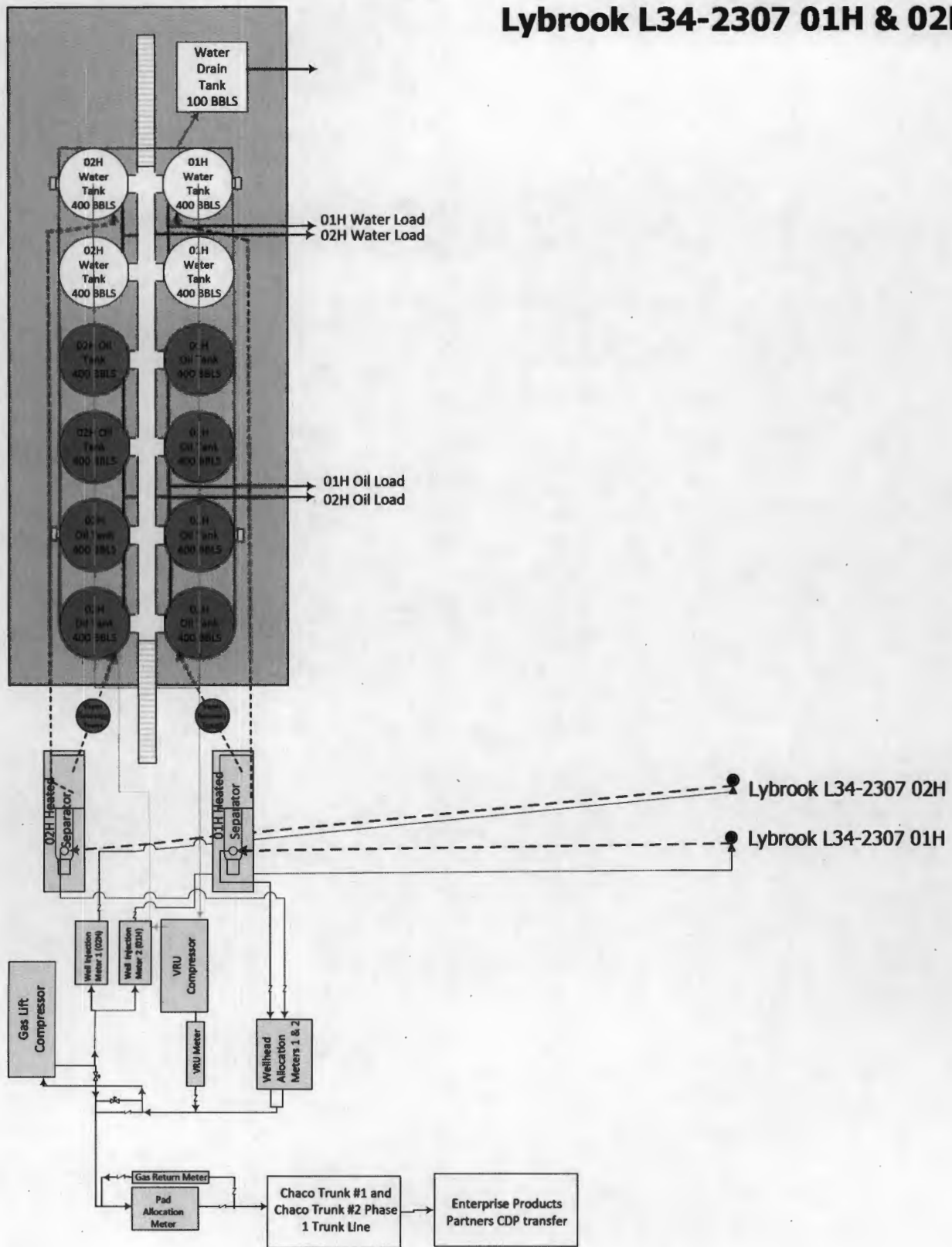


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Lybrook L33-2307 01H

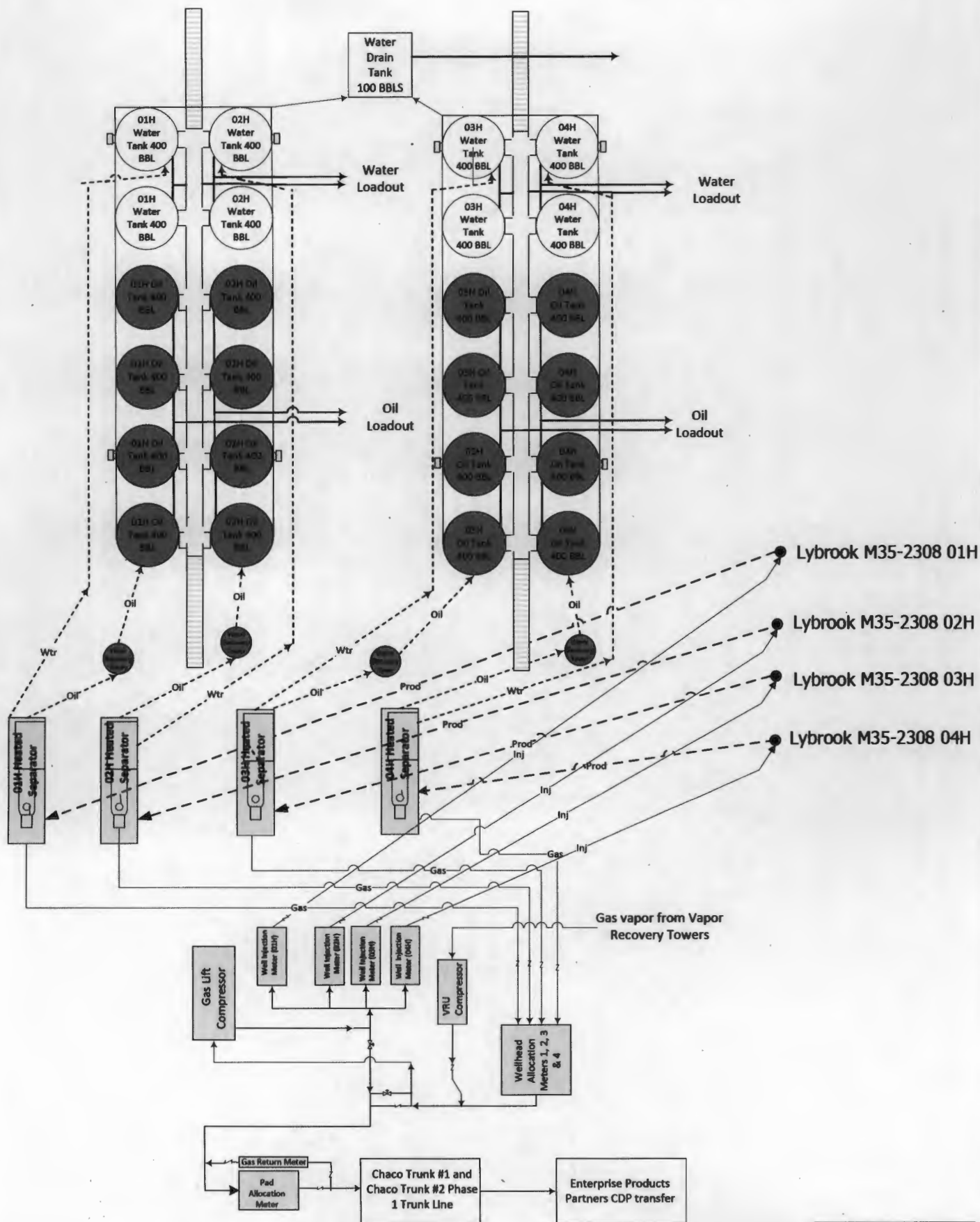


Lybrook L34-2307 01H & 02H



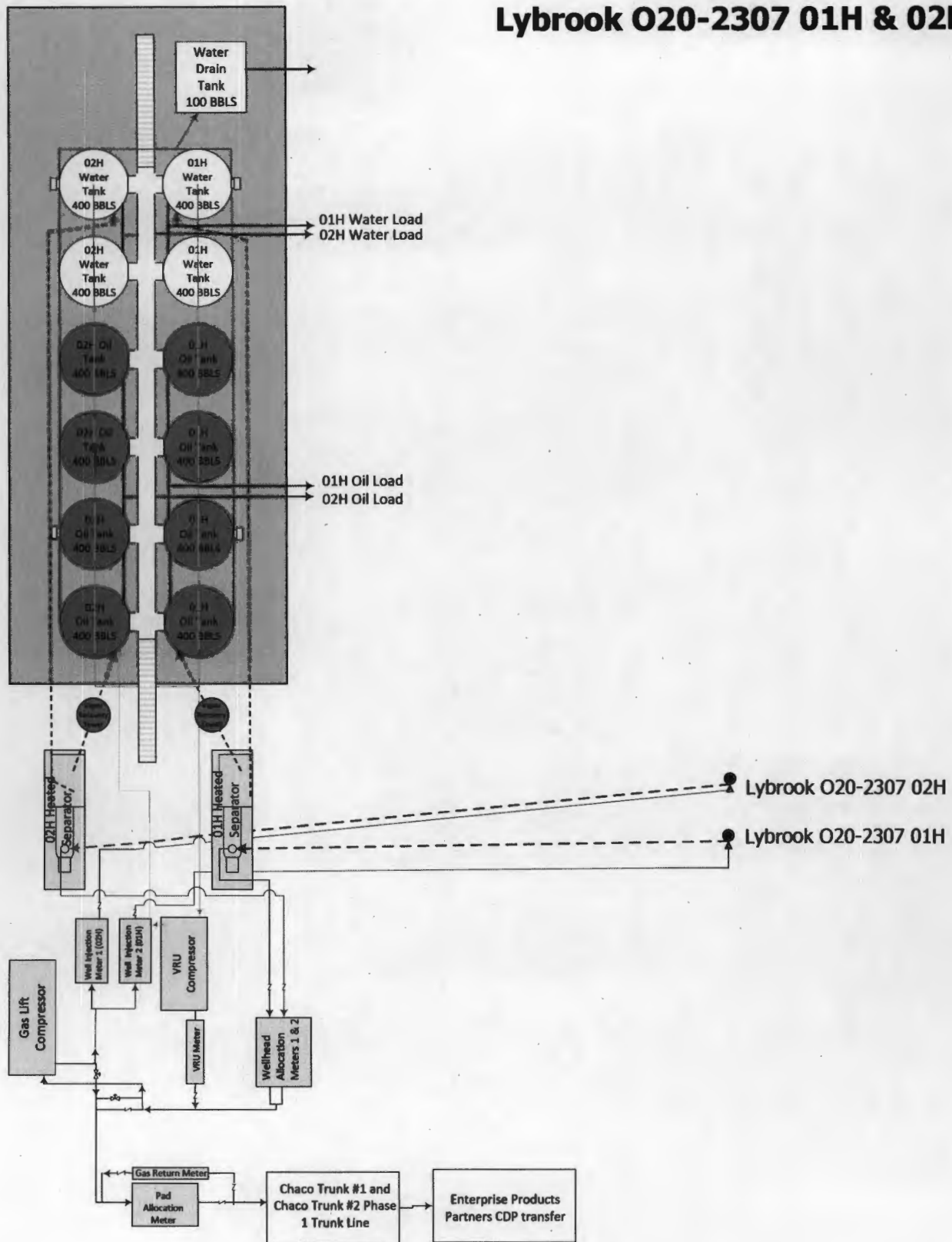
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Lybrook M35 2308 01H, 02H, 03H & 04H



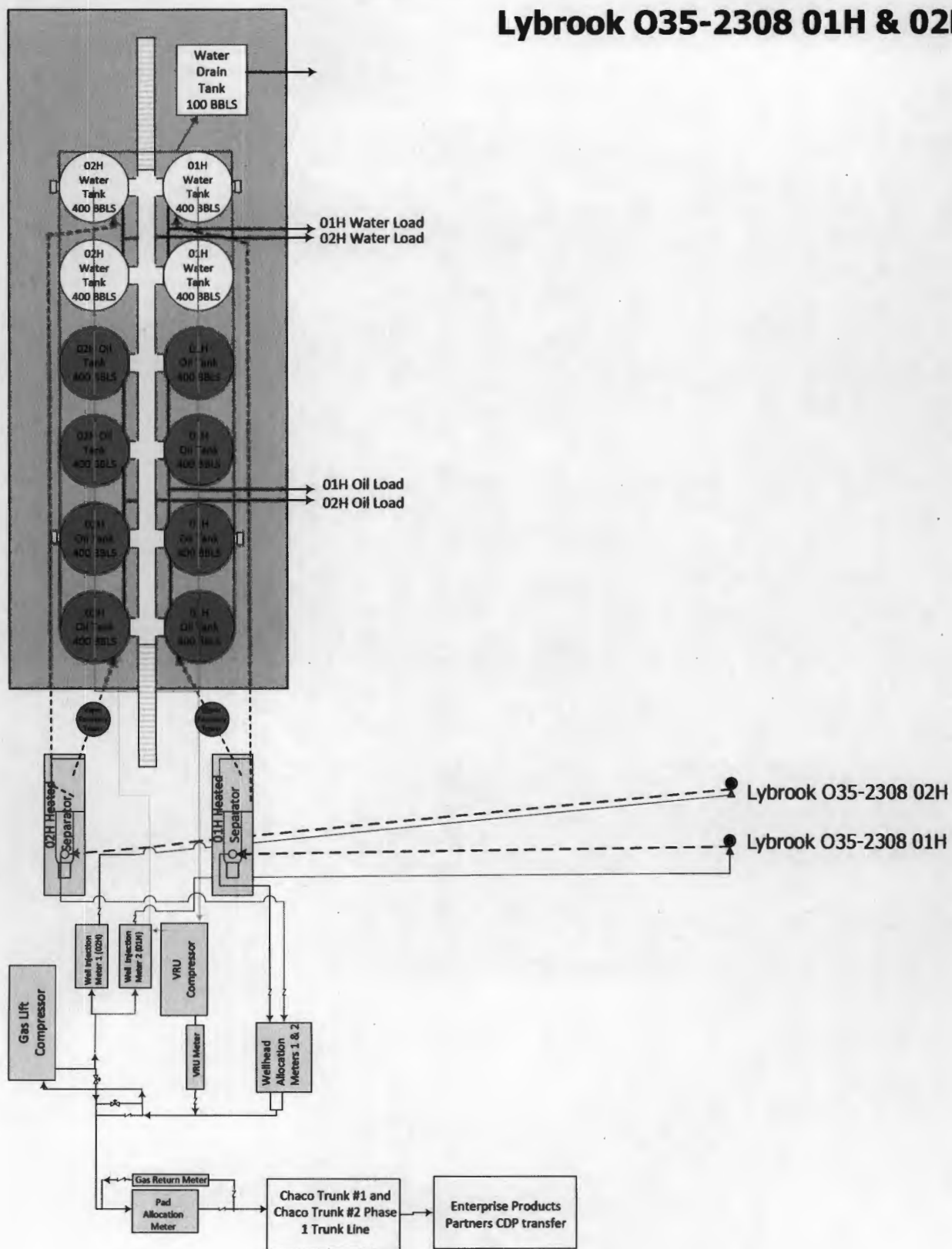
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Lybrook O20-2307 01H & 02H



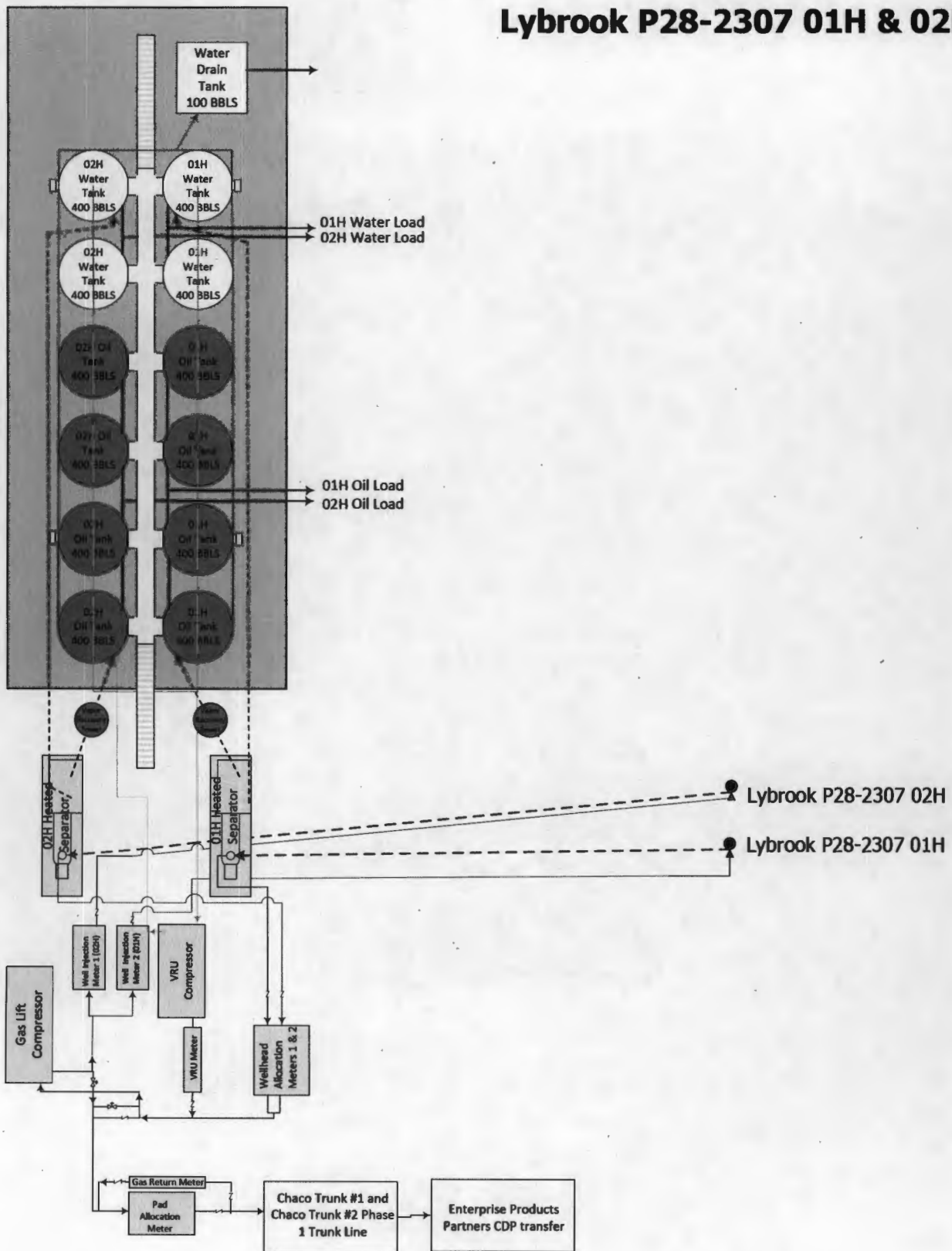
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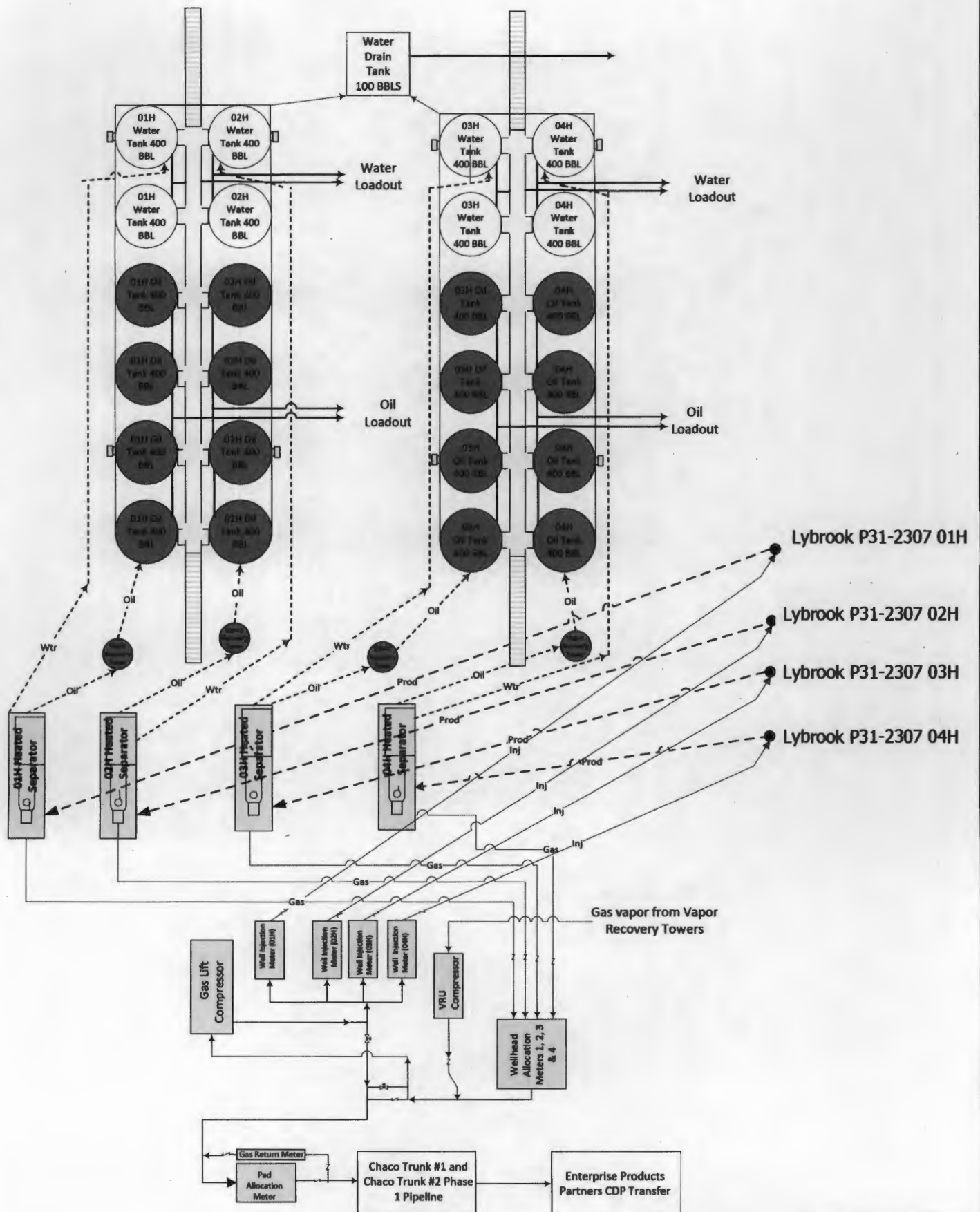


NOT TO SCALE

Lybrook P28-2307 01H & 02H

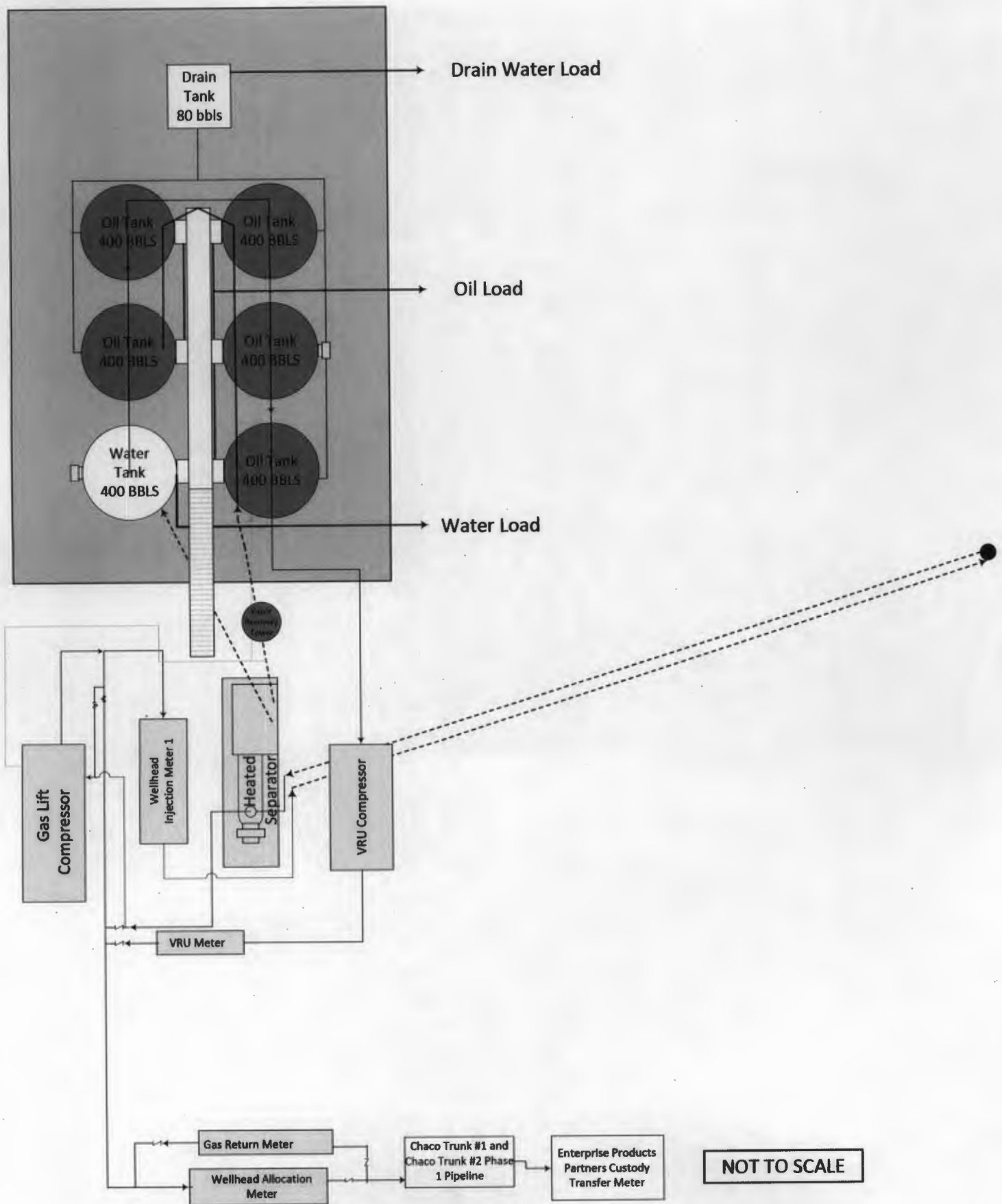


Lybrook P31-2307 01H, 02H, 03H & 04H

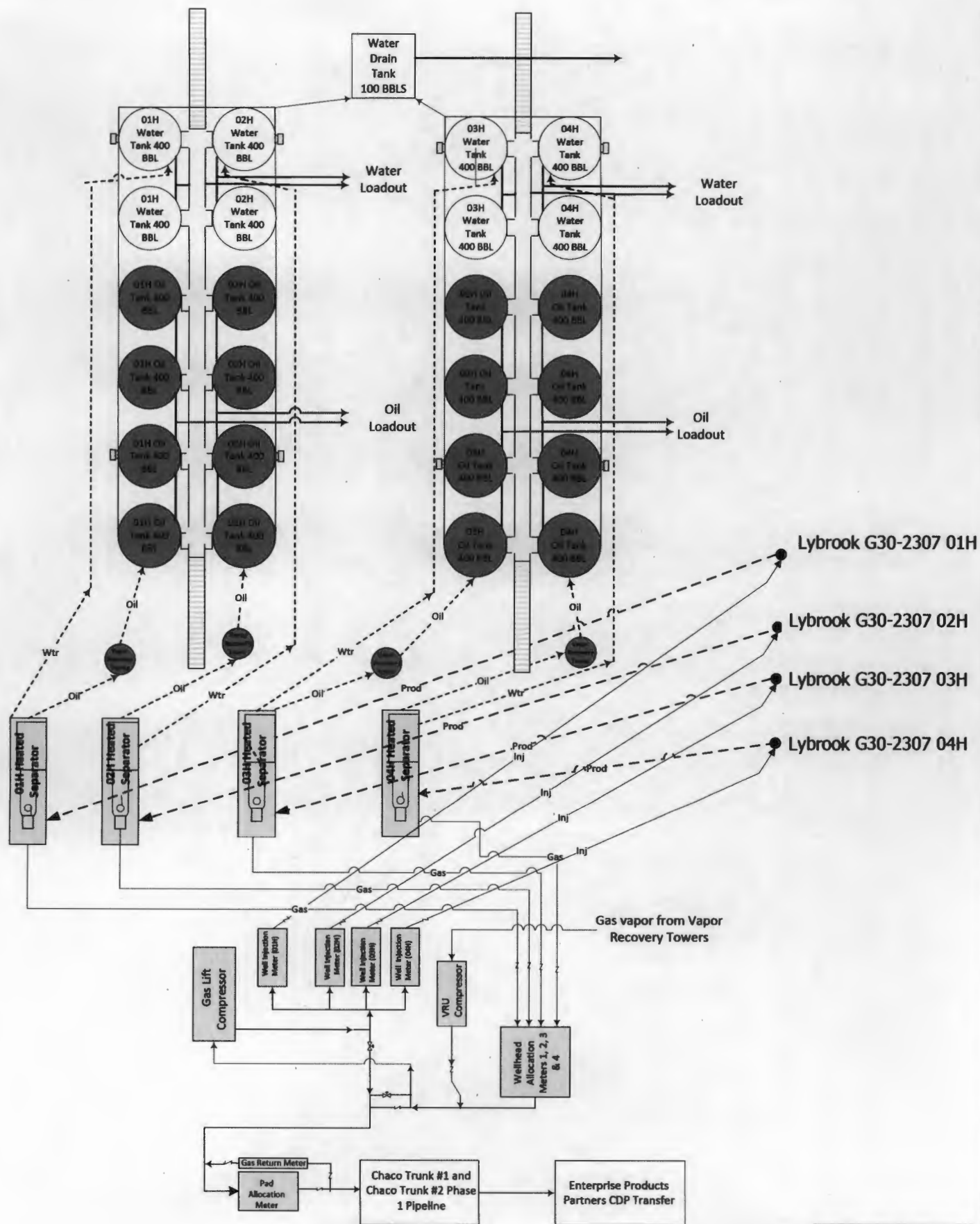


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Lybrook P32-2307 01H

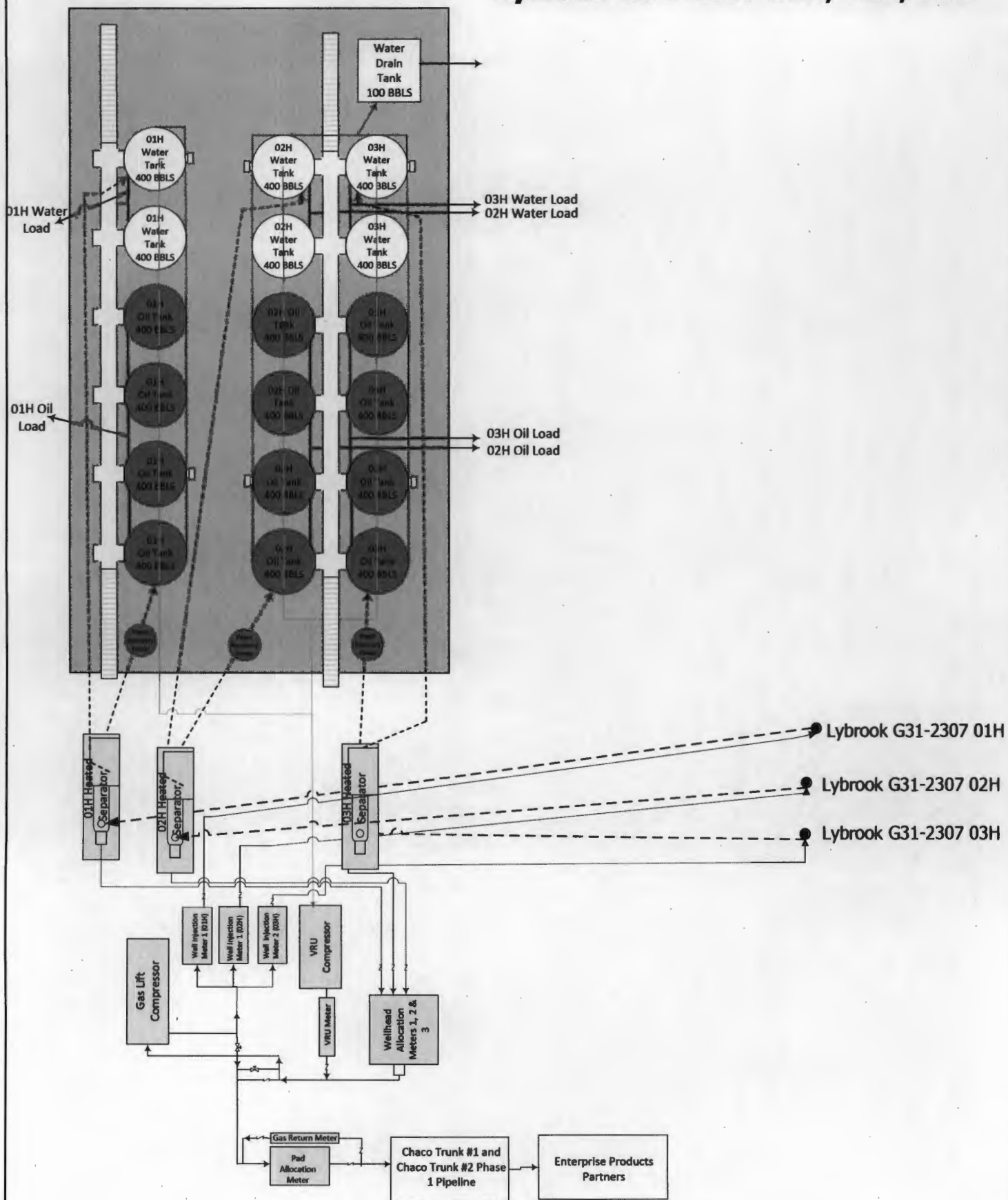


Lybrook G30-2307 01H, 02H, 03H & 04H



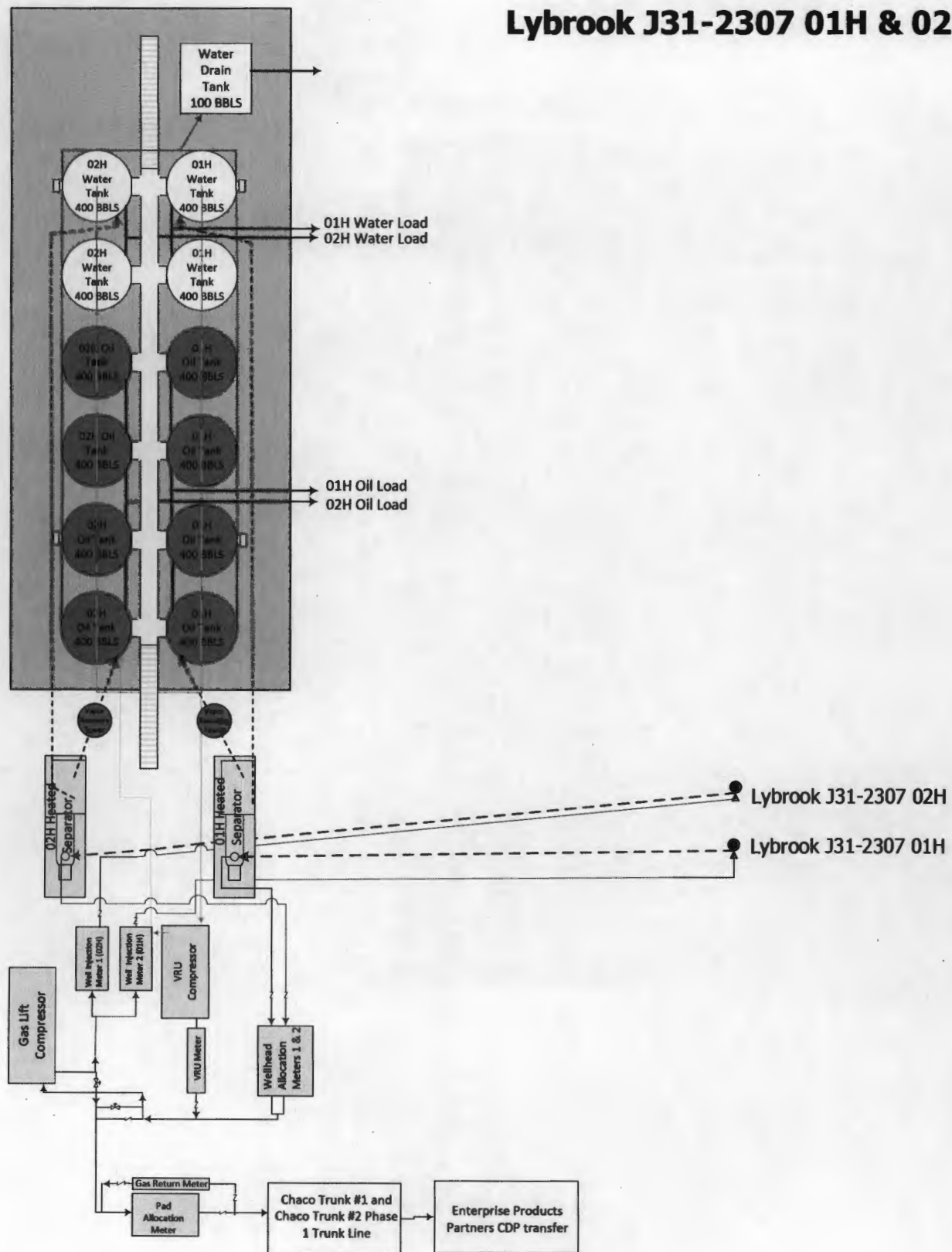
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Lybrook G31-2307 01H, 02H, 03H



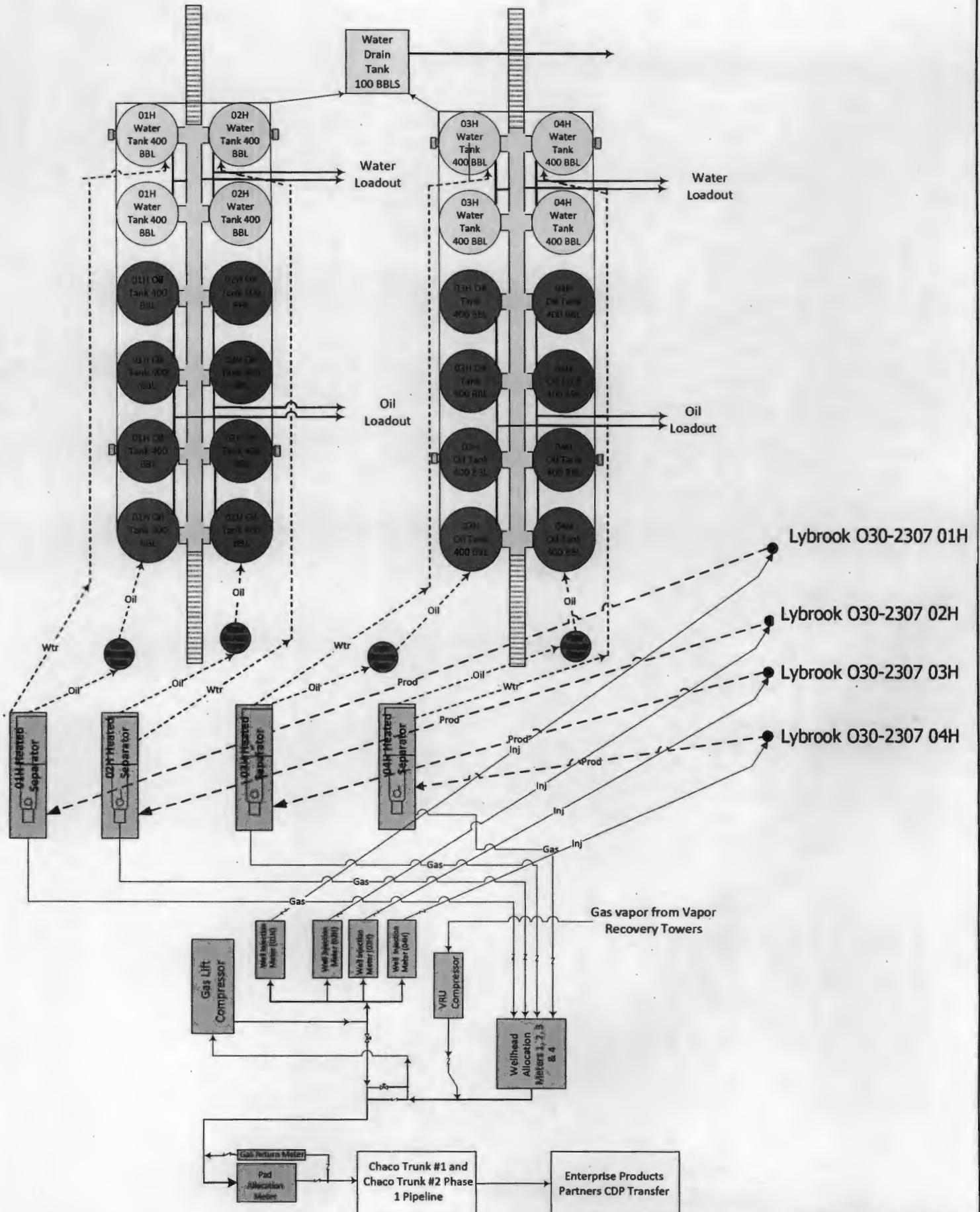
NOT TO SCALE

Lybrook J31-2307 01H & 02H



NOT TO SCALE

Lybrook O30-2307 01H, 02H, 03H & 04H



NOT TO SCALE