dugan production corp.

RECEIVED OCD

2015 MAY -4 P 3: 06

April 27, 2015

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

Re: Dugan Production's Application dated 3/17/15 Add 11 Wells to Tabor Gas Gathering System

Dear Mr. McMillan,

Enclosed for your consideration of the captioned application are copies of the certified mail return receipts for our notice given to interest owners in the wells proposed to be added to Dugan Production's Tabor Gas Gathering System. We have received return receipt cards for all working interest and all but three royalty interest owners. Two mailings were delivered to Lisa Ann Harbin, and Mary Ann Ruwwe Revocable Trust, as per United States Postal Service web tracking (tracking confirmation copies attached); one mailing was returned due to a bad address (Noble B. Schaefer Estate). In addition, we received cards for 10 of the 16 overriding royalty interest owners. Of the six ORRI owners with no receipts, one did receive our notice on approximately 4/24/15 (Barbara Gibson). Ms. Gibson was initially mailed notice of the application on 3/17/15. The mailing was returned to us after Ms. Gibson did not pick up and sign for the mailing before it was returned to us. After speaking with Ms. Gibson on the phone on 4/21/15, she advised us that she had been out of town at the time the mailing had been delivered to the post office, and unable to sign for it. Ms. Gibson requested that Dugan Production re-send the mailing. We are currently awaiting the signed card. Three ORRI owner mailings were returned, one due to a bad address (James & Ella Post), and two were returned with postal notes on the envelope stating "deceased" (Gisle Romo and Clara Sault). Three of the 16 ORRI owners were not mailed the application notice, as previous mailings to these owners were returned due to bad addresses (Edward & Juanita Lopez, Ruby Maculsay, and Harper & Nellie Proctor). To date, we have not had any comment or objection from any of these interest owners.

Also enclosed is a copy of the New Mexico State Land Office approval of our application. In addition, please note that a copy of the Affidavit of Publication for our legal advertisement has recently been e-mailed to you. Should you require an original, please let us know.

Should you have questions or need additional information, please let me know.

Sincerely

Kevin Smaka Production Engineer

KS/tmf

Attachments



## State of New Mexico Commissioner of Public Lands

## **COMMISSIONER'S OFFICE**

Phone (505) 827-5760 Fax (505) 827-5766 www.nmstatelands.org

Aubrey Dunn COMMISSIONER

> 310 OLD SANTA FE TRAIL P.O. BOX 1148 SANTA FE, NEW MEXICO 87504-1148

March 23, 2015

Dugan Production Corporation P.O. Box 420 Farmington, New Mexico 87499-0420

Attention: Mr. Kevin Smaka

Re: Request Surface Commingle add 11 wells Tabor Gathering System Carpenter #1E API #30-045-23613 Federal I #101S API #30-045-34294 Federal I Com 102 FC/PC API #30-045-31792 Federal I Com 102S FC API#30-045-35013 Federal I Com 103 API #30-045-32587 Federal I Com 103S FC/PC API #30-045-35348 Jacobs Com 90S FC/PC API #30-045-33683 O'Henry 2 API #30-045-34922 Pan American Federal #1 API #30-045-09337 Pan American Federal #3 FC/PC API #30-045-33697 Winifred Com 90S FC API #30-045-33686 San Juan County, New Mexico

Dear Mr. Smaka.

We are in receipt of your application requesting to surface commingle production from above referenced wells in San Juan County, New Mexico at the Tabor Gathering System.

Since it appears that all the New Mexico Oil Conservation Division's rules and regulations have been complied with, and there will be no loss of revenue to the State of New Mexico as a result of your proposed operation, your request is hereby approved. Our approval is subject to like approval by the New Mexico Oil Conservation Division. Please submit a copy of the NMOCD's approval to this office.

Our approval does not constitute the granting of any right-of-way or construction rights not granted by the lease instrument.

Your \$30:00 dollar filing fee has been received.

MAR 3 0 2015

Dugan Production Corp. March 23, 2015 Page 2

If you have any questions or if we may be of further help, please contact Pete Martinez at (505) 827-5791.

Very truly yours,

AUBREY DUNN COMMISSIONER OF PUBLIC LANDS

BY:

Terry Warnel, Director AD/TW/sk cc: Reader File, OCD-Mr. Daniel Sanchez

JEWER (1)H COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. A. Signatu C Agent Х Print your name and address on the reverse Address so that we can return the card to you. B. Received by (Printed Name) Date of Delive C. Attach this card to the back of the mailpiece, 11m 0 LIN 19-15 or on the front if space permits. D. Is delivery address different from item 1? **□ ⊁**es 1. Article Addressed to: If YES, enter delivery address below: DÍ No Bureau of Raed Mignet. Attn: bary Lorrer 6251 College Block Farmington, NM 87402 ON NW WYB 3. Service Type D Express Mail Certified Mail Registèred Return Receipt for Merchandis □ C.Ó.D. Insured Mail 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7014 2120 0002 8242 0465 (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-15 Jokar CDP COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signatu 12 item 4 if Restricted Delivery is desired. Agent Ø Print your name and address on the reverse □ Addresse so that we can return the card to you. B. Rece (Printed Name) C. Date of Deliver í R Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? C Yes 1. Article Addressed to: If YES, enter delivery eddress below: D No 87505 NM OIL CONSERVATION DIVISION 1220 SOUTH ST FRANCIS DRIVE **SANTA FE NM 87505** 39 9 Itu: Mr. David Colarach ...... 3. Service Type Certifièd Mail Express Mail Return Receipt for Merchandis Insured Mail 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number .7014 2120 0002 8242 0489 (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-15 Jaker CDP COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete •, item 4 if Restricted Delivery is desired. Agent Х Addresse Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. **□ y**es D. Is delivery address different from item 1? 1. Article Addressed to: 12 No If YES, enter delivery address below: STATE OF NEW MEXICO P O BOX 1148 SANTA FE NM 87504-1148 ath: Mr. aakrey Dann Service Type Certified Mail Express Mail Return Receipt for Merchandis Registered □ C.O.D. Insured Mail 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7014 2120 0002 8242 0472 (Transfer from service label PS Form 3811, February 2004 102595-02-M-15 **Domestic Return Receipt** J

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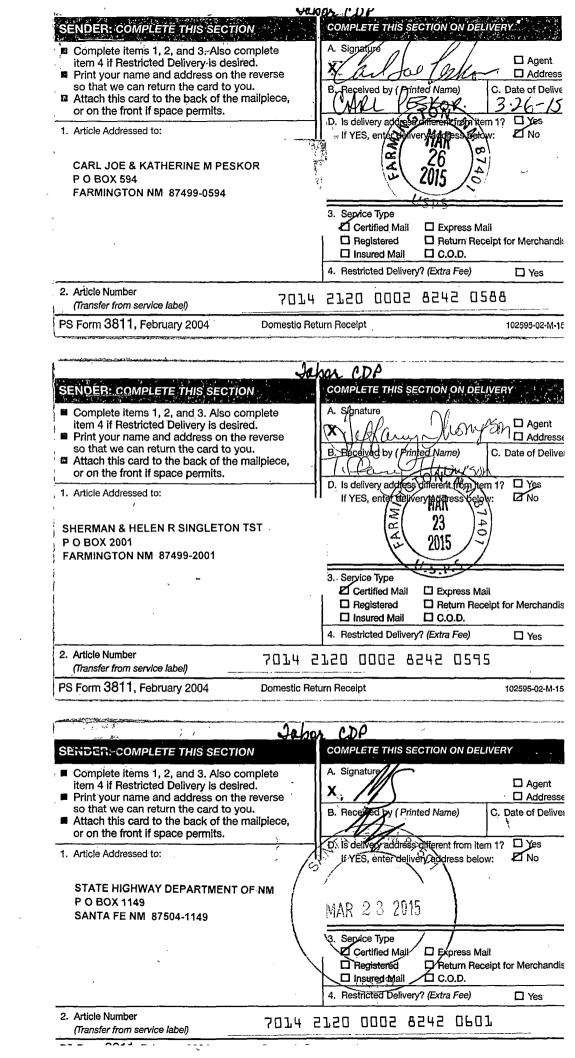
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item 4 if Restricted Delivery is desired.         Print your name and address on the reverse so that we can return the card to you.         Attach this card to the back of the mailpiece, or on the front if space permits.         1. Article Addressed to:         CITY OF FARMINGTON ATTN: JAY BURNHAM 800 MUNICIPAL DRIVE FARMINGTON NM 87401         3. Service Type Certified Mail         Certified Mail         Pagent         Agent         Addressed         Image: Service Type         Certified Mail         Pagent         Restricted Delivery? (Extra Fee)         Yes         4. Restricted Delivery? (Extra Fee)         Yes         2. Article Number (Transfer from service label)		
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so that we can return the card to you.       Attach this card to the back of the mailpiece, or on the front if space permits.       D. B. Received by (Printed Name)       C. Date of Deliver         1. Article Addressed to:       D. Is delivery address different from item 1?       Yes         1. Article Addressed to:       D. Is delivery address below:       D No         CITY OF FARMINGTON       ATTN: JAY BURNHAM       800 MUNICIPAL DRIVE         FARMINGTON NM 87401       3. Service Type       Certified Mail       Express Mail         B. Registered       Return Receipt for Merchandis       Insured Mail       C.O.D.         4. Restricted Delivery? (Extra Fee)       Yes         2. Article Number       ?014       2120       0002       8242       0519		
or on the front if space permits.       D. Is delivery address different from item 1?       Yes         1. Article Addressed to:       D. Is delivery address different from item 1?       Yes         If YES, enter delivery address below:       D. No         CITY OF FARMINGTON       ATTN: JAY BURNHAM         800 MUNICIPAL DRIVE       FARMINGTON NM 87401         3. Service Type       Certified Mail         Description       Resume delivery?         Express Mail       Resume delivery?         Insured Mail       C.O.D.         4. Restricted Delivery?       Express         2. Article Number       ?D.14       2120       0002         8242       0519	so that we can return the card to you.	
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4. Restricted Delivery? (Extra Fee)       I Yes         2. Article Number (Transfer from service label)       ? I 4 2120 0002 8242 0519	ATTN: JAY BURNHAM 800 MUNICIPAL DRIVE	Certified Mail Express Mail Registered Return Receipt for Merchandis
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	2. Article Number	Certified Mail  Registered  Insured Mail  C.O.D.  K. Restricted Delivery? (Extra Fee)  Yes
	(Transfer from service label) 7014	2120 0002 8242 0526
	PS Form 3811, February 2004 Domestic R	eturn Receipt 102595-02-M-15
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	SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse	A. Signature
	so that we can return the card to you.	B. Received by ( <i>Printed Name</i> )
	Attach this card to the back of the mailpiece, or on the front if space permits.	MAD 2 B 2019
	1. Article Addressed to:	D. is delivery address different trom term 1? Uyes If YES, enter delivery address below: DNO
	HOO DOO LLC DIMMICK FAMILY PARTNERS P O BOX 1395 FLORA VISTA NM 87415	3. Seprice Type D Certified Mail D Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D.
		4. Restricted Delivery? (Extra Fee)
		2120 0002 8242 0533
	PS Form 3811, February 2004 Domestic R	eturn Receipt 102595-02-M-154
· · ·	Ja	bor CDP
	SENDER-COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature A. Signature Agent Addresse B. Received by (Printed Name) D. ACH LOW, ACOBS D. Is delivery address different from item 1? D. Is delivery address different from item 1?
	1. Article Addressed to:	If YES, enter delivery address below:
r r	JIM L & MARY LOU JACOBS TRUST 3505 CRESCENT AVE FARMINGTON NM 87401	3. Service Type Certified Matr S DEcoress Mail Registered Insured Mail 4. Restricted Delivery? (Extra Fee)
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<b>`</b>		SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
		Complete items 1, 2, and 3. Also complete	A. Signatore
		item 4 if Restricted Delivery is desired.	☐ Agent
		Print your name and address on the reverse	☐ Addre
		so that we can return the card to you.	B Received by (Printed Name) C. Date of Del
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		· · ·	· · · · · · · · · · · · · · · · · · ·
		C/O STEVE KINSEY 100 OLDE OAK	
•		GEORGETOWN TX 78633	3. Septice Type
			Certified Mail  Express Mail
			Registered Return Receipt for Merchan
			Insured Mail C.O.D.
			4. Restricted Delivery? (Extra Fee)
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		so that we can return the card to you.	B. Beceivedby (Printed Name) C. Date of Del
٢		Attach this card to the back of the mailpiece,	ITTE AND MADO
		or on the front if space permits.	D. Is delivery address different from item 1? UYes
		1. Article Addressed to:	If YES, enter delivery address below IZ No
			(= 12, 1-)
		RICKY L & SHERMANN S MARCY	tex Who si
		P O BOX 2098	U.S. ?.
		FARMINGTON NM 87499-2098	
			3. Service Type
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,			Insured Mail C.O.D.
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	,	so that we can return the card to you. Attach this card to the back of the mailpiece,	B. Received by (Printed Name) ConDate of Del
		or on the front if space permits.	
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		1. Article Addressed to:	If YES, enter delivery address below:
		1. Article Addressed to:	If YES, enter delivery address below:
			If YES, enter delivery address below: Z No
		1. Article Addressed to: JACK L MOORE 2316 11TH STREET	If YES, enter delivery address below:
		JACK L MOORE	
		JACK L MOORE 2316 11TH STREET	3. Service Type
		JACK L MOORE 2316 11TH STREET	3. Service Type
· ·		JACK L MOORE 2316 11TH STREET	3. Service Type
		JACK L MOORE 2316 11TH STREET	3. Service Type Certified Mail  Express Mail Registered Return Receipt for Merchan
•		JACK L MOORE 2316 11TH STREET FARMINGTON NM 87401	<ul> <li>3. Service Type</li> <li>2 Certified Mail</li> <li>2 Registered</li> <li>2 Return Receipt for Merchan</li> <li>2 Insured Mail</li> <li>2 C.O.D.</li> <li>4. Restricted Delivery? (Extra Fee)</li> <li>2 Yes'</li> </ul>
		JACK L MOORE 2316 11TH STREET FARMINGTON NM 87401	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchan Insured Mail C.O.D.



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		HERRIN CUT
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	or on the front if space permits.	D. Is delivery address different from item 1? Yes
	1. Article Addressed to:	If YES, enter delivery address below: I No
	UNITED FOOD STORE #34 ATTN: MARK FRAZER	137 - N. M
	900 SCHOFIELD LANE	
	FARMINGTON NM 87401	
· · ·		3. Septice Type
		Registered     Registered     Redurn Receipt for Merchandi:     Insured Mail     C.O.D.
,		4. Restricted Delivery? (Extra Fee)
	2. Article Number 7014	5150 0005 9545 OP79
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1	item 4 if Restricted Delivery is desired. Print your name and address on the reverse	
	so that we can return the card to you.	B. Received by (Printed Name) C. Date of Deliver
	Attach this card to the back of the mailpiece, or on the front if space permits.	I 2603 (0001112) 2/23/17
	1. Article Addressed to:	D. Is delivery address different from item 1? <sup>1</sup> Yee If YES, enter delivery address below: Vo
· .	WESTERMAN REALTY INTEREST LLC	
T	P O BOX 226406 DALLAS TX 75222-6406	·
		3. Service Type
		Registered Return Receipt for Merchandis
		Insured Mail C.O.D.     A. Restricted Delivery? (Extra Fee) Yes
	2. Article Number	2120 0002 8242 0625
	(Transfer from service label)	
	PS Form 3811, February 2004 Domesti	c Return Receipt 102595-02-M-15
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1	item 4 if Restricted Delivery is desired. Print your name and address on the reverse	Agent D'Addresse
	so that we can return the card to you. Attach this card to the back of the mailpiece,	B Received by Printed Name) C. Date of Deliver
	or on the front if space permits.	D. Is delivery address different from item 1? Des
	1. Article Addressed to:	If YES, enter delivery address below:
	WYTEX PROPERTIES LLC	
	25528 GENESSEE TRAIL ROAD	
	GOLDEN CO 80401	
	·	3. Service Type ☐ Certified Mail □ Express Mail
		Registered     Return Receipt for Merchandis     Insured Mail     C.O.D.
		4. Restricted Delivery? (Extra Fee)
	2. Article Number	5750 0005 9545 0F35
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SENDER. COMPLETE THIS SECTIO	N	COMPLETE THIS SECTION ON DELIVERY
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so that we can return the card to yo		B. Received by (Printed Name) C. Date of Delive
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}	· ·	D. Is delivery address different from item 1? Ses
1. Article Addressed to:		If YES, enter delivery address below: 2 No
SHANNON K ADCOCK	-	
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CLINTON TN 37716		
i		3. Service Type
		Z Certified Mail Express Mail
		Registered     Return Receipt for Merchandis     Insured Mail     C.O.D.
[	<u> </u>	4. Restricted Delivery? (Extra Fee) Yes
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(Transfer from service label)		
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Print your name and address on the so that we can return the card to yo		L Addresse
Attach this card to the back of the n		B. Received by (Printed Name)
or on the front if space permits.		1Jiana HCios ( 8 2010)
1. Article Addressed to:		D. Is delivery address different from item 1?
		If YES, enter delivery address below PINO
DIANA FAY AKINS		
3020 CONIFER DRIVE		
LARGO FL 33771		
		3. Service Type
		Certified Mail Express Mail
		□ Registered □ Return Receipt for Merchandis
4 <u>5</u>		
		4. Restricted Delivery? (Extra Fee)
2. Article Number	7014 21	120 0002 8242 0663
(Transfer from service label)		
PS Form 3811, February 2004	Domestic Rei	leturn Receipt 102595-02-M-154
A CONTRACTOR OF		
1. 1894 19 40 <sup>20</sup> 11 12		alma CDP
SENDER: COMPLETE THIS SECTION	ON	COMPLETE THIS SECTION ON DELIVERY
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item 4 if Restricted Delivery is desir	red.	Vala and A (MAG PAgent
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so that we can return the card to y Attach this card to the back of the		B. Received by (Printed Name) C. Date of Delive
or on the front if space permits.	manpiece,	ANDE ALONG SICA
		D. Is delivery address different from item 1?  Yes
1. Article Addressed to:	بر آرمه الكانفان	If YES, enter delivery address below: I No
JERRY RICHARD AKINS		1
1403 UXBRIDGE COURT	۲ <sup>۰</sup>	1 N 1
OPELIKA AL 36801		
-		·
		3. Service Type
		Z Certified Mail Express Mail
		Registered Return Receipt for Merchand

2. Article Number (Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

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	SENDEB: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature A. Signature B. Received by (Printed Name) D. Is delivery address different from item 1? If YES, enter delivery address below: No
•	ROEET CECIL AKINS 40 TARPON AVENUE SE RIO ANCHO NM 87124	
		<ul> <li>3. Septce Type</li> <li>Certified Mail</li> <li>Registered</li> <li>Return Receipt for Merchand</li> <li>Insured Mail</li> <li>C.O.D.</li> <li>4. Restricted Delivery? (Extra Fee)</li> <li>Yes</li> </ul>
	2. Article Number 7014 213 (Transfer from service label)	20 0002 8242 0687
		eturn Receipt 102595-02-M-1:
• • •	SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature X Coul Brochu Agent
	<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by ( <i>Printed Name</i> ) C. Date of Delive
· · · ·	1. Article Addressed to: CAROL J BROCHU 6345 13TH AVENUE S RICHFIELD MN 55423-1719	D. Is delivery address different from item 1? If YES, enter delivery address below: No
		3. Service Type         Certified Mail       Express Mail         Registered       Return Receipt for Merchandi         Insured Mail       C.O.D.
		4. Restricted Delivery? (Extra Fee)  Yes
	2. Article Number 7014 (Transfer from service label)	2120 0002 8242 0694
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	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature X HALL BULL □ Agent B. Received by (Printed Name) VAHI - JO ROVII, 3-33-15
	1. Article Addressed to:	D. Is delivery address different from item 1?  Yes If YES, enter delivery address below:  No
	PATTIO BROCHU 525 W 3RD ST UPPER RUSH CITY MN 55069	
		3. Service Type         Image: Certified Mail       Express Mail         Image: Certified Mail       Image: Certified Mail         Image: Certified Mail
· ·	2. Article Number 7014 2 (Transfer from service label)	
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i	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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	Attach this card to the back of the mailpiece,	Tanya Bridge
	or on the front if space permits.	D. Is delivery address different from item 1? U Yes
	1. Article Addressed to:	If YES, enter delivery address below:
	DARYL GENE & EVA JEAN BURSON	
	P O BOX 1687 FARMINGTON NM 87499-1687	
		3. Service Type
	- iteles	Certified Mail Express Mail Registered Return Receipt for Merchandi
		4. Restricted Delivery? (Extra Fee)
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	(Transfer from service label) 7014 2	120 0002 8242 0717
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	Ja Ja	hos CDP
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	Complete items 1, 2, and 3. Also complete	A. Signature
, ,	item 4 if Restricted Delivery is desired.	Agent
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	so that we can return the card to you.	B. Feceived by (Printed Name) C. Date of Delive
	or on the front if space permits.	
. •	1. Article Addressed to:	D. Is delivery address different from item 1?
		If YES, enter delivery address below:
	JEAN COX-LOVELL	G S TI
	R&C INVESTMENT	A COM 131
	3505 N MESA VERDE	4 10 12
)	FARMINGTON NM 87401	3. Séprice Type
	L L	Z Certified Mail
	1	Registered Return Receipt for Merchandis
		Insured Mail C.O.D.
	:	4. Restricted Delivery? (Extra Fee)
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	11	анан ал ан
	A	- L- AAA
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	Complete items 1, 2, and 3. Also complete	A. Signature
	<ul><li>item 4 if Restricted Delivery is desired.</li><li>Print your name and address on the reverse</li></ul>	× Mare moll □ Agent
	so that we can return the card to you.	B. Received by ( <i>Printed Name</i> ) C. Date of Delive
	Attach this card to the back of the mailpiece,	Manie M. 1X11 3/27/15
	or on the front if space permits.	D. Is delivery address different from item 1?
	1. Article Addressed to:	If YES, enter delivery address below: INO
· · · ·		
	MARIE M DILL	
	355 KESTREL WAY	
	NIPOMO CA 93444	
		3. Service Type
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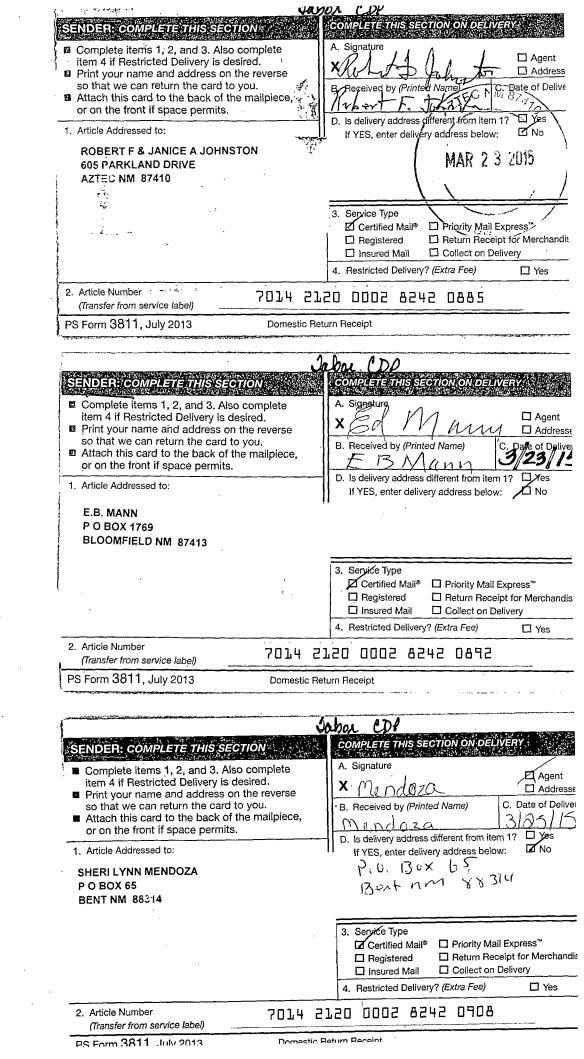
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		Insured Mail     C.O.D.       4. Restricted Delivery? (Extra Fee)     I Yes
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	김 씨 글 경제 있는 것 같아. 이번 것	OC COP COMPLETE THIS SECTION ON DELIVERY
		A. Signature
	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	Agent
· · · · · · · · · · · · · · · · · · ·	Print your name and address on the reverse so that we can return the card to you.	B. Beceived by (Printed Name) C. Date of Delive
	<ul> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	MILITCE 5-25-15
	1. Artícle Addressed to:	D. Is delivery address different from item 1? If YES, enter delivery address below: No
	MATTHEW FLACK 7626 W ANIMAS FARMINGTON NM 87401	6 200
·		3. Service Type     2. Certified Mail     2. Express Mail     2. Registered     3. Registered     3. Service Type     4. Restricted Delivery? (Extra Fee)     4. Yes
	2. Article Number ?[]]4 (Transfer from service label)	5750 0005 9545 0365
	PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-15
	1	bor CDP
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	X En Salmer Agent
	so that we can return the card to you.	B. Received by (Printed Name) C. Date of Deliver
	or on the front if space permits.	Evil Callemov e 4.11-2015 D. Is delivery address different from item 1? Ves
	1. Article Addressed to:	If YES, enter delivery address below: A No
	ERIK M GALLEËMORE 14303 OLD CASTLE SAN ANTONIO TX 78217	3. Service Type ☑ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandis □ Insured Mail □ C.O.D.
	- Antola Musebar	4. Restricted Delivery? (Extra Fee)  Yes
	2. Article Number (Transfer from service label) 7014 212	0 0002 8242 0779
,	PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-15

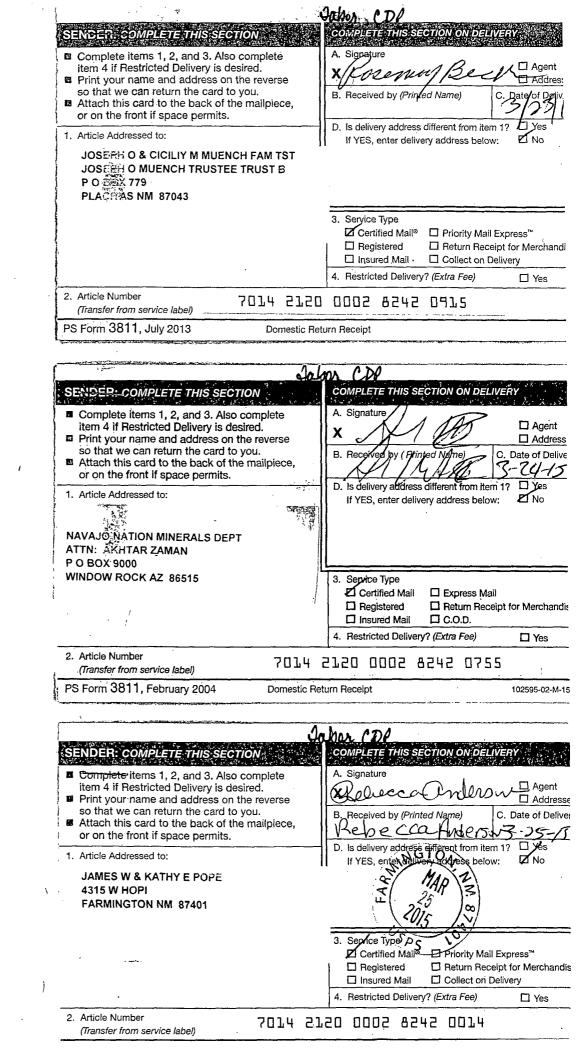
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allow CDP COMPLETE THIS S CTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signature item 4 if Restricted Delivery is desired. X⊲∜ Print your name and address on the reverse 14 Address so that we can return the card to you. B. Received by (Printed Attach this card to the back of the mailpiece, 7 or on the front if space permits. MUMA D. Is delivery address different from item 1? п 1. Article Addressed to: If YES, enter delivery address below: **Z**No SHAWNA GALLEMORE **1334 STONE CROP CT** LAS CRUCES NM 88007 3. Sepviće Type Certified Mail Express Mail D Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 2. Article Number 7014 2120 0002 8242 0786 (Transfer from service label) PS Form 3811, February 2004 **Domestic Return Receipt** 102595-02-M-15 Jobar (DP COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Α. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Agent Х Addresse Print your name and address on the reverse a. so that we can return the card to you. B: Received by (Printed Name) C. Date of Deliver Attach this card to the back of the mailpiece, 3.21.12 or on the front if space permits. D. Is delivery address different from item 1? 
 Yes 1. Article Addressed to: If YES, enter delivery address below: 12 No TWILA M GOODDING TRUST 1009 CRESIVIEW CIRCLE FARMINGTON NM 87401 Service Type Registered E Return Receipt for Merchandis D Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7014 2120 0002 8242 0793 (Transfer from service label) PS Form 3811, February 2004 102595-02-M-15 Domestic Return Receipt Q. Jabor CDP COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Signature Complete items 1, 2, and 3. Also complete Agent item 4 if Restricted Delivery is desired. х Print your name and address on the reverse B-Addresse so that we can return the card to you. Date of Deliver B. Received by ( Printed Name) C. Attach this card to the back of the mailpiece, 21 or on the front if space permits. □ Yes D. Is delivery address different from item 1? 1. Article Addressed to: 1 No If YES, enter delivery address below: CHAD GREENWADE 3 ROAD 6427 KIRTLAND NM 87417 3. Septce Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7014 2120 0002 8242 0809 (Transfer from service label)

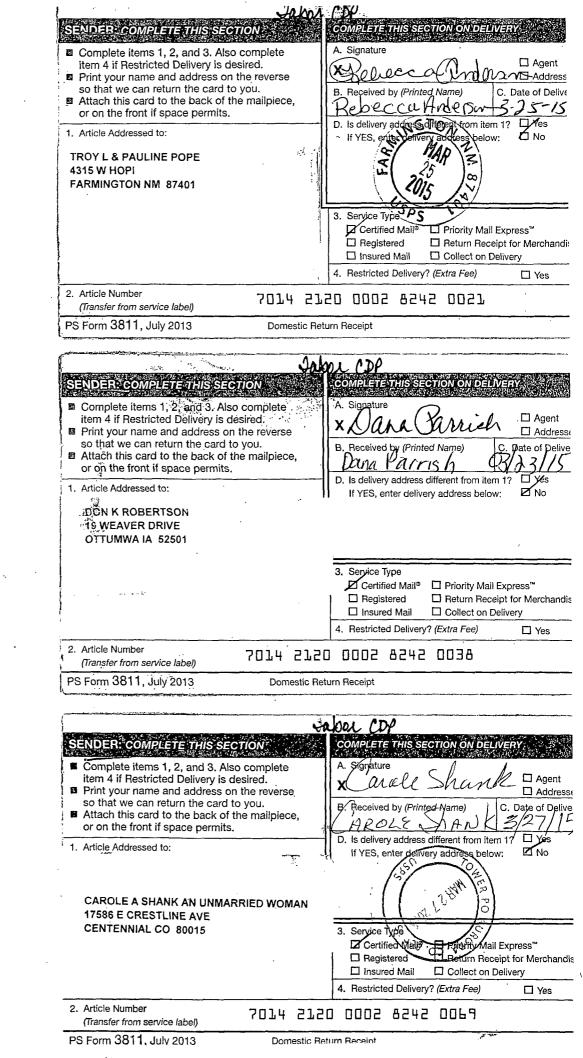
	Ť - L	LAMAL, ('DP
• • •	<ul> <li>SENCER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature         X       A. Signature         A. Signature         X       A. Carlow         B. Received by (Printed Name)       C. Date of Delive         Carle P. Hack Non       3-24-1         D. Is delivery address different from item 1?       Yes         If YES, enter delivery address below:       No
· · ·	O CALLEEN HACKNEY 1336 GOLDEN ROAD CT LAS CRUCES NM 88007	3. Service Type ☑ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandis □ Insured Mail □ C.O.D.
	2. Article Number (Transfer from service label) 7014 PS Form 3811, February 2004 Domestic Re	4. Restricted Delivery? (Extra Fee)       I Yes         2120       IIII       8242       IIIII         turn Receipt       102595-02-M-15
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the from its pace permits.</li> </ul>	A signature A dignature A different from item 1? Ves
	1. Article Addressed to: SHANE ACKNEY 3232 LANGLEY DRIVE PLANO TX: 75025	D. Is delivery address different from item 1?  Ses If YES, enter delivery address below:  No
		<ul> <li>3. Septice Type</li> <li>2 Certified Mail      Express Mail     Registered     Return Receipt for Merchandis     Insured Mail     C.O.D.   </li> <li>4. Restricted Delivery? (Extra Fee)     Yes</li> </ul>
	2. Article Number 7 🛛 🕹 4 (Transfer from service label)	2750 0005 9545 0953
	PS Form 3811, February 2004 Domestic Re	
	<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature Nul Manual Address X. Nichdas Hort an DAddress B. Received by (Printed Name) State of Pelive
	1. Article Addressed to: DEWAYNE & DOLLY HORTON 41 CR 5359	D. Is delivery address different from item 1? Ves If YES, enter delivery address below: No
	BLOOMFIELD NM 87413	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Poture Respirator
•		Image: Contract of the second seco
	2: Article Number (Transfer from service label) PS Form 3811, July 2013 Demestic Pr	2120 0002 8242 0847

SENDER. COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete 125 item 4 if Restricted Delivery is desired. Agent Ì Print your name and address on the reverse Address so that we can return the card to you. C. Date of Delive B. Be (Printed Name) ved by Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? D Yes 1. Article Addressed to: No No HTYES, enter delivery address below: Charles Jackola 1749 Mississippi -95444-2143 brochlyn Parl Service Type Certified Mail® □ Priority Mail Express™ Registered D Return Receipt for Merchandis Insured Mail Collect on Delivery 4. Restricted Delivery? (Extra Fee) 🛛 Yes 2. Article Number 7014 2120 0002 8242 0854 (Transfer from service label) PS Form 3811, July 2013 Domestic Return Receipt Jabor CDP ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. A. Signature 6 C Agent х Print your name and address on the reverse Addresse so that we can return the card to you. B. Received by (Printed Name) C. Date of Deliver 奶 Attach this card to the back of the mailpiece, Johnd - 3-15 or on the front if space permits. D. Is delivery address different from item 1? □ Xes 1. Article Addressed to: No No Jerris Broup LLP PO Bex 2190 If YES, enter delivery address below: fuscot, any 86302-2190 3. Service Type □ Priority Mail Express™ Registered Return Receipt for Merchandis Insured Mail Collect on Delivery 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number 7011 2970 0003 7599 1841 (Transfer from service label) PS Form 3811, July 2013 Domestic Return Receipt 10 SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 2<sup>\*</sup>Aaent Print your name and address on the reverse □ Addresse so that we can return the card to you. Date of Deliver Attach this card to the back of the mailpiece, or on the front if space permits. i ewery and ass different from item 1? □ Yes 1. Article Addressed to: D No erv address below: JOE & STAN LLC MAR P O BOX 629 23 FARMINGTON NM 87499 e 198 AR PA □ Priority Mail Express\*\* Certified Mail® Registered Return Receipt for Merchandis Insured Mail Collect on Delivery 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Number 7014 2120 0002 8242 0878 (Transfer from service label) PS Form 3811, July 2013 Domestic Return Receint





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7	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<b>4</b>	Complete items 1, 2, and 3. Also complete	A. Signature
	item 4 if Restricted Delivery is desired.	
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	so that we can return the card to you.	B. Received ROOSEVELT <sup>e)</sup> BALL ARD Holive
	or on the front if space permits.	MAR 21
	1. Article Addressed to:	D. Is delivery address different from item 1? DYS
· · · ·		If YES, enter delivery address below: If No
	SHRINERS HOSPITAL	
	C/O NORTHERN TRUST BANK OF TEXAS	
	ATTN: DAVILYN GRAN	3. Service Type
	P O BOX 226270	Certified Mail <sup>®</sup> Priority Mail Express <sup>**</sup>
		Registered Return Receipt for Merchandis
	1.	Insured Mail Collect on Delivery
		4. Restricted Delivery? (Extra Fee)
	2. Article Number	
	(Transfer from service label)	20 0002 8242 0076
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	SENDER COMPLETE THIS SECTION	COMPLETETHIS SECTION ON DELIVERY
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<b>x</b> • •	item 4 if Restricted Delivery is desired.	Agent
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1	so that we can return the card to you.  Attach this card to the back of the mailpiece,	B. Beceived by (Printed Name) C. Date of Deliver
	Attach this card to the back of the mailpiece, or on the front if space permits.	$L(\alpha \alpha \gamma) = 3\alpha \gamma \beta$
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•		If YES, enter delivery address below: DNO
· .	SISTERS OF THE HUMILITY	
	820 W CENTRAL PARK	
	DAVENPORT IA 52804	3. Service Type
		Certified Mail <sup>®</sup> □ Priority Mail Express <sup>™</sup>
		Registered     Return Receipt for Merchandis
		Insured Mail Collect on Delivery
		4. Restricted Delivery? (Extra Fee)
	2. Article Number	120 0002 8242 0083
	(Transfer from service label)	
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	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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	item 4 if Restricted Delivery is desired.	
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	so that we can return the card to you.	B. Received by (Printed Name) C. Date of Deliver
	Attach this card to the back of the mailpiece, or on the front if space permits.	BYRON E. TRAPP 3/26/15
<b>,</b> .		D. Is delivery address different from item 1?
	1. Article Addressed to:	If YES, enter delivery address below: Z No
	· · ·	
		2
	3251 COVENTRY WOODS DRIVE ©CINCINNATI OH 45230	3. Service Type
		Registered Return Receipt for Merchandis
		Insured Mail     Collect on Delivery
١		4. Restricted Delivery? (Extra Fee)
	2. Article Number	משחת בעבו בתהת חבו
	(Transfer from service label) パリュリー ピ	750 0005 9545 0040

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BP AMERICA PRODUCTION CC P O BOX 277897 ATLANTA GA 30384-7897	)		
		3. Service Type	
		Certified Mail <sup>®</sup> D Priority Mail Express	
	ì	Registered Return Receipt for Me	erchand
	<u> </u>		Yes
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San San Carlow State State State State Strate Str	A. 1	A . A	
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Attach this card to the back of th or on the front if space permits.	e mailpieçe,	1 NARIA ARMATELA	3/13
		D. Is delivery address different from item 1?	yes
1. Article Addressed to:	- 1		No
· · · · · · · · · · · · · · · · · · ·			
JOHN CARPENTER P O BOX 999	11		
SOUR LAKE TX 77659			
		3. Service Type	
	,1	Certified Mail <sup>®</sup> Deriority Mail Express"	
		□ Insured Mail □ Collect on Delivery	erchan
			Yes
2. Article Number	7014	5750 0005 8545 0773	
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			Addies
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<ul> <li>Attach this card to the back of th or on the front if space permits.</li> <li>Article Addressed to: CONOCOPHILLIPS P O BOX 4289</li> </ul>	you. e mailpiece,	D. Is delivery address different from item ?	of Deli 3//
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	SENDER_COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
· · · · · ·	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	A. Signature
	or on the front if space permits.	- D. Is delivery address different from item 1?
	CHARLES F JACOBS	If YES, enter delivery address below: 🗹 No
	WINIFRED JACOBS ESTATE 1000 SW SANTA FE LAKE ROAD TOWANDA KS 67144	
• •		3. Service Type         Ø Certified Mail®       □ Priority Mail Express™         □ Registered       □ Return Receipt for Merchandi:         □ Insuréd Mail       □ Collect on Delivery
	2. Article Number 7014	4. Restricted Delivery? (Extra Fee) [] Yes 2120 0002 8242 0144
		Return Receipt
	<ul> <li>SENCE 201/PLETETHISSECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is désired.</li> </ul>	A. Signeture
	<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name) C. Date of Deliver D. Is delivery address different from item 1? ☐ Xes
	1, Article Addressed to: FORREST JACOBS 1000 SW SANTA FE LAKE ROAD TOWANDATKS 67144	If YES, enter delivery address below: DNN
		3. Service Type         Ø Certified Mail <sup>®</sup> □ Priority Mail Express <sup>™</sup> □ Registered       □ Return Receipt for Merchandis         □ Insured Mail       □ Collect on Delivery
	2. Article Number	4. Restricted Delivery? (Extra Fee)
	(Transfer from service label)	2120 0002 8242 0151 ;
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	<ul> <li>so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name) C. Date of Deliver Barbare A Moe 3/23
	1. Article Addressed to:	D. Is delivery address different from item 1? Dyes If YES, enter delivery address below: No
	MARTIŇ MOE JR 222: GULFVIEW DRIVE ISLAMORADA FL 33036	
•		3. Service Type Certified Mail <sup>®</sup> □ Priority Mail Express <sup>™</sup> Registered □ Return Receipt for Merchandis Insured Mail □ Collect on Delivery
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• •	<ul> <li>SENDER COMPLETENTISSECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature A. Signature X. Kuthy Suit Agent B. Received by (Printed Name) C. Date of Delive C. Date of Delive C. Date of Delive C. Date of Delive
	ERNEST & VALERIE SILL 30269 COVE VIEW STREET SUN CITY CA 925	If YES, enter delivery address below: Apple No. 2015 3. Service Type Certified Mail <sup>o</sup> Priority Mail Express <sup>™</sup> Registered Return Receipt for Merchandis Insured Mail Collect on Delivery 4. Restricted Delivery? (Extra Fee)
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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>D. Is delivery address of the second se</li></ul>	Whig Kt ess different from item 1? Kes elivery address below: No No
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Tracking Number: 7014212	20000282420830	201 <sup>-</sup>	Sent T LISA ANN HARBIN Street 4130 DUNEBERRY TRAIL or PO HUMBLE TX 77346-1887	
Updated Delivery Day: We	dnesday, March 25, 2015		City, S	
Product & Trackir	ng Information		Available Actions	
Postal Product:	Extra Svc: Certified Mail <sup>™</sup>		Text Updates	
DATE & TIME	STATUS OF ITEM	LOCATION	Email Updates	
March 25, 2015 , 12:08 pm	Delivered	HUMBLE, TX 77338	Return Receipt After Mailing	:
Your item was delivered at 12:	08 pm on March 25, 2015 in HUMBLE,	TX 77338.		
March 24, 2015 , 3:13 pm	Notice Left (No Authorized Recipient Available)	HUMBLE, TX 77346		
March 24, 2015 , 9:57 am	Arrived at Unit	HUMBLE, TX 77338	· .	
March 23, 2015 , 5:27 pm	Departed USPS Facility	NORTH HOUSTON, TX 77315		
March 22, 2015 , 1:35 pm	Arrived at USPS Facility	NORTH HOUSTON, TX 77315		
March 20, 2015 , 9:58 pm	Departed USPS Facility	ALBUQUERQUE, NM 87101		
March 20, 2015 , 2:08 am	Arrived at USPS Facility	ALBUQUERQUE, NM 87101		
Track Another P	ackage			
Tracking (or receipt) number				

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USPS Tracking	TM .	19 19 19	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postana & Face	Postmari Here
Tracking Number: 70142120(	000282420045	102 r	Sent T: MARY ANN RUWWE REVOCABL VERNON RUWWE TRUSTEE Street 723 HORSETHIEF LANE or PO DURANGO CO 81301	E TRUST
Updated Delivery Day: Mond	ay, March 23, 2015	· ·	City, S	<i></i> ,
Product & Tracking	Information	<u>1</u>	Available Actions	
Postal Product:	Extra Svc; C Certified Mail <sup>™</sup>		Text Updates	
DATE & TIME	STATUS OF ITEM	LOCATION	Email Updates	
March 25, 2015 , 10:56 am	Delivered	GOLD CANYON, AZ 85118	Return Receipt After Mailing	
Your item was delivered at 10:56	am on March 25, 2015 in GOLD C	ANYON, AZ 85118.		•
March 25, 2015 , 8:50 am	Available for Pickup	APACHE JUNCTION, AZ 85120		
March 23, 2015 , 12:03 pm	Notice Left (No Authorized Recipient Available)	GOLD CANYON, AZ 85118		
March 23, 2015 , 8:03 am	Out for Delivery	APACHE JUNCTION, AZ 85120		1
March 23, 2015 , 7:53 am	Sorting Complete	APACHE JUNCTION, AZ 85120		
March 23, 2015 , 6:37 am	Arrived at Unit	APACHE JUNCTION, AZ 85120		
March 22, 2015 , 7:31 am	Departed USPS Facility	PHOENIX, AZ 85026		
March 21, 2015 , 2:05 pm	Arrived at USPS Facility	PHOENIX, AZ 85026		
March 20, 2015 , 9:45 am	Departed USPS Facility	ALBUQUERQUE, NM 87101		1
March 20, 2015 , 2:08 am	Arrived at USPS Facility	ALBUQUERQUE, NM 87101		

Track It