

DATE IN 1.30.12	SUSPENSE	ENGINEER DB	LOGGED IN 1.30.12	TYPE NSL	APP NO. 1203056484
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PTGW

162928

ABOVE THIS LINE FOR DIVISION USE ONLY

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



ENERGEN 7092

S.J. 30-4 Unit Com #66#

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

6563

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]

P-26-30W-4W

- [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

SWD-820
 on a well in
 this same sec.

[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.

Bryan Lewis

Print or Type Name

Signature

Title

Date

e-mail Address

RECEIVED OCD
2012 JAN 30 A 11: 31

CERTIFIED RETURN RECEIPT REQUESTED
7009 2820 0000 5801 7593

Wednesday, January 25, 2012

Mr. David Brooks
New Mexico Oil Conservation Division
1220 South St. Francis Drive
Santa Fe, NM 87505

D- 26-30N-4W

**RE: Administrative Approval of Unorthodox Location
San Juan 30-4 Unit Com # 66H
1205' FNL, 894' FWL-Section 26-T30N-R4W--Surface Location
2100' FNL, 200' FWL-Section 27-T30N-R4W—Bottom Hole location (proposed)
Rio Arriba County, New Mexico**

Energen Resources Corporation hereby requests Administrative Approval for an Unorthodox Location of its San Juan 30-4 Unit Com # 66H East Blanco Pictured Cliffs formation well under the provisions of New Mexico Oil Conservation Division, East Blanco Pictured Cliffs pool rules.

This well is being drilled as a horizontal well bore and is situated so that the longest possible lateral can be achieved. This additional length is required to provide for the potential for the production of the most reserves and the best possible economics for this well.

The horizontal portion of this well is located in the S/2 N/2 of Section 27-T30-R4W, Rio Arriba County, New Mexico and is dedicated to a special proration unit consisting of the N/2 of Section 27-T30N-R4W in the East Blanco Pictured Cliffs gas pool. The horizontal portion goes through 2 existing regular East Blanco Pictured Cliffs proration units and is in the southerly portion to avoid interfering with the existing wells to the North.

The entry point into the East Blanco Pictured Cliffs gas pool to the East and the bottom hole location at the western terminus of the well are both located closer than 660' from the eastern and western boundaries of said Section 27 by 460'. That portion of the

Mr. David Brooks
New Mexico Oil Conservation Division
Wednesday, January 25, 2012
Page 2 of 2

horizontal wellbore in the NE/4 of Section 27 is within the boundaries of the San Juan 30-4 Unit but is not internal to the Unit so it is subject to the 660' setback. That portion of the horizontal wellbore in the NW/4 of Section 27 is not within the San Juan 30-4 Unit boundaries and is also subject to the 660' setback. There is one (1) offsetting East Blanco Pictured Cliffs spacing unit adjoining to the East and one (1) offsetting East Blanco Pictured Cliffs spacing unit adjoining to the West¹ of this special proration unit. Both of these offsetting spacing units are non-unit acreage and are subject to the 660' setback; both setbacks are being breached.

Energen Resources Corporation is the operator of both of the adjoining affected spacing units. There are other working interest owners in the adjoining affected spacing units that have been notified of the Unorthodox Location proposed herein. Those owners have been asked to approve waivers within 20 days from receipt if they have no objections to the proposal. A list of these owners and copies of the waiver letter is attached to this proposal. Also attached is a well location plat showing the dedicated acreage (C102) and a plat showing the affected spacing units and owners.

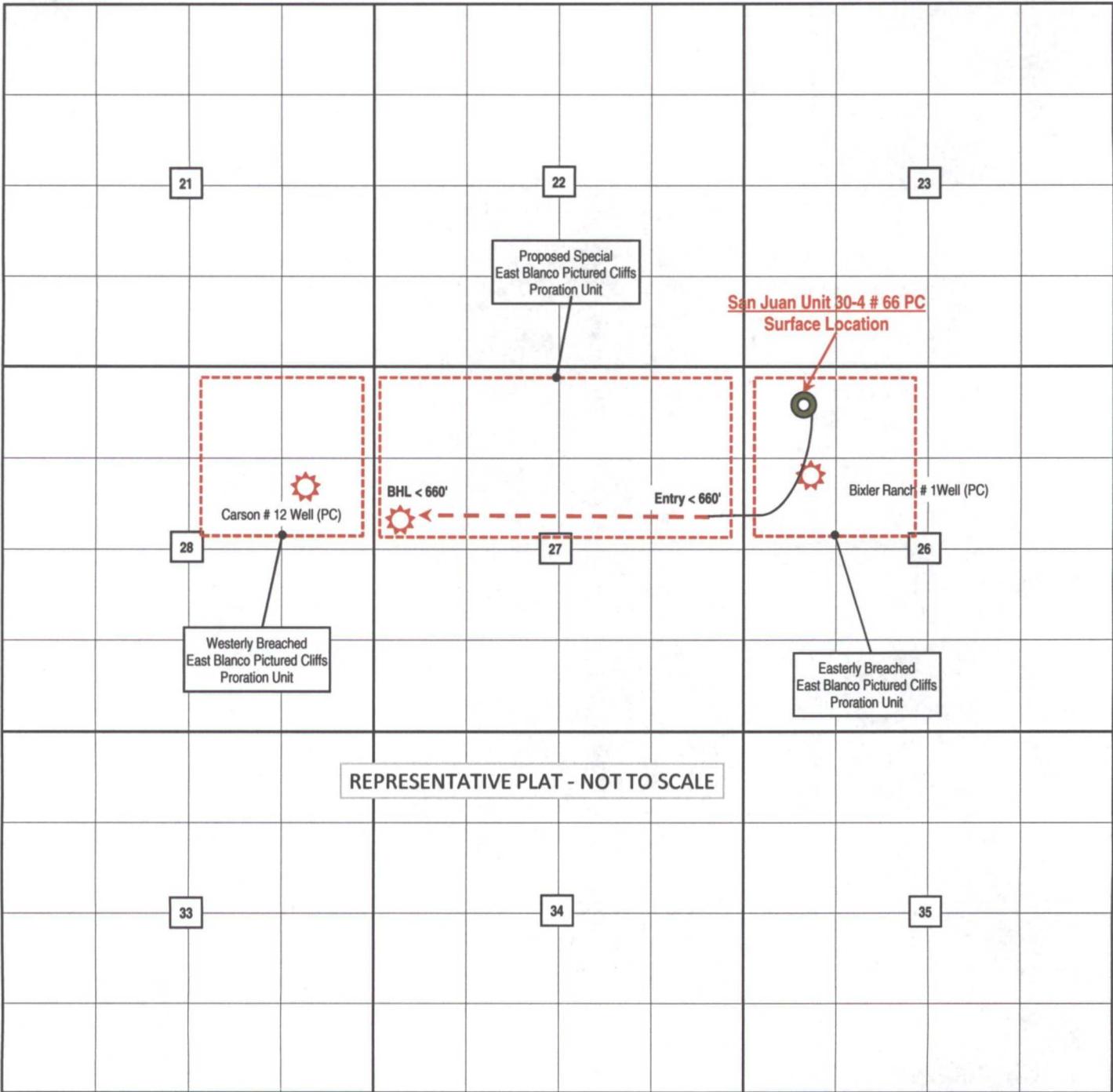
Your favorable consideration of this request would be appreciated.

Sincerely,

A handwritten signature in cursive script that reads "Bryan Lewis".

Bryan Lewis
District Landman

¹ The PC unit to the West is not producing yet. That well, the Carson 12 well is currently only producing from the Fruitland Coal formation but the APD was approved for dual completion in the PC.



REPRESENTATIVE PLAT - NOT TO SCALE

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 72400	Pool Name BLANCO PICTURED CLIFFS, EAST	
Property Code	Property Name SAN JUAN 30-4 UNIT COM		Well Number 56	
GRID No. 162928	Operator Name ENERGEN RESOURCES CORPORATION		Elevation 7292'	

10 Surface Location

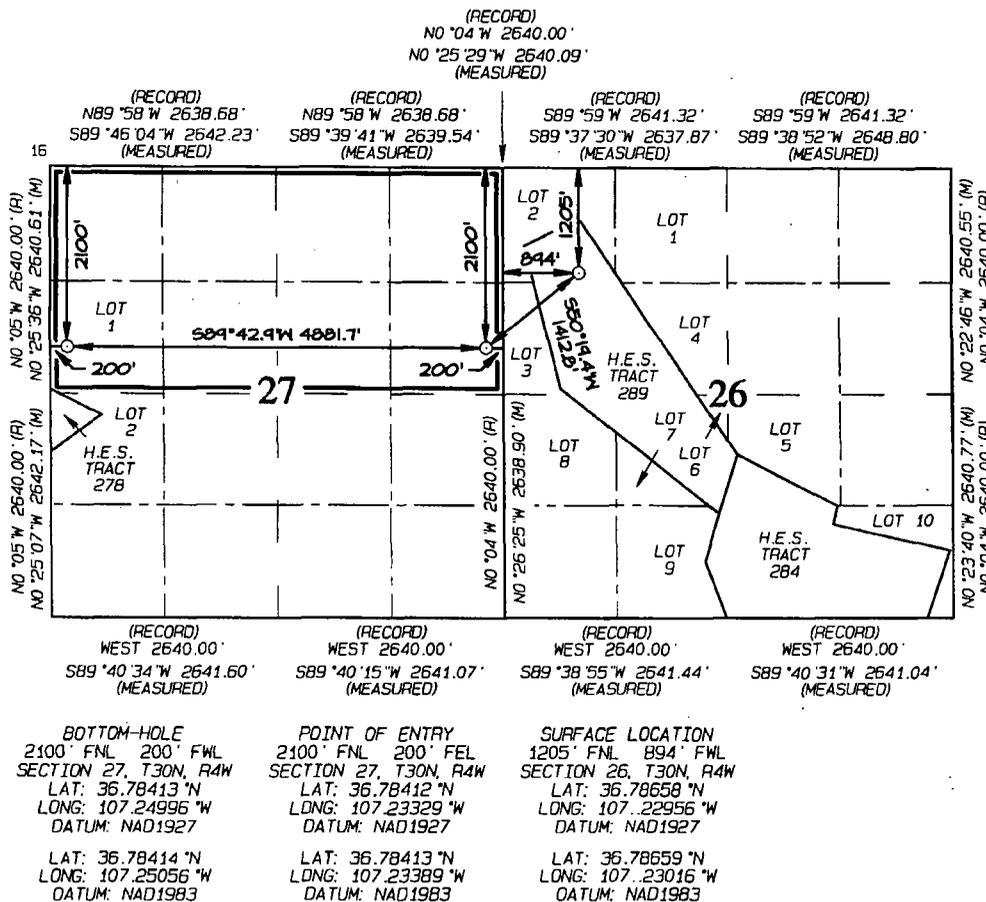
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	26	30N	4W		1205	NORTH	894	WEST	RIO ARRIBA

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	27	30N	4W		2100	NORTH	200	WEST	RIO ARRIBA

12 Dedicated Acres 320.0 Acres - N/2 Section 27					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

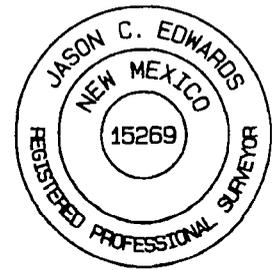
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom-hole location or has a right to drill this well at this 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 _____ Date _____
Printed Name _____
E-mail Address _____

18 SURVEYOR CERTIFICATION

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

Survey Date: NOVEMBER 16, 2011
Signature and Seal of Professional Surveyor



JASON C. EDWARDS
Certificate Number 15269

OWNER NAME & ADDRESS LIST

**04165 Dugan Production Corporation
Post Office Box 420
Farmington, NM 87499-0420**

**04188 Mar Oil & Gas Corporation Inc
Post Office Box 5155
Santa Fe, NM 87502**

**04555 JABCO LLC
Bank of America, NA Agent
Post Office Box 840738
Dallas, TX 75284**

**05735 TH McElvain Oil & Gas LLLP
1050 17th Street, Suite 2500
Denver, CO 80265**

**06474 Burlington Resources Oil & Gas Co LP
Real Property Administration
Post Office Box 7500
Bartlesville, OK 74005**

**30341 Charles W Gay
% James Raymond
Post Office Box 291445
Kerrville, TX 78029**

**30342 Lorryn Gay Hacker
% James Raymond
Post Office Box 291445
Kerrville, TX 78029**

**36676 McKay Oil & Gas LLC
Post Office Box 14738
Albuquerque, NM 87191**

**38686 Providence Minerals LLC
14860 Monfort Drive, Suite 209
Dallas, TX 75254**

**41978 Thomas P Tinnin
2303 Candelaria Road NW
Albuquerque, NM 87107**

**41979 TinMil
% Robert P Tinnin Jr
500 Marquette Avenue NW, Suite 1300
Albuquerque, NM 87102**

**45271 J & M Raymond
James M Raymond
Post Office Box 291445
Kerrville, TX 78029**

**56688 Trust Of Ruth Zimmerman
Hazel Z Hart, Trustee
842 Muirlands Vista Way
La Jolla, CA 92037**

**49922 Rio Aribagas Ltd
% Eddy Dreyer Management Co as Agent
4925 Greenville Avenue, Suite 900
Dallas, TX 75206**

**57822 Tamacam LLC
% James Raymond
Post Office Box 291445
Kerrville, TX 78029**



CERTIFIED RETURN RECEIPT REQUESTED

7009 2820 0000 5801 7609

Wednesday, January 25 2012

Dugan Production Corporation
Post Office Box 420
Farmington, NM 87499-0420

**RE: Administrative Approval of Unorthodox Location
San Juan 30-4 Unit Com # 66H
1205' FNL, 894' FWL-Section 26-T30N-R4W--Surface Location
2100' FNL, 200' FWL-Section 27-T30N-R4W—Bottom Hole location (proposed)
Rio Arriba County, New Mexico**

Energen Resources Corporation (Energen) has made or will make application for a permit to drill the referenced well. The design of this well calls for beginning and ending points that fall outside of the setback guidelines dictated by the New Mexico Oil Conservation Division (the NMOCD). Contemporaneously herewith Energen has made application to the NMOCD in its Santa Fe, New Mexico office for an Administrative Approval for an Unorthodox Location of its San Juan 30-4 Unit Com # 66H East Blanco Pictured Cliffs formation well.

This well is being drilled as a horizontal well bore and is situated so that the longest possible lateral can be achieved. This additional length is required to provide for the potential for the production of the most reserves and the best possible economics for this well.

The horizontal portion of this well is located in the S/2 N/2 of Section 27-T30-R4W, Rio Arriba County, New Mexico and is dedicated to a special proration unit consisting of the N/2 of Section 27-T30N-R4W in the East Blanco Pictured Cliffs gas pool. The horizontal portion goes through 2 existing regular East Blanco Pictured Cliffs proration units and is in the southerly portion to avoid interfering with the existing wells to the North.

The entry point into the East Blanco Pictured Cliffs gas pool to the East and the bottom hole location at the western terminus of the well are both located closer than 660' from the eastern and western boundaries of said Section 27 by 460'. That portion of the horizontal wellbore in the NE/4 of Section 27 is within the boundaries of the San Juan 30-4 Unit but is not internal to the Unit so it is subject to the 660' setback. That portion of the horizontal wellbore in the NW/4

of Section 27 is not within the San Juan 30-4 Unit boundaries and is also subject to the 660' setback. There is one (1) offsetting East Blanco Pictured Cliffs spacing unit adjoining to the East and one (1) offsetting East Blanco Pictured Cliffs spacing unit adjoining to the West¹ of this special proration unit. Both of these offsetting spacing units are non-unit acreage and are subject to the 660' setback; both setbacks are being breached.

Energen is the operator of both of the adjoining affected spacing units. You are a working interest owner in one or both of the adjoining affected spacing units. As such an owner, Energen is required to notify you of its proposed Unorthodox Location and to inform you that you have twenty (20) days after receipt of this letter in which to register your objections to the proposal with the NMOCD. You can register those objections with:

Mr. David Brooks
New Mexico Oil Conservation Division
1220 South St. Francis Drive.
Santa Fe, NM 87505

If the NMOCD hasn't received an objection from you within the allotted 20 days it will be deemed that you have no objection. If you have no objection and in lieu of waiting for the 20 days to elapse you may fill out, sign and return the waiver attached to this letter to the undersigned using the envelope that I have included for your convenience.

I have enclosed a photocopy of the application for Administrative Approval for an Unorthodox Location and plats showing the dedicated acreage (C102) and the affected spacing units.

Sincerely,

Bryan Lewis
District Landman

¹ The PC unit to the West is not producing yet. That well, the Carson 12 well is currently only producing from the Fruitland Coal formation but the APD was approved for dual completion in the PC.

WAIVER

To: Bryan Lewis, District Landman
Energen Resources Corporation
2010 Afton Place
Farmington, NM 87401

RE: APPLICANT – ENERGEN RESOURCES CORPORATION
Administrative Approval of Unorthodox Location
San Juan 30-4 Unit Com # 66H
1205' FNL, 894' FWL-Section 26-T30N-R4W--Surface Location
2100'FNL, 200' FWL-Section 27-T30N-R4W—Bottom Hole location (proposed)
Rio Arriba County, New Mexico

THE UNDERSIGNED, BEING A WORKING INTEREST OWNER IN ONE OR BOTH OF THE AFFECTED PRORATION UNITS ADJOINING THE APPLICANT'S REFERENCED WELL AND ASSOCIATED PRORATION UNIT HAVE NO OBJECTION TO THE NEW MEXICO OIL CONSERVATION DIVISION GRANTING AN APPROVAL FOR AN UNORTHODOX LOCATION RELATING THERETO.

Signature:

Printed Name:

Date:

Address, Street, Mailing:

City, State, ZIP:

Phone:

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

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Total Postage & Fees	\$	

Send to
 Street, P.O. Box, or Post Office No. Dugan Production Corp
Box 420
 City, State, ZIP+4[®] Farmington NM 87499

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return 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
Post Office Box 420
Farmington NM 87499*

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. 7009 2820 0000 5801 7609

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ABCO, LLC
 26 Bank of America, NA
 Post Office Box 840738
 Dallas, TX 75284

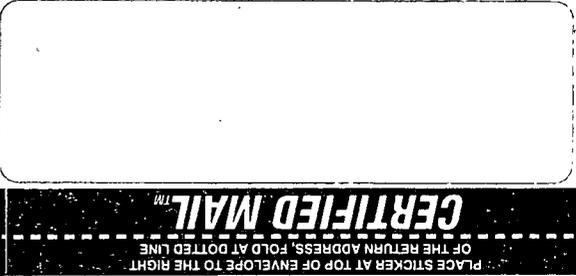
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1. Article Addressed to:
 ABCO, LLC
 26 Bank of America, NA
 Post Office Box 840738
 Dallas, TX 75284

COMPLETE THIS SECTION ON DELIVERY

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

- 3. Service Type
 - Certified Mail
 - Registered
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- 4. Restricted Delivery? (Extra Fee) Yes

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1. Article Addressed to:

Burlington Resources Oil & Gas Co
 Gas Co VP Admin
 Real Property Admin
 PO Box 7500
 Bartlesville OK 74005

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes No

2. Article Number: 7009 2820 0000 5801 7623

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Street, Apt. No., P.O. Box No. or City, State, ZIP+4[®]
 Burlington Resources Oil & Gas Co
 PO Box 7500
 Bartlesville OK 74005

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

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1. Article Addressed to:

*Lorrayn Gay Hacker
c/o James Raymond
Post Office Box 291445
Karnville, TX 78029*

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

- Certified Mail Express Mail
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7009 2820 0000 5801 7630

Send to *Lorrayn Gay Hacker c/o James Raymond*

Street Address *Post Office Box 291445*

City, State, ZIP+4 *Karnville TX 78029*

PS Form 3800 August 2006

See Reverse for Instructions

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1. Article Addressed to:

*Charles W. Gay
c/o James Raymond
Post Office Box 291445
Kerrville TX 78029*

COMPLETE THIS SECTION ON DELIVERY

- A. Signature X Agent
- B. Received by (Printed Name) Addressee
- C. Date of Delivery

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

3. Service Type:

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- 4. Restricted Delivery? (Extra Fee) Yes No

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

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sent to *Charles W. Gay; c/o James Raymond*
 sent by *Post Office Box 291445*
 Only state zip+4 *Kerrville TX 78029*

PS Form 3800 August 2006 See Reverse for Instructions

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

James Raymond
James Raymond
Post Office Box 291445
Kanville TX 78029

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent
 Addressee

B. Received by (Printed 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
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

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 7009 2820 0000 5801 7654

Signature of the sender
 of Post Office Box 291445
 City, State, ZIP+4
 Kanville TX 78029

James Raymond

PS Form 3800, August 2006

See Reverse for Instructions

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7009 2820 0000 5801 7661

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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:
*Tamam LLC
 c/o James Raymond
 PO Box 291445
 Kerrville TX 78029*

7009 2820 0000 5801 7661

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) Yes No

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

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Send to *Tamam LLC: James Raymond*
 Street or PO Box *PO Box 291445*
 City, State, ZIP+4 *Kerrville TX 78029*

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PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

*Providence Minerals LLC
14860 Montfort Drive, Ste 209
Dallas TX 75254*

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent, Addressee

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

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

3. Service Type

- Certified Mail
- Express Mail
- Return Receipt for Merchandise
- Registered
- Insured Mail
- C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. 7009 2820 0000 5801 7678

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™ RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

7009 2820 0000 5801 7678
7009 2820 0000 5801 7678

Send to *Providence Minerals LLC*
 Street, Apt. No. or P.O. Box *14860 Montfort Drive Ste 209*
 City, State, ZIP+4 *Dallas TX 75254*

PS Form 3800, August 2006

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

7009 2820 0000 5801 7777
7009 2820 0000 5801 7777

PS Form 3801, August 2006 See Reverse for Instructions
To: *Tinnin, Jr. Robert P*
500 Marquette Ave NW Ste 1300
Albuquerque NM 87102

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

OFFICIAL USE

U.S. Postal Service™ RECEIPT
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For delivery information visit our website at www.usps.com

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Tinnin, Jr. Robert P
500 Marquette Ave NW
Suite 1300
Albuquerque NM 87102

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) Yes No

2 7009 2820 0000 5801 7777

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL

7009 2820 0000 5801 7685
7009 2820 0000 5801 7685

PS Form 3800, August 2006

See Reverse for Instructions

Send To
Trust of Ruth Zimmerman: Hazel Z Hart
842 Muirlands Vista Way
La Jolla CA 92037

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

OFFICIAL USE

For delivery information visit our website at www.usps.com

U.S. Postal Service
CERTIFIED MAILTM **RECEIPT**
(Domestic Mail Only: No Insurance Coverage Provided)

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Trust of Ruth Zimmerman
Hazel Z Hart, Trustee
842 Muirlands Vista Way
La Jolla CA 92037

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X
Agent
Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) Yes

7009 2820 0000 5801 7685

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
*Mar Oil & Gas Corp Inc
 Post Office Box 5155
 Santa Fe NM 87502*

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- X**
- B. Received by (Printed Name) Addressee
- C. Date of Delivery

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

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

4. Restricted Delivery? (Extra Fee) Yes No

2. 7009 2820 0000 5801 7692

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1940

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

Send to: *Mar Oil & Gas Corp Inc*
 Post Office Box No: *5155*
 City/State/Zip: *Santa Fe NM 87502*

PS Form 3800, August 2006

See Reverse for Instructions

7009 2820 0000 5801 7692
 7009 2820 0000 5801 7692

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

*TH McElwain Old Gas LLP
1050 17th Street, Ste 2500
Denver CO 80265.*

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent
 Addressee

B. Received by (Printed 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
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. 7009 2620 0000 5801 7708

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

7009 2620 0000 5801 7708
7009 2620 0000 5801 7708

Send to:
 Street No. *1050* Street *17th* Suite *2500*
 City, State, ZIP+4 *Denver CO 80265*

PS Form 3800, August 2006

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

7009 2820 0000 5801 7715
7009 2820 0000 5801 7715

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

*McKay Oil & Gas LLC
Post Office Box 14738
Albuquerque NM 87191*

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) Date of Delivery

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

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. 7009 2820 0000 5801 7715

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**
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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

Send to:
 Street, Apt. No.,
 or P.O. Box No.,
 City, State, ZIP+4®
*McKay Oil & Gas LLC
 Post Office Box 14738
 Albuquerque NM 87191*

PS Form 3800, August 2006

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

*Thomas P. Timin
2303 Candalaria Road NW
Albuquerque NM 87107*

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

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

3. Service Type

Certified Mail Express Mail

Registered Return Receipt for Merchandise

Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. 7009 2820 0000 5801 7722

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service™ RECEIPT
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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

7009 2820 0000 5801 7722
7009 2820 0000 5801 7722

Send to
 Thomas P. Timin
 2303 Candalaria Road NW
 Albuquerque, NM 87107
 PS Form 3801, August 2006 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Rio Arribaas Ltd.
 c/o Eddye Dreyer
 Management Co - Agent
 4925 Greenville Ave, Ste 900
 Dallas TX 75206

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
4. Restricted Delivery? (Extra Fee) Yes No

2. 7009 2820 0000 5801 7739

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1640

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

7009 2820 0000 5801 7739
 7009 2820 0000 5801 7739

Send to
 Rio Arribaas Ltd.: Eddye Dreyer
 Management Co - Agent
 4925 Greenville Ave, Ste 900
 Dallas TX 75206
 City/State/Zip

PS Form 3800, August 2006

See Reverse for Instructions