

| | | | | | |
|-----------------------|----------|---------------------|-------------------------|-----------------|--------------------------------|
| DATE IN 9-1-16 | SUSPENSE | ENGINEER PRG | LOGGED IN 9-8-16 | TYPE SWD | APP NO. pksc 1625234575 |
|-----------------------|----------|---------------------|-------------------------|-----------------|--------------------------------|

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] **Rockcliff Operating New Mexico LLC**
 [A] Location - Spacing Unit - Simultaneous Dedication **Kizer SWD 1 (30-041-20968)**
☐ NSL ☐ NSP ☐ SD **SWD; Devonian-Silurian 97869**

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

- [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.

Brian Wood

Print or Type Name

Signature

Consultant

Title

brian@permitswest.com

e-mail Address

8-31-16

Date

2016 SEP - 1 A 1:50
 RECEIVED

[Handwritten Signature]

- Delan receipts/ Affected Parties 2016
Supplied 10-5
614
Issues not resolved

APPLICATION FOR AUTHORIZATION TO INJECT

I. PURPOSE: Secondary Recovery Pressure Maintenance XXX Disposal Storage
Application qualifies for administrative approval? Yes No

II. OPERATOR: ROCKCLIFF OPERATING NEW MEXICO LLC
ADDRESS: 1301 MCKINNEY, SUITE 1300, HOUSTON TX 77010
CONTACT PARTY: BRIAN WOOD (PERMITS WEST, INC.) PHONE: 505 466-8120

III. WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection.
Additional sheets may be attached if necessary.

IV. Is this an expansion of an existing project? Yes XXX No
If yes, give the Division order number authorizing the project: _____

V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.

VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.

VII. Attach data on the proposed operation, including:

Kizer SWD 1
30-041-20968

SWD; Devonian-Silurian

1. Proposed average and maximum daily rate and volume of fluids to be injected;
2. Whether the system is open or closed;
3. Proposed average and maximum injection pressure;
4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and,
5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).

*VIII. Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.

IX. Describe the proposed stimulation program, if any.

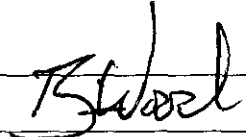
*X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted).

*XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.

XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.

XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.

XIV. Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

NAME: BRIAN WOOD TITLE: CONSULTANT
SIGNATURE:  DATE: AUGUST 31, 2016

E-MAIL ADDRESS: brian@permitswest.com

* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal: _____

III. WELL DATA

- A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) Lease name; Well No.; Location by Section, Township and Range; and footage location within the section.
- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
- (3) A description of the tubing to be used including its size, lining material, and setting depth.
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District Offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

- B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.
- (2) The injection interval and whether it is perforated or open-hole.
- (3) State if the well was drilled for injection or, if not, the original purpose of the well.
- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
- (5) Give the depth to and the name of the next higher and next lower oil or gas zone in the area of the well, if any.

XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

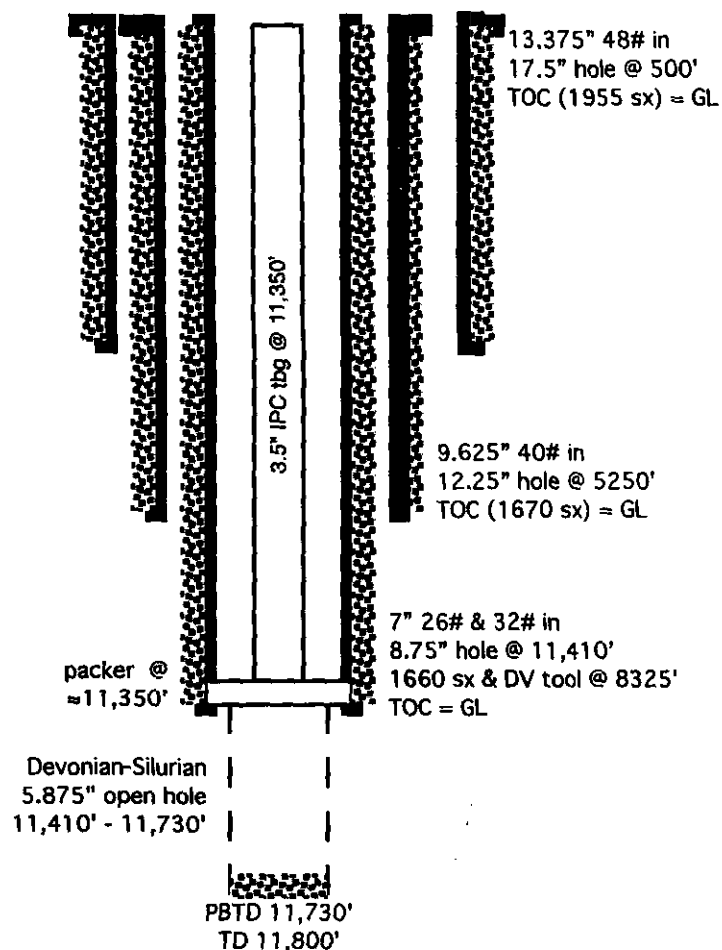
- (1) The name, address, phone number, and contact party for the applicant;
- (2) The intended purpose of the injection well; with the exact location of single wells or the Section, Township, and Range location of multiple wells;
- (3) The formation name and depth with expected maximum injection rates and pressures; and,
- (4) A notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

Side 1

INJECTION WELL DATA SHEET

OPERATOR: ROCKCLIFF OPERATING NEW MEXICO LLCWELL NAME & NUMBER: KIZER SWD 1WELL LOCATION: 270 FSL & 235 FEL
FOOTAGE LOCATIONP
UNIT LETTER17
SECTION8 S
TOWNSHIP34 E
RANGEWELLBORE SCHEMATIC
(not to scale)WELL CONSTRUCTION DATA
Surface Casing

Hole Size: 17.5" Casing Size: 13.375"
 Cemented with: 300 sx. or _____ ft³
 Top of Cement: SURFACE Method Determined: CIRCULATE

Intermediate Casing

Hole Size: 12.25" Casing Size: 9.625"
 Cemented with: 1670 sx. or _____ ft³
 Top of Cement: SURFACE Method Determined: CIRCULATE

Production Casing

Hole Size: 8.75" Casing Size: 7"
 Cemented with: 1660 sx. or _____ ft³
 Top of Cement: SURFACE Method Determined: CBL
 Total Depth: 11410' (csg), 11730' (PBTD), & 11800' (TD)

Injection Interval5.875" HOLE SIZE 11410 feet to 11730'(Perforated or Open Hole, indicate which)

INJECTION WELL DATA SHEET

Tubing Size: 3.5" **Lining Material:** PLASTIC

Type of Packer: 7" X 3.5" NICKEL PLATED &/OR STAINLESS STEEL

Packer Setting Depth: $\approx 11,350'$

Other Type of Tubing/Casing Seal (if applicable): _____

Additional Data

1. Is this a new well drilled for injection? XXX Yes No

If no, for what purpose was the well originally drilled? _____

2. Name of the Injection Formation: **DEVONIAN & SILURIAN**

3. Name of Field or Pool (if applicable): SWD;DEVONIAN-SILURIAN (97869)

4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used. N/A

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area:

OVER: SAN ANDRES (3793')

UNDER: NONE

ROCKCLIFF OPERATING NEW MEXICO LLC
KIZER SWD 1
270' FSL & 235' FEL
SEC. 17, T. 8 S., R. 34 E.
ROOSEVELT COUNTY, NM

PAGE 1

30-041-20968

I. Plan is to drill an 11,800' deep saltwater disposal well. Proposed disposal interval will be 11,410' - 11,730' in the SWD; Devonian-Silurian (97869). See Exhibit A for map and Form C-102.

II. Operator: Rockcliff Operating New Mexico LLC
Operator phone number: (713) 351-0500
Operator address: 1301 McKinney, Suite 1300, Houston TX 77010
Contact for Application: Brian Wood (Permits West, Inc.)
Phone: (505) 466-8120

III. A. (1) Lease name: Kizer SWD (fee)
Well name and number: Kizer SWD 1
Location: 270' FSL & 235' FEL Section 17, T. 8 S., R. 34 E.

A. (2) Surface casing (13.375", 48#, H-40, ST&C) will be set at 500' in a 17.5" hole and cemented to GL with 305 sacks Class C.

Intermediate casing (9.625", 40#, L-80, LT&C) will be set at 5,250' in a 12.25" hole and cemented to GL with 1670 sacks Class C.

First production casing (7", 26#, L-80, LT&C) will be set at 7,500' in an 8.75" hole.

Second production casing (7", 32#, L-80, LT&C) will be run from 7,500' to 11,410' in an 8.75" hole.

Production casing will be cemented to GL with 1660 sacks Class H. DV tool will be set at 8325'.

A 5.875" open hole will be drilled from 11,410' to 11,800' (TD) and plugged back to 11,730'.

ROCKCLIFF OPERATING NEW MEXICO LLC
KIZER SWD 1
270' FSL & 235' FEL
SEC. 17, T. 8 S., R. 34 E.
ROOSEVELT COUNTY, NM

PAGE 2

30-041-20968

- A. (3) Tubing will be 3.5", N-80, 9.3#, IPC. Setting depth will be $\approx 11,350'$. (Disposal interval will be 11,410' to 11,730'.)
 - A. (4) A retrievable nickel plated or stainless steel packer will be set at $\approx 11,350'$ (or $\leq 100'$ above the top of the open hole which will be at 11,410').
 - B. (1) Disposal zone will be the Devonian (SWD; Devonian-Silurian (97869) pool). Estimated fracture gradient is ≈ 0.65 psi per foot.
 - B. (2) Disposal interval will be open hole from 11,410' to 11,730'.
 - B. (3) Well has not been drilled. It will be drilled as a saltwater disposal well.
 - B. (4) No perforated intervals are in the well.
 - B. (5) Three existing wells are in the area of review. None penetrated the Devonian. Deepest existing well is 4695'. Disposal zone top is 11,407'. Only zone in the area of review and above the Devonian that has been found to be productive is the San Andres. It produced from 4471' to 4584'. No oil or gas zone is below the Silurian in the area of review. No Devonian or Silurian producer is within a half mile.
- IV. This is not an expansion of an existing injection project. It is disposal only.
- V. Exhibit B shows the 3 existing wells (all P&A) within a half-mile radius. Exhibit C shows 18 existing wells (2 oil wells + 16 P&A wells) within a 2-mile radius.
- Exhibits D and E shows all leases and lessors within a half-mile radius (only fee, BLM, and State) and two-mile radius (only fee, BLM, and State) leases within each radius. Details on the leases are:

ROCKCLIFF OPERATING NEW MEXICO LLC
KIZER SWD 1
270' FSL & 235' FEL
SEC. 17, T. 8 S., R. 34 E.
ROOSEVELT COUNTY, NM

PAGE 3

30-041-20968

| Aliquot Parts in Area of Review (T8S, R34E) | Lessor | Lease | Lessee(s) of Record |
|---|--------|----------------|-----------------------------|
| SWNW Sec. 16 | NMSLO | VB-2647-0001 | Pedregosa |
| SW4 Sec. 16 | NMSLO | VB-2653-0001 | Pedregosa |
| SE4 & SESW Sec. 17 | fee | fee | Rockcliff & Pedregosa |
| SENE Sec. 17 | fee | fee | Rockcliff & Pedregosa |
| NENW Sec. 20 | BLM | not now leased | not now leased |
| NE4 Sec. 20 | fee | fee | Rockcliff & Pedregosa |
| NW4 Sec. 21 | fee | fee | Rockcliff & Yates Petroleum |

VI. No well within ½ mile penetrated the Devonian (top = 11,407'). The closest (non-water) wells are:

| API | OPERATOR | UL-SECTION-T8S-R34E | TVD | WELL NAME | WELL TYPE | ZONE DEVELOPED | FEET FROM KIZER SWD 1 |
|------------|----------|---------------------|------|--------------|-----------|----------------|-----------------------|
| 3004120587 | Apache | I-17 | 4657 | Paul 1 | P&A | San Andres | 1762 |
| 3004110020 | Cactus | H-20 | 4695 | Bolles 1 | P&A | San Andres | 2289 |
| 3004110021 | Roberson | E-21 | 4635 | Hutcherson 1 | P&A | San Andres | 2421' |

- VII. 1. Average injection rate will be \approx 15,000 bwpd.
Maximum injection rate will be \approx 20,000 bwpd.
2. System will be open and closed. Some water will be trucked and some will be piped.
3. Average injection pressure will be \approx 2,000 psi and maximum will be 2,282 psi ($= 0.2$ psi/foot \times 11,410' (top of open hole)).

ROCKCLIFF OPERATING NEW MEXICO LLC
KIZER SWD 1
270' FSL & 235' FEL
SEC. 17, T. 8 S., R. 34 E.
ROOSEVELT COUNTY, NM

PAGE 4

30-041-20968

4. Main source of disposal water will be water produced from San Andres wells. A San Andres well (30-005-10436) \approx 4 miles to the southwest found TDS at 245,139 mg/l and chlorides at 146,432 mg/l. However, water produced from other Permian Basin zones could also be disposed.
5. Closest (2.88 miles south in N-32-8s-34e) Devonian producer is Thompson's NW Jenkins Unit 32 State 1 (30-041-20902). It is in the Jenkins; NW Devonian Pool (33940). The 40-acre unit consists of SESW 32-8s-34e. Three Devonian water analyses are in Exhibit F.

VIII. The Silurian-Devonian (\approx 325' thick) is highly permeable fractured and vuggy limestone and dolomite. Closest possible underground source of drinking water above the proposed disposal interval are the \approx 600' deep red beds near the surface. State Engineer records (Exhibit G) show the closest water well is 1.89 miles away. That data, based on UTM location, appears to be in error. The well (based on section, township, and range) is actually 70 miles south in 6-20s-35e. State Engineer records show 5 other wells within a 10-mile radius of the Kizer SWD 1. Deepest of those 5 wells is 220'. No underground source of drinking water is below the proposed disposal interval.

Estimated formation tops are:

Quaternary = 0'
Rustler = 2194'
Salado = 2275'
Yates = 2584'
Queen = 3287'
San Andres = 3793'
Glorieta = 5214'
Yeso = 5308'
Tubb = 6665'
Abo = 7510'
Wolfcamp = 8516'
Penn = 9200'

ROCKCLIFF OPERATING NEW MEXICO LLC
KIZER SWD 1
270' FSL & 235' FEL
SEC. 17, T. 8 S., R. 34 E.
ROOSEVELT COUNTY, NM

PAGE 5

30-041-20968

Mississippian = 10734'
Woodford = 11234'
Siluro-Devonian = 11407'
disposal interval = 11410' - 11730'
Montoya = 11732'
TD = 11800'

No water wells are within a 1-mile radius according to State Engineer records (Exhibit G). However, two water wells not in State Engineer records were found within a 1-mile radius (Exhibit H). A water well was found $\approx 575'$ southeast and sampled. An old windmill site $\approx 3000'$ west was dry during an August 3, 2016 field inspection. A water well ≈ 2.2 miles northeast was also sampled. There will be $\approx 10,800'$ of vertical separation, including 390' of salt and anhydrite and 173' of shale, between the bottom of the only likely underground water source (red beds) and the top of the Devonian.

IX. The well will be stimulated with acid if needed.

X. Triple combo logs will be run.

XI. Based on an August 3, 2016 field inspection, one active water well is within a one-mile radius and it was sampled. A second well, 2.2 miles from the proposed disposal well, was also sampled. Samples are in Exhibit H.

XII. Closest Quaternary fault (Guadalupe) is ≈ 123 miles southwest (Exhibit I). Rockcliff Operating New Mexico LLC is not aware of any geologic or engineering data that may indicate the Silurian or Devonian are in hydrologic connection with any underground sources of water. Hundreds of feet of evaporites and shale prevent that from occurring. Deepest water well within a 10-mile radius is 220'

ROCKCLIFF OPERATING NEW MEXICO LLC
KIZER SWD 1
270' FSL & 235' FEL
SEC. 17, T. 8 S., R. 34 E.
ROOSEVELT COUNTY, NM

PAGE 6

30-041-20968

(Exhibit G). There are 140 approved Devonian saltwater disposal wells and 11 approved Devonian water injection wells in New Mexico. Four of the Devonian SWD wells also dispose into the Silurian.

XIII. A legal ad (see Exhibit J) was published on August 4, 2016. Notice (this application) has been sent (Exhibit K) to the surface owner (Shannon Kizer), lessees (Pedregosa, Yates), and unleased mineral owners (BLM, Black Stone Minerals, Jennis Kauffman, Chelsea Marrufo, Kayla Marrufo, PEC Minerals, Joe Ray, Royalty Exchange, David Schuman, Marc Schuman, Schuman Revocable Trust, and Stephens Production) within a half-mile. There are no well operators within a half-mile.

TOPO! map printed on 07/29/16 from "Untitled.tpo"

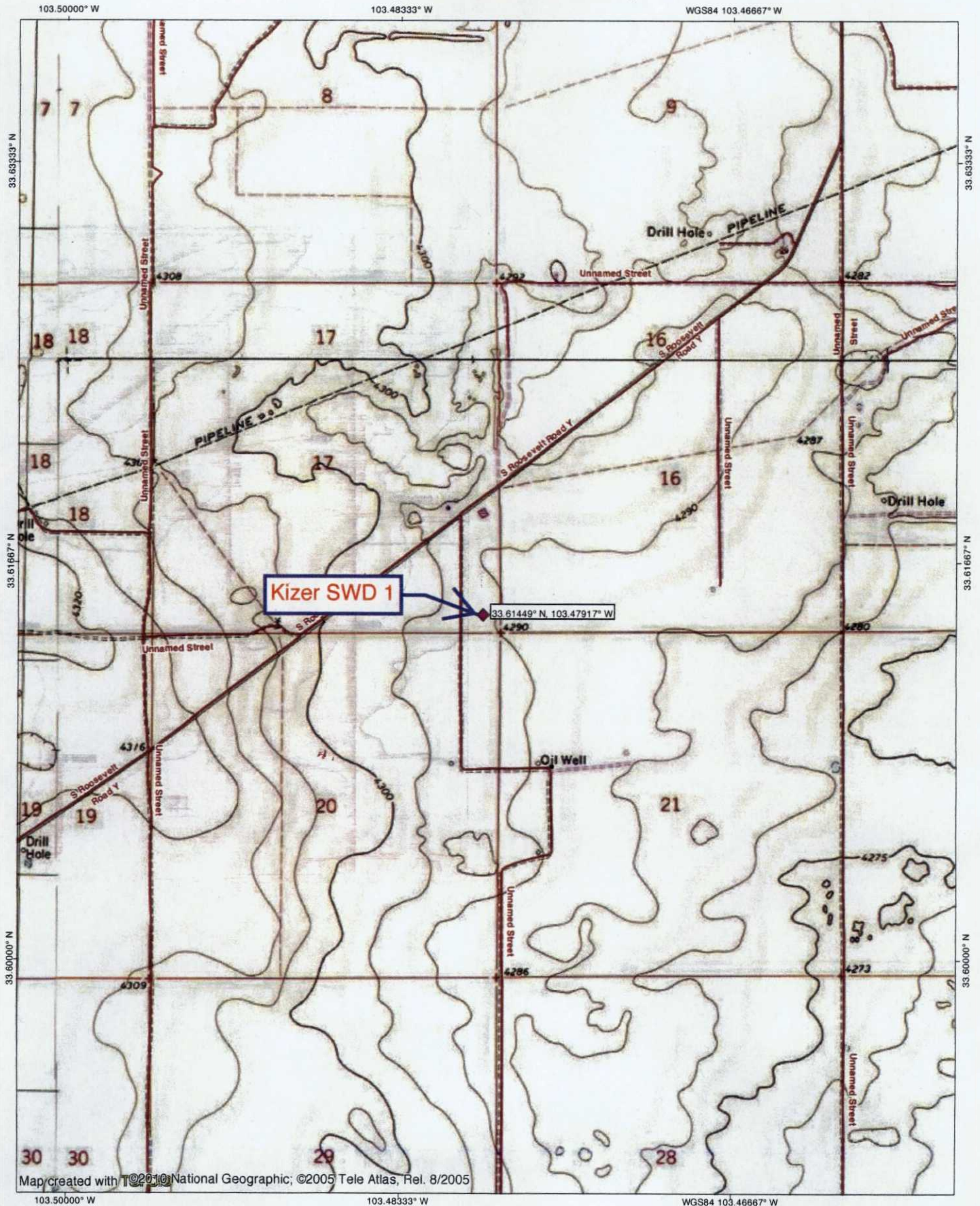


EXHIBIT A

TN MN
7"

District I
1625 N. French Dr., Hialeah, NM 80240
Phone: (575) 493-6161 Fax: (575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone: (575) 746-1283 Fax: (575) 746-0720

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

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

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

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

| | | | | | |
|---|--|---|--|---|--|
| ¹ API Number 30-041- | | ² Pool Code 97869 | | ³ Pool Name SWD; Devonian-Silurian | |
| ⁴ Property Code | | ⁵ Property Name KIZER SWD | | | ⁶ Well Number 1 |
| ⁷ OGRID No. 371115 | | ⁸ Operator Name Rockcliff Operating New Mexico LLC | | | ⁹ Elevation 4293' |

" 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 | 17 | 8 SOUTH | 34 EAST, N.M.P.M. | | 270' | SOUTH | 235' | EAST | ROOSEVELT |

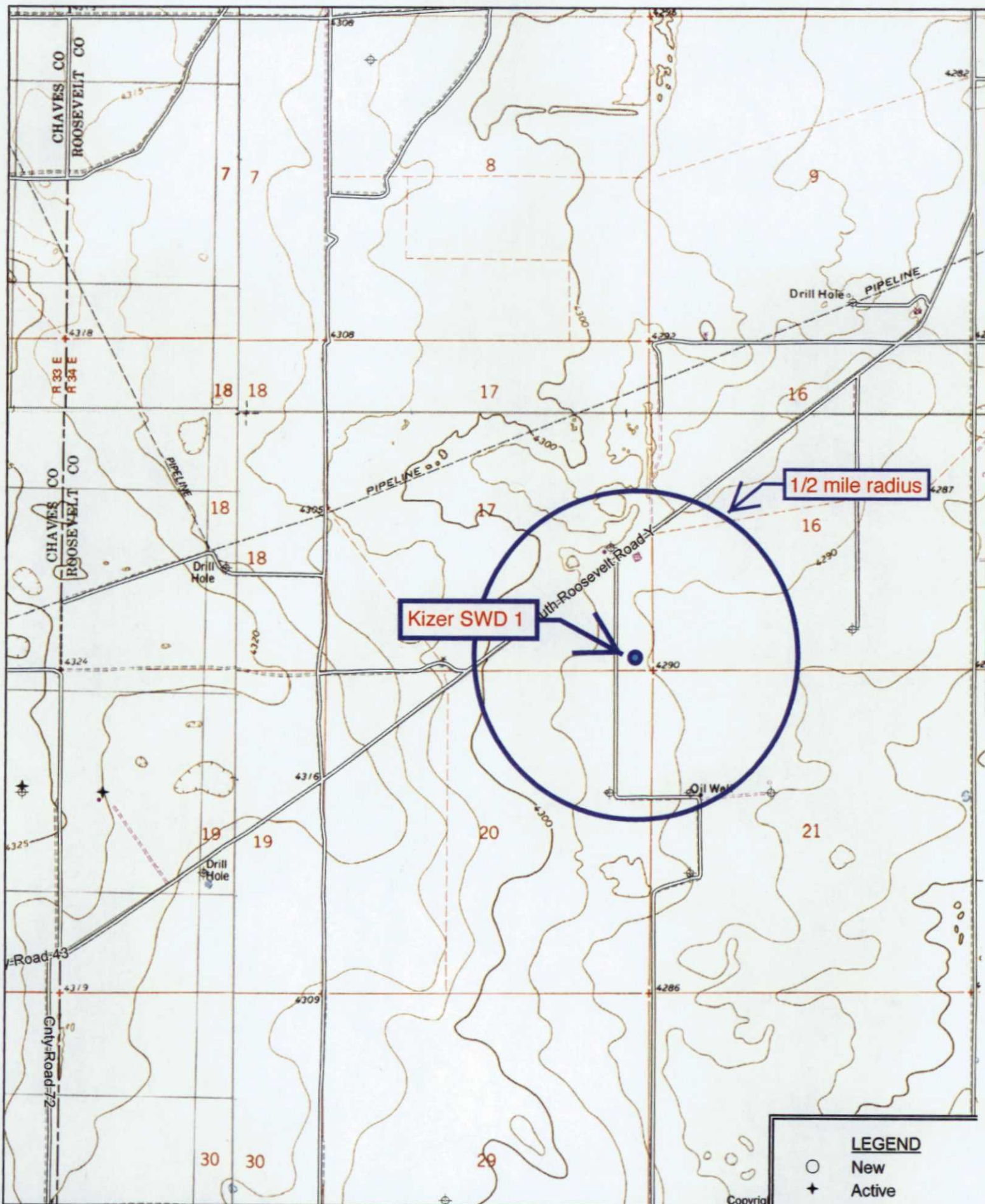
" Bottom Hole Location If Different From Surface

| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------------------|---------|---------------|------------------|---------------|----------------|-----------|
| P | 17 | 8 SOUTH | 34 EAST, N.M.P.M. | | 270' | SOUTH | 235' | EAST | ROOSEVELT |

| | | | |
|-------------------------------|-------------------------------|----------------------------------|------------------------|
| ¹⁰ Dedicated Acres | ¹¹ Joint or Infill | ¹² Consolidation Code | ¹³ 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.

| | |
|--|---|
| | <p>" 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 undivided 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>Brian Wood</i> 8-14-16 Signature Date</p> <p>Brian Wood Printed Name</p> <p>brian@permitswest.com E-mail Address</p> |
| | <p>"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 knowledge.</p> <p>7-19-2016 23006 Date of Survey Certificate Number</p> <p><i>[Signature]</i> Signature and Seal of Professional Surveyor</p> |
| | <p>EXHIBIT A</p> |
| | <p>23006 Certificate Number</p> |

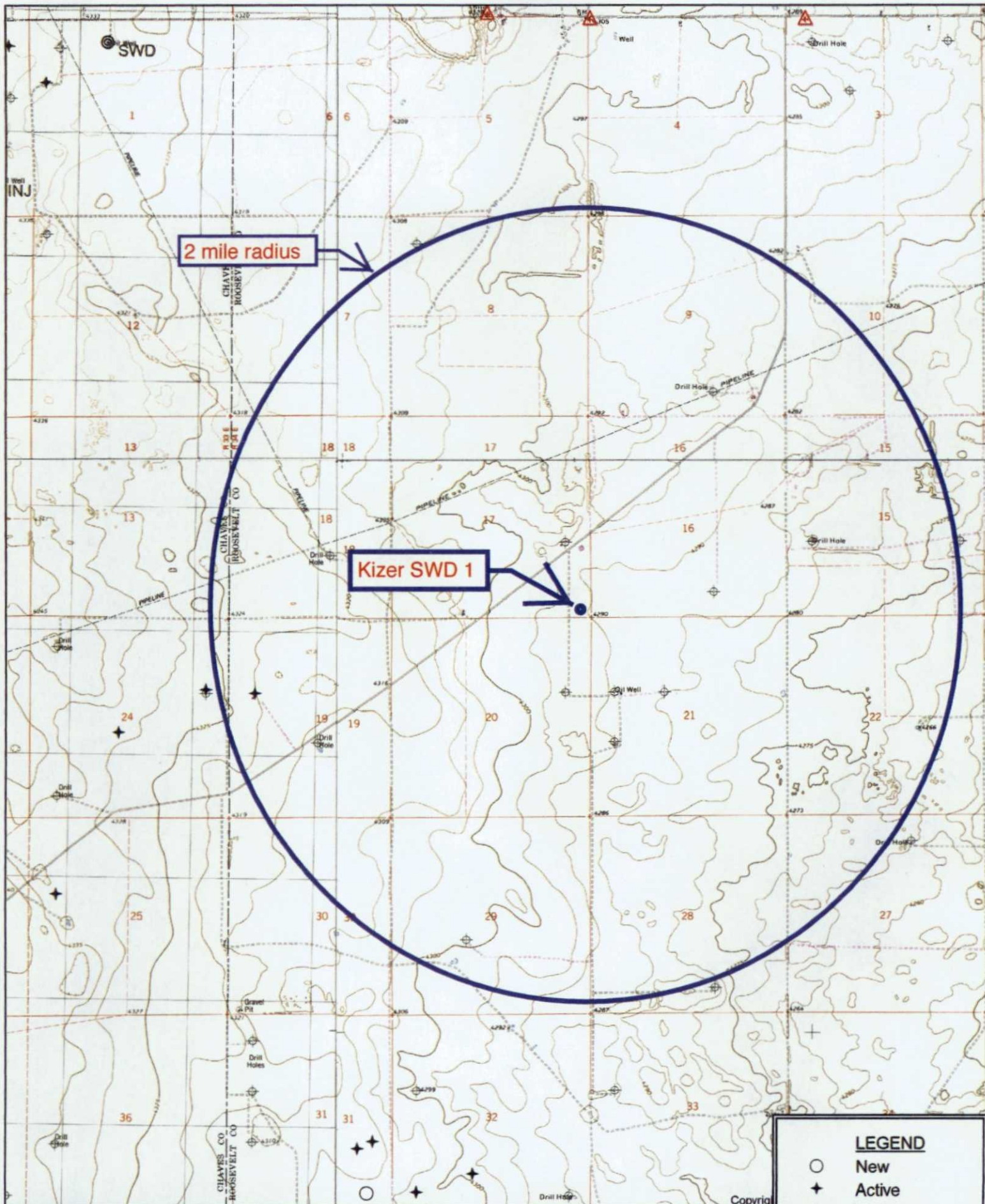


Quad: MILNESAND SW
Scale: 1 inch = 2,000 ft.

EXHIBIT B

LEGEND

- New
- + Active
- ⊕ P&A
- ⊙ INJ
- ⊙ SWD
- ⊙



2 mile radius

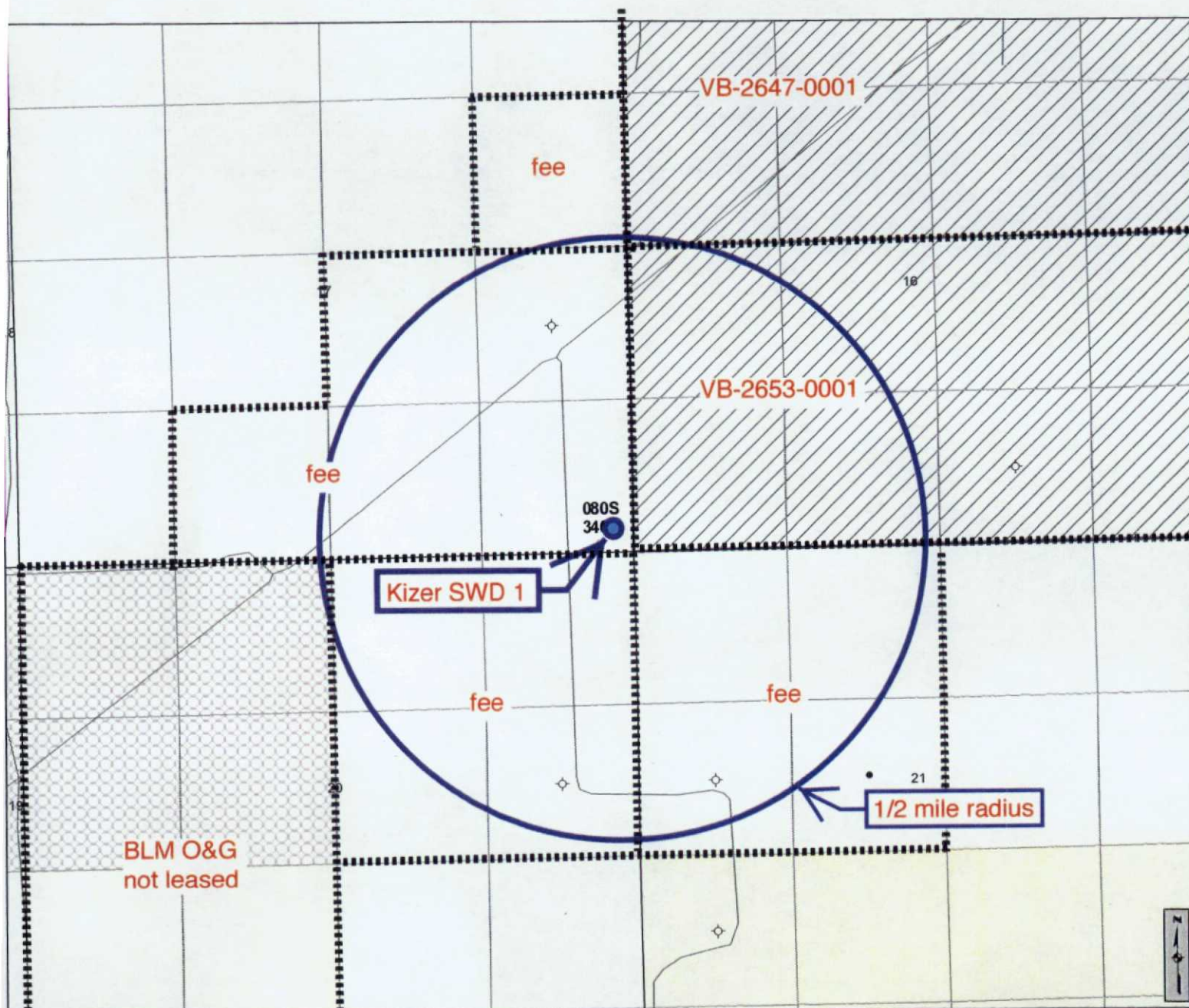
Kizer SWD 1

LEGEND

- New
- ✦ Active
- ✦ P&A
- ⊙ INJ
- ⊙ SWD

Quad: MILNESAND SW
Scale: 1 inch = 3,278 ft.

EXHIBIT C



Cartographic Features

- County Boundaries
- County Seats
- City, Town or Village
- SLO District Offices
- SLO District Boundary
- Hwy Mileposts
- Interstate
- NM Hwy
- US Hwy
- Local Road
- Continental Divide

Federal Minerals Ownership

- All Minerals
- Coal Only
- Oil and Gas Only
- Oil, Gas and Coal Only
- Other Minerals

State Trust Lands

- Surface Estate
- Subsurface Estate
- Surface and Subsurface Estate

State Leases

- Oil and Gas Leases
- Agricultural Leases
- Commercial Leases
- Minerals Leases
- Not Available for Oil and Gas Leasing
- Oil and Gas Leasing Influenced by Restriction

Oil and Gas Related Features

- Oil and Gas Unit Boundary
- Participating Areas in Units
- Geologic Regions
- Volcanic Vents
- NMOCD Order R-111-P
- Potash Enclave Outline

NMOCD Oil and Gas Wells

- CO₂
- Injection
- Oil
- Water
- Gas
- Miscellaneous
- Salt Water Disposal
- DA or PA

New Mexico State Land Office Oil, Gas and Minerals

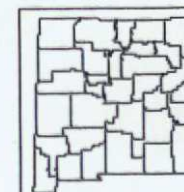
0 0.05 0.1 0.2 0.3 0.4 Miles
Universal Transverse Mercator Projection, Zone 13
1983 North American Datum

The New Mexico State Land Office assumes no responsibility or liability for, or in connection with, the accuracy, reliability or use of the information provided here, in State Land Office data layers or any other data layer.

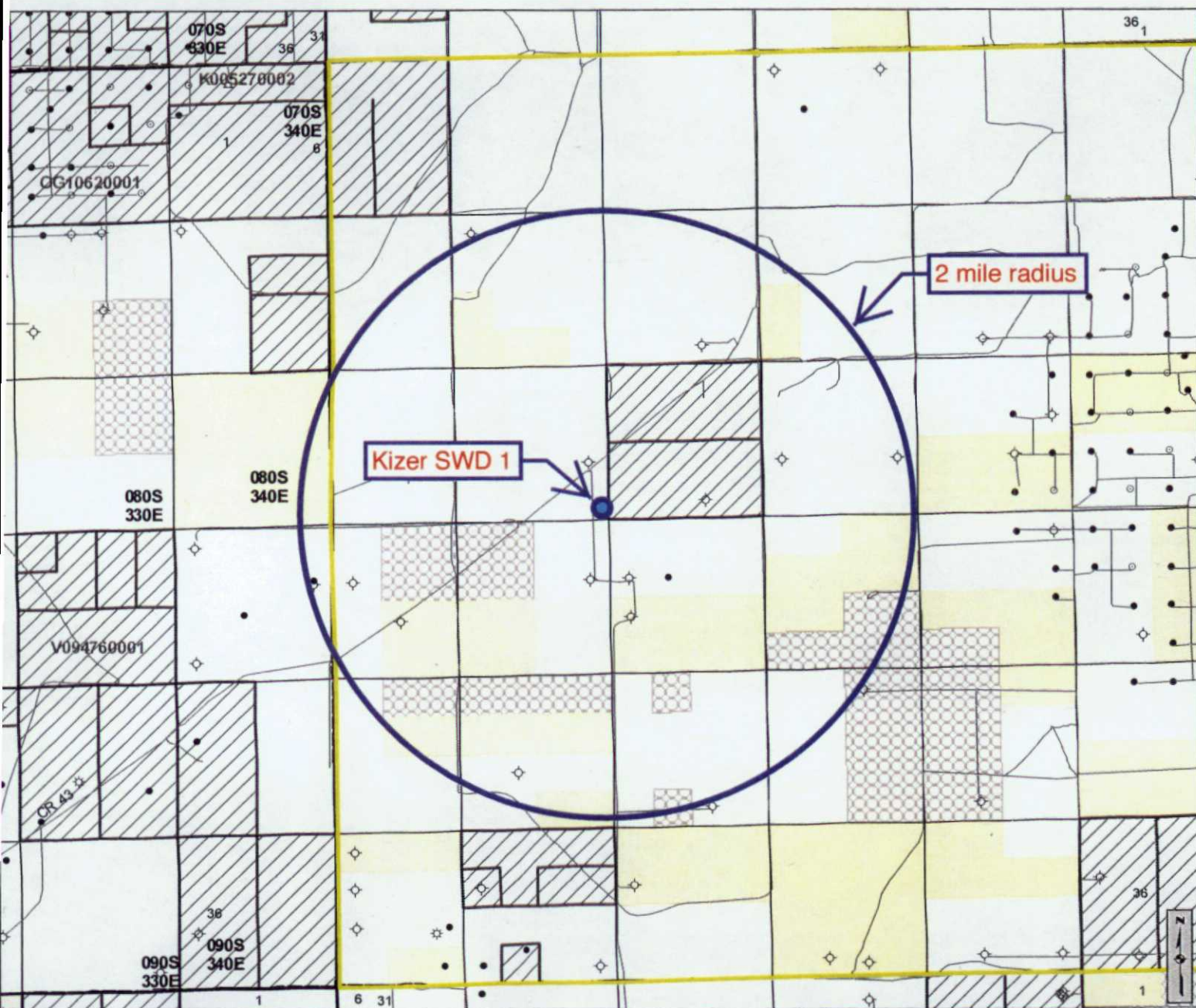
Land Office Geographic Information Center
logic@sls.state.nm.us

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EXHIBIT D



www.nmstatelands.org



Cartographic Features

- County Boundaries
- County Seats
- City, Town or Village
- SLO District Offices
- SLO District Boundary
- Hwy Mileposts
- Interstate
- NM Hwy
- Continental Divide
- US Hwy
- Local Road

Federal Minerals Ownership

- All Minerals
- Coal Only
- Oil and Gas Only
- Oil, Gas and Coal Only
- Other Minerals

State Trust Lands

- Surface Estate
- Subsurface Estate
- Surface and Subsurface Estate

State Leases

- Oil and Gas Leases
- Agricultural Leases
- Commercial Leases
- Minerals Leases
- Not Available for Oil and Gas Leasing
- Oil and Gas Leasing Influenced by Restriction

Oil and Gas Related Features

- Oil and Gas Unit Boundary
- Participating Areas in Units
- Geologic Regions
- Volcanic Vents
- NMOC Order R-111-P Potash Enclave Outline

NMOC Oil and Gas Wells

- CO₂
- Injection
- Oil
- Water
- Gas
- Miscellaneous
- Salt Water Disposal
- DA or PA

New Mexico State Land Office
Oil, Gas and Minerals

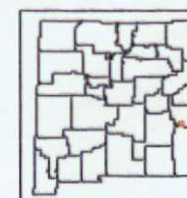
0 0.2 0.4 0.8 1.2 1.6
Miles
Universal Transverse Mercator Projection, Zone 13
1983 North American Datum

The New Mexico State Land Office assumes no responsibility or liability for, or in connection with, the accuracy, reliability or use of the information provided here, in State Land Office data layers or any other data layer.

Land Office Geographic Information Center
logc@slo.state.nm.us

Created On: 8/14/2016 3:49:48 PM

EXHIBIT E



www.nmstatelands.org

HALLIBURTON DIVISION LABORATORY
HALLIBURTON COMPANY
MIDLAND DIVISION

CASE NO. 3971

LABORATORY WATER ANALYSIS

No. 11-22-68

To Bill McCoy

San Andres water

Date 11-22-68

Reswell, New Mexico

This report is the property of Halliburton Company and neither it nor any part thereof nor is any thereof to be submitted or disclosed without first securing the express written approval of laboratory management; it may however, be used in the course of regular business operations by any person or persons and employees thereof receiving such report from Halliburton Company.

Submitted by

Date Rec. 11-22-68

Well No.

Depth

Formation

County

Field

Source

Southern Minerals
"C" Lease

Resistivity

.048 2 71 F.

Specific Gravity

1.178

pH

5.7

Calcium (Ca)

28,000

Magnesium (Mg)

9,600

Chlorides (Cl)

161,500

Sulfates (SO₄)

120

Bicarbonates (HCO₃)

390

Soluble Iron (Fe)

Nil

Sulfides (H₂S)

5

from well file
30-005-10478
C-1-8s-33e
R-3615
Case 3971

BEFORE EXAMINATION
OIL CONSERVATION
EXHIBIT NO. 4
CASE NO. 3971

Remarks:

*Milligrams per liter

Respectfully submitted,

Analyst: Whitfield

HALLIBURTON COMPANY

CC:

By

Frank L. Whitfield
DIVISION CHEMIST

NOTICE

This report is limited to the described sample tested. Any user of this report agrees that Halliburton shall not be liable for any loss or damage, whether it be to act or omission, resulting from such report or its use.

EXHIBIT F

HALLIBURTON ENERGY SERVICES

from well file
SWD-651
30-005-62523

WATER ANALYSIS

Devonian

Artesia, NM LAB

ANALYSIS #: ATO10037

GENERAL INFORMATION

OPERATOR: Marbob Energy
WELL: Ramos Fee # 1
FIELD: 30-005-63104
FORMATION: G-7-13s-28e
COUNTY:
STATE:

DEPTH:
DATE SAMPLED: 10/22/96
DATE RECEIVED: 10/23/96
SUBMITTED BY: John Gray
WORKED BY: Mike Hill
PHONE #: (505) 746-2757

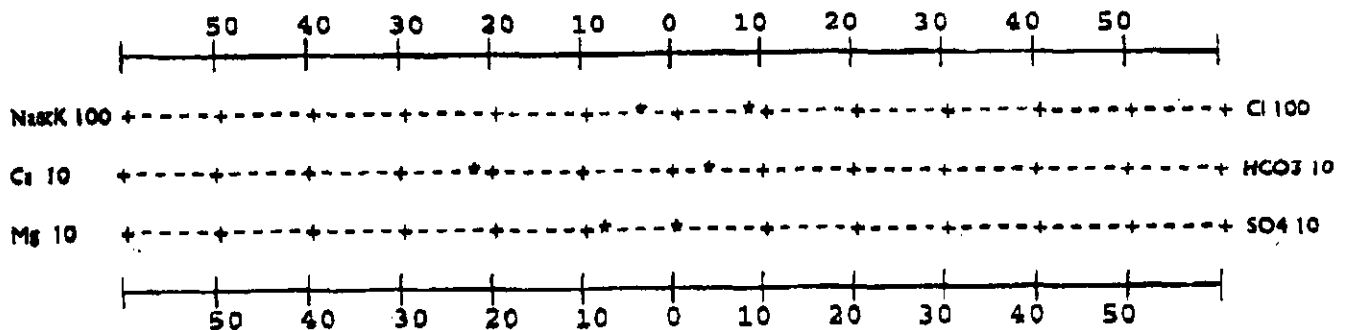
SAMPLE DESCRIPTION:

PHYSICAL AND CHEMICAL DETERMINATIONS

| | | | |
|-----------------------|-------------------|------------------------|-----------|
| SPECIFIC GRAVITY: | 1.030 @ 70 °F | PH: | 7.2 |
| RESISTIVITY (CALC.): | .115 OHMS @ 75 °F | | |
| IRON (FE++): | 3 PPM | SULFATE: | 194 PPM |
| CALCIUM: | 4350 PPM | TOTAL HARDNESS: | 14660 PPM |
| MAGNESIUM: | 920 PPM | BICARBONATE: | 1925 PPM |
| CHLORIDE: | 26208 PPM | SODIUM CHLORIDE (CALC) | 43112 PPM |
| SODIUM+POTASS: | 11086 PPM | TOT. DISSOLVED SOLIDS: | 54073 PPM |

REMARKS:

STIFF TYPE PLOT (IN MEQ/L)



ANALYST

Mike Hill

EXHIBIT F

HALLIBURTON ENERGY SERVICES

Devonian

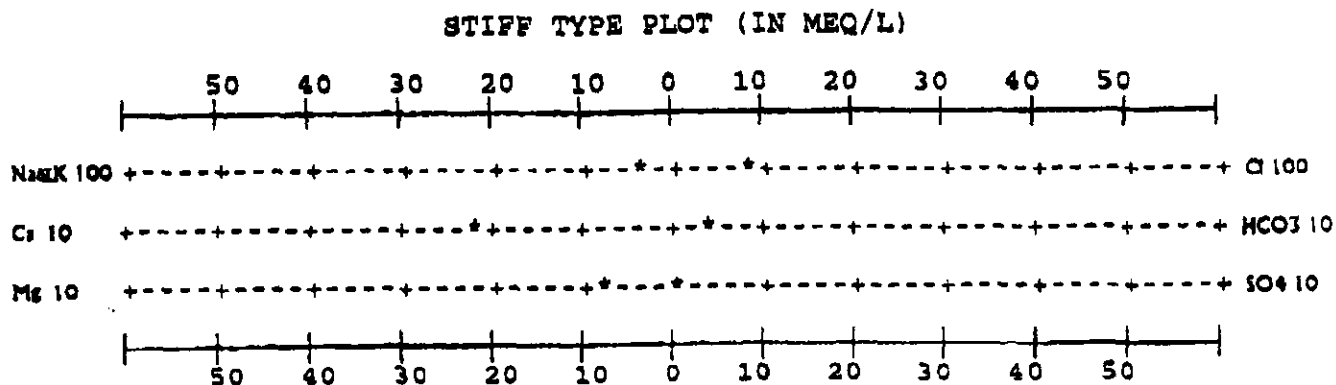
ANALYSIS #: ATO10037

DEPTH:
DATE SAMPLED: 10/22/96
DATE RECEIVED: 10/23/96
SUBMITTED BY: John Gray
WORKED BY: Mike Hill
PHONE #: (505) 746-2757

SAMPLE DESCRIPTION: 25% Emulsion, most likely Due to Iron Contaminant

| | | | |
|---|-----------|------------------------|-----------|
| SPECIFIC GRAVITY: 1.025 @ 70 °F | | PH: 7.2 | |
| RESISTIVITY (CALC.): .115 OHMS @ 75 °F | | | |
| IRON (FE++): | 25 PPM | SULFATE: | 390 PPM |
| CALCIUM: | 4488 PPM | TOTAL HARDNESS: | 15122 PPM |
| MAGNESIUM: | 948 PPM | BICARBONATE: | 1934 PPM |
| CHLORIDE: | 25360 PPM | SODIUM CHLORIDE (CALC) | 41717 PPM |
| SODIUM+POTASS: | 10421 PPM | TOT. DISSOLVED SOLIDS: | 53228 PPM |

REMARKS :



ANALYST

Mike Hill

EXHIBIT F

HALLIBURTON DIVISION LABORATORY

HALLIBURTON SERVICES

ARTESIA DISTRICT

LABORATORY REPORT

from well file
SWD-651
30-005-62523

No. W146-89

TO Hanagan Petroleum
P. O. Box 1737
Roswell, NM 88201

Date May 1, 1989

This report is the property of Halliburton Services and neither it nor any part thereof, nor a copy thereof, is to be published or disclosed without first securing the express written approval of laboratory management. It may however, be used in the course of regular business operations by any person or persons and employees thereof receiving such report from Halliburton Services.

Submitted by _____ Date Rec. April 28, 1989Well No. Long Arroyo #2 30-005-62523 Depth _____ Formation DevonianField K-33-12s-28e County _____ Source SwabResistivity195 @ 60°Specific Gravity .. 1.025 @ 60°pH 7.0Calcium 3,800Magnesium 800Chlorides 22,000Sulfates 1,600Bicarbonates 900Soluble Iron 150

Remarks:

EXHIBIT F

Art Carrasco *Devonian*
Respectfully submitted

Analyst: Art Carrasco - District Engineer

HALLIBURTON SERVICES

NOTICE:

This report is for information only and the content is limited to the sample described. Halliburton makes no warranties, express or implied, as to the accuracy of the contents or results. Any user of this report agrees Halliburton shall not be liable for any loss, including any act or omission of Halliburton, resulting from the use hereof.

from well file
SWD-651
30-005-62523

Devonian **Water Comparison Table**

| | Devonian Long Arroyo #2 | Devonian Ramos #1 | Devonian Charlie St. #1 |
|-------------------------|----------------------------|----------------------|----------------------------|
| Resistivity | .195@60 | .115@75 | .115@75 |
| Specific Gravity | 1.025@60 | 1.030@75 | 1.025@75 |
| pH | 7.0 | 7.2 | 7.5 |
| Calcium | 3800ppm | 4350ppm | 4488ppm |
| Magnesium | 800ppm | 920ppm | 948ppm |
| Chlorides | 22000ppm | 26208ppm | 25360ppm |
| Sulfates | 1600ppm | 194ppm | 390ppm |
| Bicarbonates | 900ppm | 1925ppm | 1934ppm |



New Mexico Office of the State Engineer Water Column/Average Depth to Water

(A CLW#### in the
POD suffix indicates the
POD has been replaced
& no longer serves a
water right file.)

(R=POD has
been replaced,
O=orphaned,
C=the file is
closed)

(quarters are 1=NW 2=NE 3=SW 4=SE)

(quarters are smallest to largest)

incorrect UTM's

(NAD83 UTM in meters)

(In feet)

| POD | | | | | | | | | | Depth | | | | | | | | | | | | | | |
|---------------------|--|--|--|--|--|--|--|--|--|-------------------|----|----|---|---|---|----|-----|-----|--------|---------|-------|-----|-----|----|
| Sub | | | | | | | | | | Well | | | | | | | | | | | | | | |
| Q Q Q | | | | | | | | | | Water | | | | | | | | | | | | | | |
| POD Number | | | | | | | | | | Distance | | | | | | | | | | | | | | |
| Code basin County | | | | | | | | | | Well Water Column | | | | | | | | | | | | | | |
| 64 16 4 Sec Tws Rng | | | | | | | | | | | | | | | | | | | | | | | | |
| X | | | | | | | | | | Y | | | | | | | | | | | | | | |
| L 14097 POD1 | | | | | | | | | | 3220 meters | L | LE | 1 | 3 | 3 | 06 | 20S | 35E | 638740 | 3718500 | 3048 | 61 | 0 | 61 |
| L 13691 POD1 | | | | | | | | | | = 2.00 miles | L | LE | 1 | 1 | 4 | 22 | 09S | 32E | 637362 | 3725298 | 6111 | 150 | | |
| CL 00314 POD1 | | | | | | | | | | | CH | | 1 | 2 | 2 | 34 | 08S | 33E | 634611 | 3716897 | 7382 | 220 | 157 | 63 |
| L 11998 FOD1 | | | | | | | | | | | L | LE | 3 | 3 | 2 | 07 | 09S | 35E | 648592 | 3713286 | 10377 | 200 | | |
| CL 00307 POD1 | | | | | | | | | | | CH | | 2 | 3 | 4 | 13 | 08S | 32E | 628014 | 3720298 | 13069 | 195 | 165 | 30 |
| RA 12226 POD1 | | | | | | | | | | | CH | | 4 | 4 | 4 | 22 | 08S | 32E | 625136 | 3718457 | 16070 | 115 | 80 | 35 |

Average Depth to Water: 100 feet

Minimum Depth: 0 feet

Maximum Depth: 165 feet

Record Count: 6

UTM NAD83 Radius Search (in meters):

Easting (X): 641083

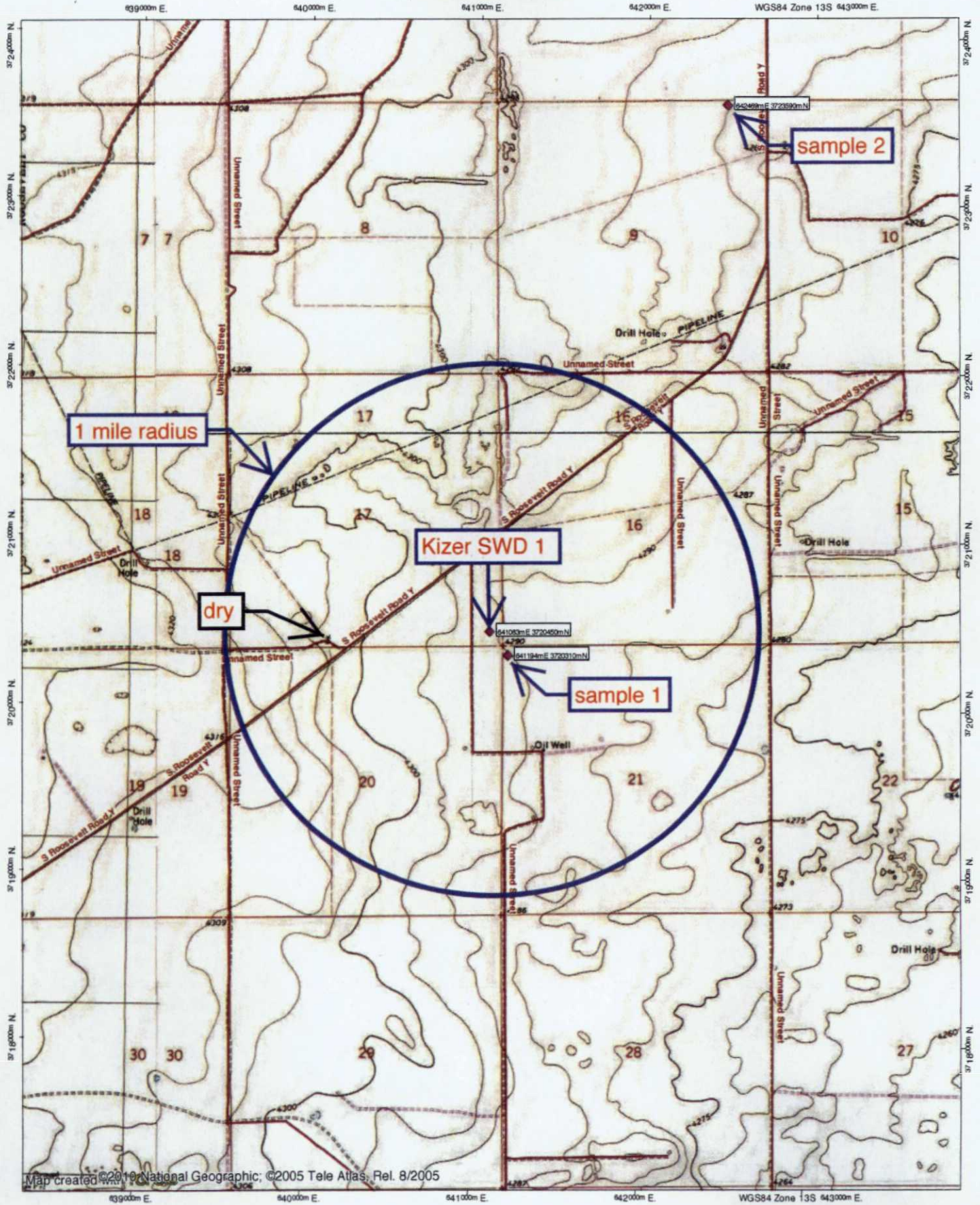
Northing (Y): 3720450

Radius: 16100 meters

= 10.00 miles

EXHIBIT G

The data is furnished by the NMOSE/ISC and is accepted by the recipient with the expressed understanding that the OSE/ISC make no warranties, expressed or implied, concerning the accuracy, completeness, reliability, usability, or suitability for any particular purpose of the data.



Map created with National Geographic; ©2005 Tele Atlas, Rel. 8/2005

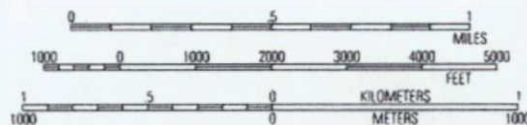


EXHIBIT H

Analytical Report

Lab Order 1608362

Date Reported: 8/18/2016

Hall Environmental Analysis Laboratory, Inc.**CLIENT:** Permits West**Client Sample ID:** Kizer SWD 2**Project:** Rockcliff Kizer SWD 1**Collection Date:** 8/3/2016 11:15:00 AM**Lab ID:** 1608362-001**Matrix:** AQUEOUS**Received Date:** 8/5/2016 3:05:00 PM

| Analyses | Result | PQL | Qual | Units | DF | Date Analyzed | Batch |
|--|--------|------|------|-------|----|----------------------|--------------|
| EPA METHOD 1664A | | | | | | | Analyst: tnc |
| N-Hexane Extractable Material | ND | 9.9 | | mg/L | 1 | 8/8/2016 9:13:00 AM | 26831 |
| EPA METHOD 300.0: ANIONS | | | | | | | Analyst: LGT |
| Chloride | 300 | 10 | * | mg/L | 20 | 8/8/2016 7:24:14 PM | R36321 |
| SM2540C MOD: TOTAL DISSOLVED SOLIDS | | | | | | | Analyst: KS |
| Total Dissolved Solids | 1200 | 20.0 | * | mg/L | 1 | 8/12/2016 9:40:00 AM | 26881 |

Refer to the QC Summary report and sample login checklist for flagged QC data and preservation information.

| | | |
|--------------------|---|---|
| Qualifiers: | * Value exceeds Maximum Contaminant Level. | B Analyte detected in the associated Method Blank |
| | D Sample Diluted Due to Matrix | E Value above quantitation range |
| | H Holding times for preparation or analysis exceeded | J Analyte detected below quantitation limits |
| | ND Not Detected at the Reporting Limit | P Sample pH Not In Range |
| | R RPD outside accepted recovery limits | RL Reporting Detection Limit |
| | S % Recovery outside of range due to dilution or matrix | W Sample container temperature is out of limit as specified |

Analytical Report

Lab Order 1608362

Date Reported: 8/18/2016

Hall Environmental Analysis Laboratory, Inc.**CLIENT:** Permits West**Client Sample ID:** Kizer SWD 1**Project:** Rockcliff Kizer SWD 1**Collection Date:** 8/3/2016 2:02:00 PM**Lab ID:** 1608362-002**Matrix:** AQUEOUS**Received Date:** 8/5/2016 3:05:00 PM

| Analyses | Result | PQL | Qual | Units | DF | Date Analyzed | Batch |
|--|--------|-----|------|-------|----|----------------------|--------------|
| EPA METHOD 1664A | | | | | | | Analyst: tnc |
| N-Hexane Extractable Material | ND | 10 | | mg/L | 1 | 8/8/2016 9:13:00 AM | 26831 |
| EPA METHOD 300.0: ANIONS | | | | | | | Analyst: LGT |
| Chloride | 230 | 10 | | mg/L | 20 | 8/8/2016 7:49:03 PM | R36321 |
| SM2540C MOD: TOTAL DISSOLVED SOLIDS | | | | | | | Analyst: KS |
| Total Dissolved Solids | 1100 | 100 | *D | mg/L | 1 | 8/12/2016 9:40:00 AM | 26881 |

Refer to the QC Summary report and sample login checklist for flagged QC data and preservation information.

| | | |
|--------------------|---|---|
| Qualifiers: | * Value exceeds Maximum Contaminant Level. | B Analyte detected in the associated Method Blank |
| | D Sample Diluted Due to Matrix | E Value above quantitation range |
| | H Holding times for preparation or analysis exceeded | J Analyte detected below quantitation limits |
| | ND Not Detected at the Reporting Limit | P Sample pH Not In Range |
| | R RPD outside accepted recovery limits | RL Reporting Detection Limit |
| | S % Recovery outside of range due to dilution or matrix | W Sample container temperature is out of limit as specified |

Page 2 of 5

EXHIBIT H

QC SUMMARY REPORT

Hall Environmental Analysis Laboratory, Inc.

WO#: 1608362

18-Aug-16

Client: Permits West
Project: Rockcliff Kizer SWD 1

| | | | | | | | | | | |
|-------------------------------|----------|---------------|-----------|-------------|------------------|-------------|-----------|------|----------|------|
| Sample ID | MB-26831 | SampType | MBLK | TestCode | EPA Method 1664A | | | | | |
| Client ID | PBW | Batch ID | 26831 | RunNo | 36308 | | | | | |
| Prep Date | 8/8/2016 | Analysis Date | 8/8/2016 | SeqNo | 1124699 | Units: mg/L | | | | |
| Analyte | Result | PQL | SPK value | SPK Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit | Qual |
| N-Hexane Extractable Material | ND | 10 | | | | | | | | |

| | | | | | | | | | | |
|-------------------------------|-----------|---------------|-----------|-------------|------------------|-------------|-----------|------|----------|------|
| Sample ID | LCS-26831 | SampType | LCS | TestCode | EPA Method 1664A | | | | | |
| Client ID | LCSW | Batch ID | 26831 | RunNo | 36308 | | | | | |
| Prep Date | 8/8/2016 | Analysis Date | 8/8/2016 | SeqNo | 1124700 | Units: mg/L | | | | |
| Analyte | Result | PQL | SPK value | SPK Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit | Qual |
| N-Hexane Extractable Material | 39 | 10 | 40.00 | 0 | 97.0 | 78 | 114 | | | |

Qualifiers:

* Value exceeds Maximum Contaminant Level.
D Sample Diluted Due to Matrix
H Holding times for preparation or analysis exceeded
ND Not Detected at the Reporting Limit
R RPD outside accepted recovery limits
S % Recovery outside of range due to dilution or matrix

B Analyte detected in the associated Method Blank
E Value above quantitation range
J Analyte detected below quantitation limits
P Sample pH Not In Range
RL Reporting Detection Limit
W Sample container temperature is out of limit as specified

QC SUMMARY REPORT

Hall Environmental Analysis Laboratory, Inc.

WO#: 1608362

18-Aug-16

Client: Permits West
Project: Rockcliff Kizer SWD 1

| | | | | | | | | | | |
|-----------|--------|---------------|-----------|-------------|--------------------------|----------|-----------|------|----------|------|
| Sample ID | MB | SampType | MBLK | TestCode | EPA Method 300.0: Anions | | | | | |
| Client ID | PBW | Batch ID | R36321 | RunNo | 36321 | | | | | |
| Prep Date | | Analysis Date | 8/8/2016 | SeqNo | 1124938 | Units | mg/L | | | |
| Analyte | Result | PQL | SPK value | SPK Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit | Qual |
| Chloride | ND | 0.50 | | | | | | | | |

| | | | | | | | | | | |
|-----------|--------|---------------|-----------|-------------|--------------------------|----------|-----------|------|----------|------|
| Sample ID | LCS | SampType | LCS | TestCode | EPA Method 300.0: Anions | | | | | |
| Client ID | LCSW | Batch ID | R36321 | RunNo | 36321 | | | | | |
| Prep Date | | Analysis Date | 8/8/2016 | SeqNo | 1124939 | Units | mg/L | | | |
| Analyte | Result | PQL | SPK value | SPK Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit | Qual |
| Chloride | 4.8 | 0.50 | 5.000 | 0 | 95.2 | 90 | 110 | | | |

Qualifiers:

- | | |
|---|---|
| * Value exceeds Maximum Contaminant Level. | B Analyte detected in the associated Method Blank |
| D Sample Diluted Due to Matrix | E Value above quantitation range |
| H Holding times for preparation or analysis exceeded | J Analyte detected below quantitation limits |
| ND Not Detected at the Reporting Limit | P Sample pH Not In Range |
| R RPD outside accepted recovery limits | RL Reporting Detection Limit |
| S % Recovery outside of range due to dilution or matrix | W Sample container temperature is out of limit as specified |

QC SUMMARY REPORT

Hall Environmental Analysis Laboratory, Inc.

WO#: 1608362

18-Aug-16

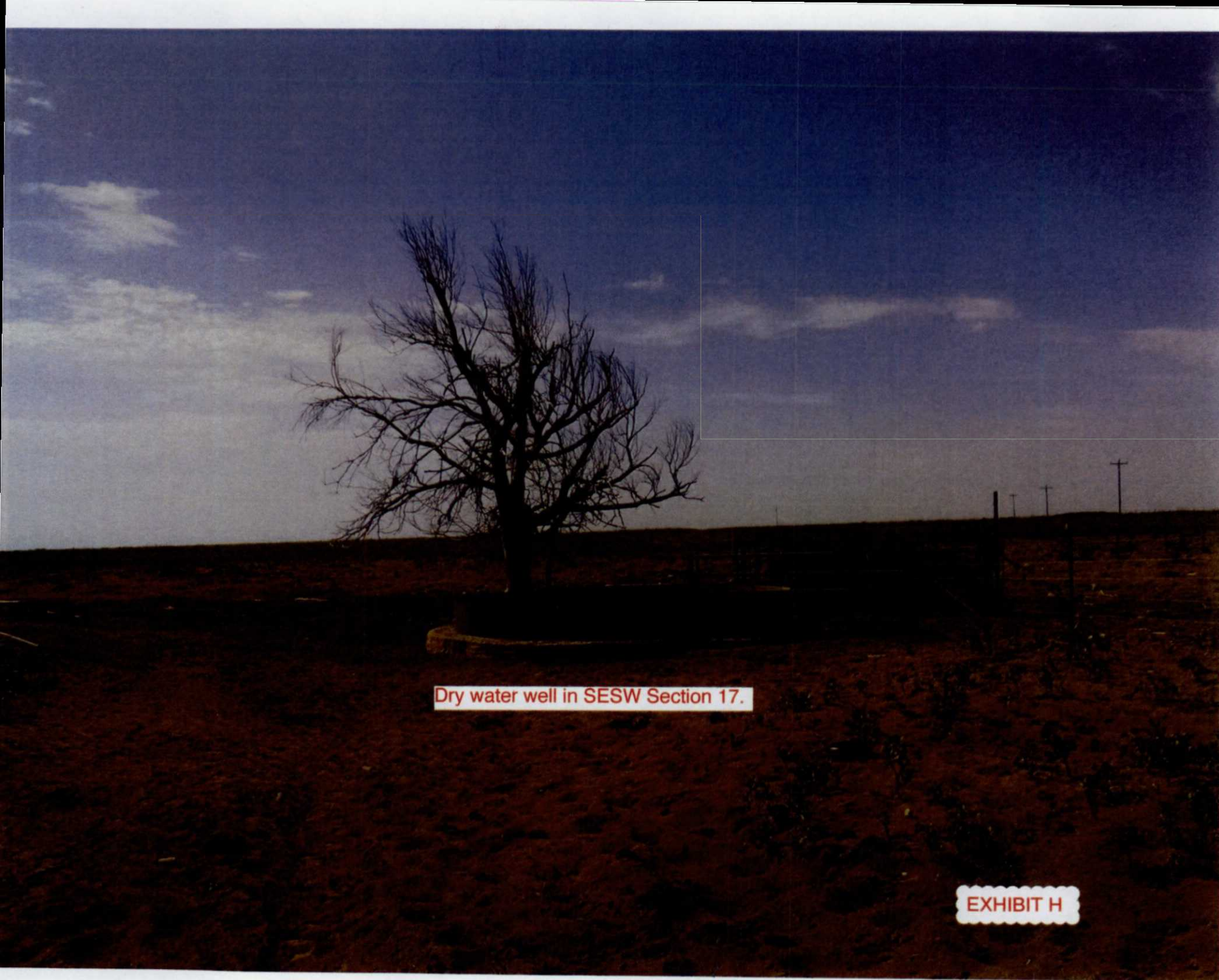
Client: Permits West
Project: Rockcliff Kizer SWD 1

| | | | | | | | | | | |
|------------------------|-----------|----------------|-----------|-------------|-------------------------------------|----------|-----------|------|----------|------|
| Sample ID | MB-26881 | SampType: | MBLK | TestCode: | SM2540C MOD: Total Dissolved Solids | | | | | |
| Client ID: | PBW | Batch ID: | 26881 | RunNo: | 36450 | | | | | |
| Prep Date: | 8/10/2016 | Analysis Date: | 8/12/2016 | SeqNo: | 1129068 | Units: | mg/L | | | |
| Analyte | Result | PQL | SPK value | SPK Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit | Qual |
| Total Dissolved Solids | ND | 20.0 | | | | | | | | |

| | | | | | | | | | | |
|------------------------|-----------|----------------|-----------|-------------|-------------------------------------|----------|-----------|------|----------|------|
| Sample ID | LCS-26881 | SampType: | LCS | TestCode: | SM2540C MOD: Total Dissolved Solids | | | | | |
| Client ID: | LCSW | Batch ID: | 26881 | RunNo: | 36450 | | | | | |
| Prep Date: | 8/10/2016 | Analysis Date: | 8/12/2016 | SeqNo: | 1129069 | Units: | mg/L | | | |
| Analyte | Result | PQL | SPK value | SPK Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit | Qual |
| Total Dissolved Solids | 1010 | 20.0 | 1000 | 0 | 101 | 80 | 120 | | | |

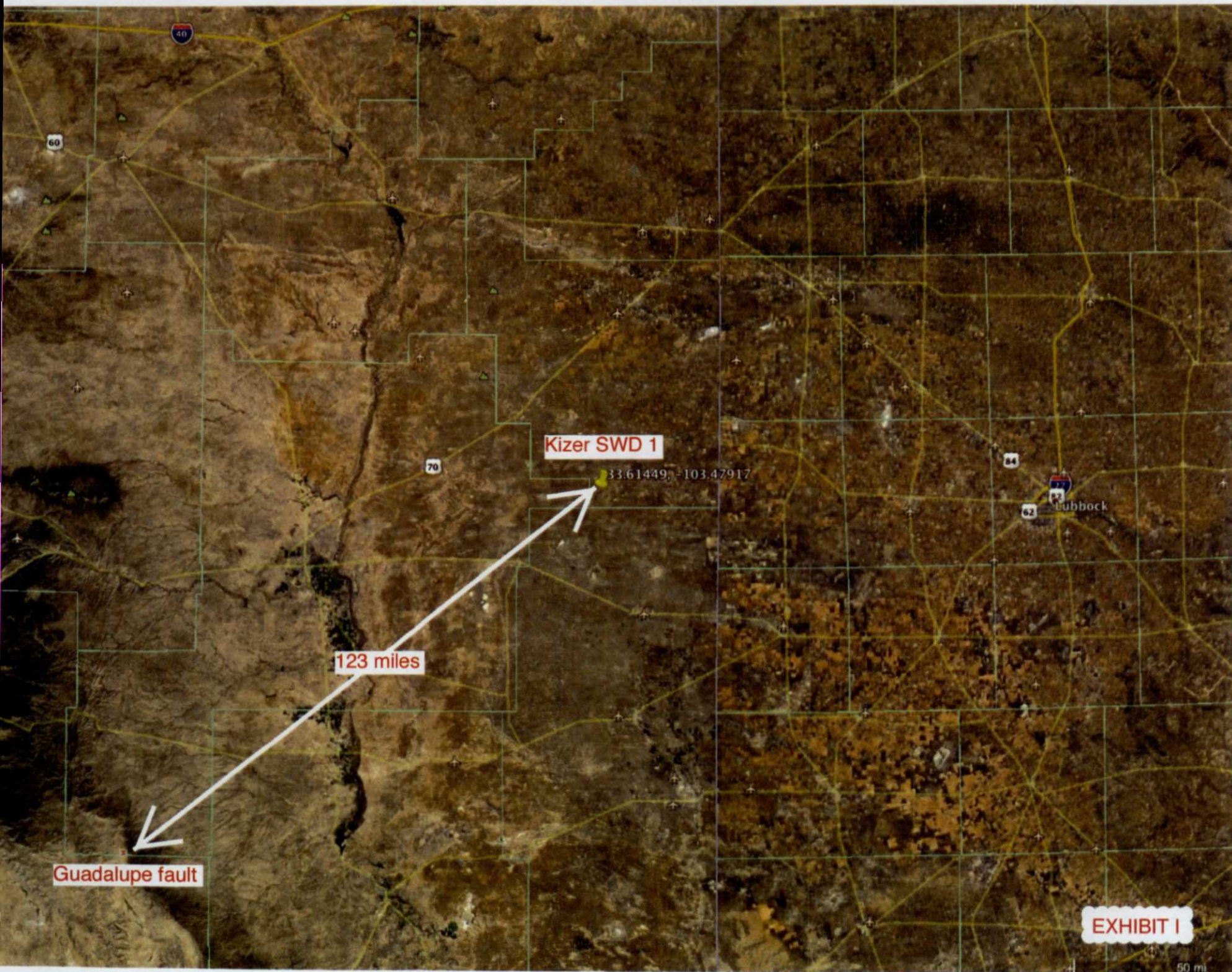
Qualifiers:

- | | |
|---|---|
| * Value exceeds Maximum Contaminant Level. | B Analyte detected in the associated Method Blank |
| D Sample Diluted Due to Matrix | E Value above quantitation range |
| H Holding times for preparation or analysis exceeded | J Analyte detected below quantitation limits |
| ND Not Detected at the Reporting Limit | P Sample pH Not In Range |
| R RPD outside accepted recovery limits | RL Reporting Detection Limit |
| S % Recovery outside of range due to dilution or matrix | W Sample container temperature is out of limit as specified |



Dry water well in SESW Section 17.

EXHIBIT H



40

60

70

84

62

Lubbock

Kizer SWD 1

33.61449, -103.47917

123 miles

Guadalupe fault

EXHIBIT I

50 mi



August 23, 2016

New Mexico Oil Conservation Division
1220 South St. Francis Drive
Santa Fe, New Mexico 87505

RE: Geologic Statement
Kizer SWD #1
Section 17-Township 8 South-Range 34 East
Roosevelt County, New Mexico

To whom it may concern:

Rockcliff Energy has reviewed all currently available geologic and engineering data related to the proposed well and no evidence for open faults or any other hydrological connection between the proposed deep Devonian injection zone, located at approximately 11,407' TVD (-7099 ss), and any underground sources of drinking water has been found.

Regards,

A handwritten signature in cursive script that reads 'Nanis Wallace'.

Nanis Wallace
Geologic Advisor
Rockcliff Energy LLC

AFFIDAVIT OF LEGAL PUBLICATION

LEGAL # 48638

Copy of Publication

STATE OF NEW MEXICO
COUNTY OF ROOSEVELT:

The undersigned, being duly sworn, says:
That she is a Legal Clerk of
The PORTALES NEWS-TRIBUNE, a daily
Newspaper of general circulation,
published in English at Portales,
said county and state, and that the
hereto attached

LEGAL 48638 AUGUST 4, 20

was published in said PORTALES NEWS-TRIBUNE,
a daily newspaper duly
qualified for that purpose within
the meaning of Chapter 167 of the
1937 Session Laws of the State of
New Mexico for 1 consecutive
days/weeks on the same days as follows:

08/04/2016

LEGAL 48638
August 4, 2016

Rockcliff Operating New Mexico LLC is applying to drill the Kizer SWD 1 as a saltwater disposal well. The well is staked at 270 FSL & 235 FEL Sec. 17, T. 8 S., R. 34 E., Roosevelt County and is 8 miles west-southwest of Mine-sand, NM. Disposal will be in the Siluro-Devoni-an from 10,000 to 13,500. Maximum injection pressure will be 2,000 psi. Maximum disposal rate will be 20,000 bwpd. Interest-ed parties must file ob-jections or requests for hearing with the NM Oil Conservation Division, 1220 South Saint Fran-cis Dr., Santa Fe, NM 87505 within 15 days. Additional information can be obtained by contacting Brian Wood, Permits West, Inc., 37 Verano Loop, Santa Fe, NM 87508. Phone num-ber is (505) 466-8120

Tammy Newby
Legal Clerk

Subscribed and sworn to before me
4th day of August, 2016

Leslie Nagy
Notary Public
Leslie Nagy



OFFICIAL SEAL
LESLIE NAGY
NOTARY PUBLIC STATE OF NEW MEXICO

My commission expires _____

My Commission Expires: 05/24/2019

EXHIBIT J



August 31, 2016

PEC Minerals LP
16400 Dallas Parkway #400
Dallas TX 75248

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

Well: Kizer SWD 1 TD = 11,800'
Proposed Disposal Zones: Devonian & Silurian (11,410' - 11,730')
Location: 270' FSL & 235' FEL Sec. 17, T. 8 S., R. 34 E., Roosevelt County, NM
Approximate Location: 8 miles west-southwest of Milnesand, NM
Applicant Name: Rockcliff Operating New Mexico LLC (713) 351-0500
Applicant's Address: 1301 McKinney, Suite 1300, Houston TX 77010

Submission Information: Application for a saltwater disposal well will be filed with the NMOCD. If you have an objection, or wish to request a hearing, then it must be filed with the NMOCD within 15 days of receipt of this letter. The New Mexico Oil Conservation Division address is 1220 South St. Francis Dr. Santa Fe, NM 87505. Their phone number is (505) 476-3440.

Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

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

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

Certified Mail Fee \$ **3.30**

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

☒ Return Receipt (hardcopy) \$ **2.70**

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$ **1.57**

Total Postage and Fees \$ **7.57**

Sent to **PEC Minerals LP**
16400 Dallas Parkway #400
Dallas TX 75248
Rockcliff Kizer SWD1

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

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



August 31, 2016

Shannon Kizer
PO Box 56
Pep NM 88126

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

Well: Kizer SWD 1 TD = 11,800'
Proposed Disposal Zones: Devonian & Silurian (11,410' - 11,730')
Location: 270' FSL & 235' FEL Sec. 17, T. 8 S., R. 34 E., Roosevelt County, NM
Approximate Location: 8 miles west-southwest of Milnesand, NM
Applicant Name: Rockcliff Operating New Mexico LLC (713) 351-0500
Applicant's Address: 1301 McKinney, Suite 1300, Houston TX 77010

Submission Information: Application for a saltwater disposal well will be filed with the NMOCD. If you have an objection, or wish to request a hearing, then it must be filed with the NMOCD within 15 days of receipt of this letter. The New Mexico Oil Conservation Division address is 1220 South St. Francis Dr. Santa Fe, NM 87505. Their phone number is (505) 476-3440.

Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

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Sent to **Shannon Kizer**
PO Box 56
Pep NM 88126
Rockcliff Kizer SWD1

Street and Apt. No., or PO Box No.

City, State, ZIP+4®



August 31, 2016

David Feller Schuman
7 Cider Mill Road
Haydenville MA 01039

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

Well: Kizer SWD 1 ID = 11,800'

Proposed Disposal Zones: Devonian & Silurian (11,410' - 11,730')

Location: 270' FSL & 235' FEL Sec. 17, T. 8 S., R. 34 E., Roosevelt County, NM

Approximate Location: 8 miles west-southwest of Milnesand, NM

Applicant Name: Rockcliff Operating New Mexico LLC (713) 351-0500

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Please call me if you have any questions.

Sincerely,

Bj Wood

Brian Wood

EXHIBIT K

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| Sent To: David Feller Schuman 7 Cider Mill Road Haydenville MA 01039 Rockcliff Kizer SWD1 | |
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| City, State, ZIP+4® | |



August 31, 2016

Jennis Ruth Schuman Kauffman
10735 Villa Lea Lane
Houston TX 77071

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

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Please call me if you have any questions.

Sincerely,

Bj Wood

Brian Wood

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| Sent To: Jennis Ruth Schuman Kauffman 10735 Villa Lea Lane Houston TX 77071 Rockcliff Kizer SWD1 | |
| Street and Apt. No., or PO Box No. | |
| City, State, ZIP+4® | |



August 31, 2016

Black Stone Minerals
1001 Fannin, Suite 2020
Houston TX 77002

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Please call me if you have any questions.

Sincerely,

Brian Wood

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Houston TX 77002
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August 31, 2016

Royalty Exchange Inc.
PO Box 6264
San Antonio TX 78209

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

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Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

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Rockcliff Kizer-SWD1

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



August 31, 2016

Marc Schuman
10627 Pictured Rocks Drive
Peyton CO 80931

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

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Please call me if you have any questions.

Sincerely,

Brian Wood

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Sent To **Marc Schuman**
10627 Pictured Rocks Drive
Peyton CO 80931
Rockcliff Kizer SWD1

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

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7015 1660 0000 099T 5102

August 31, 2016

Jennis Kauffman
10735 Villa Lea Lane
Houston TX 77071

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

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Please call me if you have any questions.

Sincerely,

Brian Wood

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Total Postage and Fees \$

Sent To **Jennis Kauffman**
10735 Villa Lea Lane
Houston TX 77071
Rockcliff Kizer SWD1

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

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EXHIBIT K



August 31, 2016

Successor of Continental Corp
c/o Stephens Production Company
1825 Lawrence St. Ste 300
Denver CO 80202

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

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Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

EXHIBIT K

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Successor of Continental Corp
c/o Stephens Production Company
1825 Lawrence St. Ste 300
Denver CO 80202
Rockcliff Kizer SWD1

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August 31, 2016

Daniel P. and Vida K. Schuman
Revocable
3818 South Florence Place
Tulsa OK 74105

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Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

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Street and Apt. No., or P.O. Box No.
City, State, ZIP+4®

Daniel P. and Vida K. Schuman
Revocable
3818 South Florence Place
Tulsa OK 74105
Rockcliff Kizer SWD1

PECOS NM
AUG 31 2016
352-9998



August 31, 2016

Kayla Marrufo
c/o Michael Marrufo
7622 Tomaso Way
Buena Park CA 91722

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Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

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| Sent To | Kayla Marrufo c/o Michael Marrufo 7622 Tomaso Way Buena Park CA 91722 Rockcliff Kizer SWD1 |
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August 31, 2016

Joe D. Ray
131 Kingwood Street
Hereford TX 79045

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Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

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| Sent To | Joe D. Ray 131 Kingwood Street Hereford TX 79045 Rockcliff Kizer SWD1 |
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August 31, 2016

Yates Petroleum
105 S. 4th Street
Artesia NM 88210

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Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

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Sent To **Yates Petroleum**
105 S. 4th Street
Artesia NM 88210
Street and Apt. No., or PO Box No.
City, State, ZIP+4®

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AUG 31 2016
87552-9998



August 31, 2016

Chelsea Marrufo
c/o Michael Marrufo
7622 Tomaso Way
Buena Park Ca 91722

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Brian Wood

Brian Wood

7015 1660 0000 0997 5102

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Sent To **Chelsea Marrufo**
c/o Michael Marrufo
7622 Tomaso Way
Buena Park Ca 91722
Street and Apt. No., or PO Box No.
City, State, ZIP+4®

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



August 31, 2016

Pedregosa Partners LLC
5949 Sherry Lane
Dallas TX 75225

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Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

EXHIBIT K

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Sent To
Pedregosa Partners LLC
5949 Sherry Lane
Dallas TX 75225
Street and Apt. No., or PO Box No.
Rockcliff Kizer SWD1
City, State, ZIP+4®

PECOS NM
AUG 31 2016
Postmark Here
87552-9998



August 31, 2016

Oxy USA Inc.
5 Greenway Plaza
Houston TX 77046

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

Well: Kizer SWD 1 ID = 11,800'

Proposed Disposal Zones: Devonian & Silurian (11,410' - 11,730')

Location: 270' FSL & 235' FEL Sec. 17, T. 8 S., R. 34 E., Roosevelt County, NM

Approximate Location: 8 miles west-southwest of Milnesand, NM

Applicant Name: Rockcliff Operating New Mexico LLC (713) 351-0500

Applicant's Address: 1301 McKinney, Suite 1300, Houston TX 77010

Submission Information: Application for a saltwater disposal well will be filed with the NMOCD. If you have an objection, or wish to request a hearing, then it must be filed with the NMOCD within 15 days of receipt of this letter. The New Mexico Oil Conservation Division address is 1220 South St. Francis Dr. Santa Fe, NM 87505. Their phone number is (505) 476-3440.

Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

7015 1660 0000 158T 048T

**U.S. Postal Service™
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| <input type="checkbox"/> Return Receipt (hardcopy) | \$ |
| <input type="checkbox"/> Return Receipt (electronic) | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ |
| <input type="checkbox"/> Adult Signature Required | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |
| Postage | \$ |
| Total Postage and Fees | \$ |

Sent To
Oxy USA Inc.
5 Greenway Plaza
Houston TX 77046
Street and Apt. No., or PO Box No.
Rockcliff Kizer SWD1
City, State, ZIP+4®

PECOS NM
AUG 31 2016
Postmark Here
87552-9998

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



August 31, 2016

BLM
301 Dinosaur Trail
Santa Fe NM 87508

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

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Applicant's Address: 1301 McKinney, Suite 1300, Houston TX 77010

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Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

7015 1660 0000 1583 0504

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☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To **BLM**
301 Dinosaur Trail
Santa Fe NM 87508
Rockcliff Kizer SWD1

Street and Apt. No., or P.O. Box No.

City, State, ZIP+4®

PECOS NM
AUG 31 2016
87552-9998

Postmark Here

EXHIBIT K



August 31, 2016

New Mexico State Land Office
PO Box 1148
Santa Fe NM 87504

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

Well: Kizer SWD 1 ID = 11,800'
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Please call me if you have any questions.

Sincerely,

Brian Wood

Brian Wood

7015 1660 0000 1583 0511

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☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To **New Mexico State Land Office**
PO Box 1148
Santa Fe NM 87504
Rockcliff Kizer SWD1

Street and Apt. No., or P.O. Box No.

City, State, ZIP+4®

PECOS NM
AUG 31 2016
87552-9998

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| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> | |
| <p>1. Article Addressed to:</p> <p>New Mexico State Land Office PO Box 1148 Santa Fe NM 87504</p> <p>Rockcliff Kizer SWD 1</p> | | <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> | |
| <p>2. Article Number (Transfer from service label) 7015 1660 0000 1563 0511</p> | | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: _____</p> | |
| <p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p> | | <p>Domestic Return Receipt</p> | |

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
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| <p>1. Article Addressed to:</p> <p>Joe D. Ray 131 Kingwood Street Hereford TX 79045</p> <p>Rockcliff Kizer SWD 1</p> | | <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> | |
| <p>2. Article Number (Transfer from service label) 7015 1660 0000 1563 0443</p> | | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: _____</p> | |
| <p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p> | | <p>Domestic Return Receipt</p> | |

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
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| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> | |
| <p>1. Article Addressed to:</p> <p>Marc Schuman 10627 Pictured Rocks Drive Peyton CO 80931</p> <p>Rockcliff Kizer SWD 1</p> | | <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> | |
| <p>2. Article Number (Transfer from service label) 7015 1660 0000 1563 0412</p> | | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: _____</p> | |
| <p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p> | | <p>Domestic Return Receipt</p> | |

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
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| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> | |
| <p>1. Article Addressed to:</p> <p>Successor of Continental Corp. c/o Stephens Production Company 1825 Lawrence St. Ste 300 Denver CO 80202</p> | | <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> | |
| <p>2. Article Number (Transfer from service label) 7015 1660 0000 1563 0436</p> | | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: _____</p> | |
| <p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p> | | <p>Domestic Return Receipt</p> | |

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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:

Shannon Kizer
PO Box 56
Pep NM 88126

Rockcliff Kizer SWD 1

9590 9403 0887 5223 6384 86

2. Article Number (Transfer from service label)

7015 1660 0000 1583 0528

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Shannon Kizer* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Shannon Kizer

C. Date of Delivery
9-2-16

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

3. Service Type
☒ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery
☒ Certified Mail™ ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Jennis Ruth Schuman Kauffman
10735 Villa Lea Lane
Houston TX 77071

Rockcliff Kizer SWD 1

9590 9403 0887 5223 6383 86

2. Article Number (Transfer from service label)

7015 1660 0000 1583 0382

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Jennis Kauffman* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Jennis Kauffman

C. Date of Delivery
9-6-16

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

3. Service Type
☒ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery
☒ Certified Mail™ ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Black Stone Minerals
1001 Fannin, Suite 2020
Houston TX 77002

Rockcliff Kizer SWD 1

9590 9403 0887 5223 6383 11

2. Article

7015 1660 0000 1583 0467

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Michael Marrufo* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Michael Marrufo

C. Date of Delivery
9-6-16

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

3. Service Type
☒ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery
☒ Certified Mail™ ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Chelsea Marrufo
c/o Michael Marrufo
7622 Tomaso Way
Buena Park Ca

9590 9403 0887 5223 6384 34

2. Article Number (Transfer from service label)

7015 1660 0000 1583 0467

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Michael Marrufo* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Michael Marrufo

C. Date of Delivery
9-6-16

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

3. Service Type
☒ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery
☒ Certified Mail™ ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

BLM
301 Dinosaur Trail
Santa Fe NM 87508

Rockcliff Kizer SWD 1

9590 9403 0887 5223 6384 72

2. Article Number (Transfer from service label)

7015 1660 0000 1583 0504

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Michael Marrufo* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Michael Marrufo

C. Date of Delivery
9-6-16

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

3. Service Type
☒ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery
☒ Certified Mail™ ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

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:

Kayla Marrufo
c/o Michael Marrufo
7622 Tomaso Way
Buena Park Ca

9590 9403 0887 5223 6384 03

2. Article Number (Transfer from service label)

7015 1660 0000 1583 0450

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Michael Marrufo* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Michael Marrufo

C. Date of Delivery
9-6-16

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

3. Service Type
☒ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery
☒ Certified Mail™ ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

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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:

Successor of Continental Corp
c/o Stephens Production Company
1825 Lawrence St. Ste 300
Denver CO 80202

Rockcliff Kizer SWD 1

9590 9403 0887 5223 6384 27

2. Article Number (Transfer from service label)

7015 1660 0000 1583 0436

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Michael Marrufo* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Michael Marrufo

C. Date of Delivery
9-6-16

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

3. Service Type
☒ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery
☒ Certified Mail™ ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

New Mexico State Land Office
PO Box 1148
Santa Fe NM 87504

Rockcliff Kizer SWD 1

9590 9403 0887 5223 6384 89

2. Article Number (Transfer from service label)

7015 1660 0000 1583 0511

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Michael Marrufo* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Michael Marrufo

C. Date of Delivery
9-6-16

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

3. Service Type
☒ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery
☒ Certified Mail™ ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

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

1. Article Addressed to:

Jennis Kauffman
10735 Villa Lea Lane
Houston TX 77071

Rockcliff Kizer SWD 1

9590 9403 0887 5223 6383 35

2. Article Number (Transfer from service label)

7015 1660 0000 1583 0405

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Jennis Kauffman* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Jennis Kauffman

C. Date of Delivery
9-6-16

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

3. Service Type
☒ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery
☒ Certified Mail™ ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

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:

Oxy USA Inc.
5 Greenway Plaza
Houston TX 77046

Rockcliff Kizer SWD 1

9590 9403 0887 5223 6384 58

2. Article Number (Transfer from service label)

7015 1660 0000 1583 0481

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Jennis Kauffman* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Jennis Kauffman

C. Date of Delivery
9-6-16

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

3. Service Type
☒ Adult Signature ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery
☒ Certified Mail™ ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
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| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature X <i>David Feller</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>David Feller</i> C. Date of Delivery <i>9-6-16</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> | |
| <p>1. Article Addressed to:</p> <p>PEC Minerals LP 16400 Dallas Parkway #400 Dallas TX 75248</p> <p>Rockcliff Kizer SWD 1</p> <p>9590 9403 0887 5223 6383 04</p> | | <p>2. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>Restricted Delivery</p> | |
| <p>2. Article Number (Transfer from service label) 7015 1660 0000 1583 0351</p> | | <p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p> | |

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|---|--|---|--|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature X <i>Marc Schuman</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Marc Schuman</i> C. Date of Delivery <i>9/2/16</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> | |
| <p>1. Article Addressed to:</p> <p>Marc Schuman 10627 Pictured Rocks Drive Peyton CO 80931</p> <p>Rockcliff Kizer SWD 1</p> <p>9590 9403 0887 5223 6383 25</p> | | <p>2. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>Restricted Delivery</p> | |
| <p>2. Article Number (Transfer from service label) 7015 1660 0000 1583 0412</p> | | <p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p> | |

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| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature X <i>Joe D. Ray</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Joe D. Ray</i> C. Date of Delivery <i>9/6/16</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> | |
| <p>1. Article Addressed to:</p> <p>Joe D. Ray 131 Kingwood Street Hereford TX 79045</p> <p>Rockcliff Kizer SWD 1</p> <p>9590 9403 0887 5223 6384 10</p> | | <p>2. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>Restricted Delivery</p> | |
| <p>2. Article Number (Transfer from service label) 7015 1660 0000 1583 0443</p> | | <p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p> | |

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|---|--|---|--|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature X <i>Yates Petroleum</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Yates Petroleum</i> C. Date of Delivery <i>9/6/16</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> | |
| <p>1. Article Addressed to:</p> <p>Yates Petroleum 105 S. 4th Street Artesia NM 88210</p> <p>Rockcliff Kizer SWD 1</p> <p>9590 9403 0887 5223 6384 41</p> | | <p>2. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>Restricted Delivery</p> | |
| <p>2. Article Number (Transfer from service label) 7015 1660 0000 1583 0474</p> | | <p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p> | |

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|---|--|---|--|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature X <i>Royalty Exchange Inc.</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Royalty Exchange Inc.</i> C. Date of Delivery <i>9/6/16</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> | |
| <p>1. Article Addressed to:</p> <p>Royalty Exchange Inc. PO Box 6264 San Antonio TX 78209</p> <p>Rockcliff Kizer SWD 1</p> <p>9590 9403 0887 5223 6383 42</p> | | <p>2. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>Restricted Delivery</p> | |
| <p>2. Article Number (Transfer from service label) 7015 1660 0000 1583 0375</p> | | <p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p> | |

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|---|--|---|--|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature X <i>Daniel P. and Vida K. Schuman</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Daniel P. and Vida K. Schuman</i> C. Date of Delivery <i>9/13/16</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> | |
| <p>1. Article Addressed to:</p> <p>Daniel P. and Vida K. Schuman Revocable 1118 South Florence Place Tulsa OK 74105</p> <p>9590 9403 0887 5223 6383 97</p> | | <p>2. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>Restricted Delivery</p> | |
| <p>2. Article Number (Transfer from service label) 7015 1660 0000 1583 0429</p> | | <p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p> | |

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|---|--|---|--|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature X <i>David Feller Schuman</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>David Schuman</i> C. Date of Delivery <i>9-20-16</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> | |
| <p>1. Article Addressed to:</p> <p>David Feller Schuman 7 Cider Mill Road Haydenville MA 01039</p> <p>Rockcliff Kizer SWD 1</p> <p>9590 9403 0887 5223 6383 73</p> | | <p>2. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>Restricted Delivery</p> | |
| <p>2. Article Number (Transfer from service label) 7015 1660 0000 1583 0399</p> | | <p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p> | |

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | | | | | | | | | | | | | | | |
|---|---|--|--|--|---|--|---|---|--|---|---|--|--|--|---|---------------------------------------|--|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> | | | | | | | | | | | | | | | |
| <p>1. Article Addressed to:</p> <p>Pedregosa Partners LLC 5949 Sherry Lane Dallas TX 75225</p> <p>Rockcliff Kizer SWD 1</p> <p>0590 9403 0887 8223 6384 65</p> | | <p>B. Received by (Printed Name) C. Date of Delivery</p> | | | | | | | | | | | | | | | |
| <p>2. Article Number (Transfer from service label)</p> <p>7015 1660 0000 1563 0496</p> | | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> | | | | | | | | | | | | | | | |
| <p>PS Form 3811, July 2015 PSN 7896-02-000-0053</p> | | <p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> </table> | | <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® | <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ | <input type="checkbox"/> Certified Mail | <input type="checkbox"/> Registered Mail Restricted Delivery | <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ | <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery | <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Certified Mail | <input type="checkbox"/> Registered Mail Restricted Delivery | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Insured Mail | | | | | | | | | | | | | | | | | |

752315033-1X 08/26/16

RETURN TO SENDER
UNDELIVERED ADDRESS
UNABLE TO FORWARD
RETURN TO SENDER

PERMITS WEST, INC.
PROVIDING PERMITS FOR LAND USERS
37 VERANO LOOP SANTA FE, NEW MEXICO 87508

CERTIFIED MAIL

7015 1660 0000 1563 0496

UNITED STATES POSTAGE
02 1P \$007.57
0001960661 AUG 31 2016
MAILED FROM ZIP CODE 87552

PERMITS WEST, INC.

PROVIDING PERMITS for LAND USERS

87 Valencia Loop, Santa Fe, New Mexico 87505

(505) 466-8120

August 31, 2016

Pedregosa Partners LLC
5949 Sherry Lane
Dallas TX 75225

Rockcliff Operating New Mexico LLC is applying (see attached application) to drill the Kizer SWD 1 as a saltwater disposal well. As required by NM Oil Conservation Division (NMOCD) rules, I am notifying you of the following proposal. This letter is a notice only. No action is needed unless you have questions or objections.

Well: Kizer SWD 1 TD = 11,800'

Proposed Disposal Zones: Devonian & Silurian (11,410' - 11,730')

Location: 270' FSL & 235' FEL Sec. 17, T. 8 S., R. 34 E., Roosevelt County, NM

Approximate Location: 8 miles west-southwest of Milnesand, NM

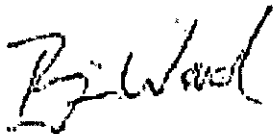
Applicant Name: Rockcliff Operating New Mexico LLC (713) 351-0500

Applicant's Address: 1301 McKinney, Suite 1300, Houston TX 77010

Submission Information: Application for a saltwater disposal well will be filed with the NMOCD. If you have an objection, or wish to request a hearing, then it must be filed with the NMOCD within 15 days of receipt of this letter. The New Mexico Oil Conservation Division address is 1220 South St. Francis Dr. Santa Fe, NM 87505. Their phone number is (505) 476-3440.

Please call me if you have any questions.

Sincerely,

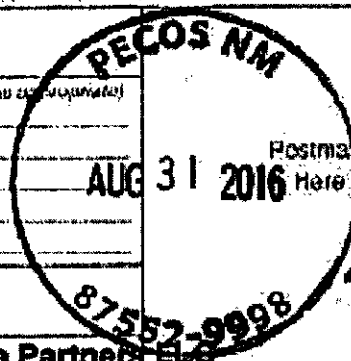


Brian Wood

EXHIBIT K

015 166 0000 1583 0998 510

| U.S. Postal Service™ | |
|---|----|
| CERTIFIED MAIL® RECEIPT | |
| Domestic Mail Only | |
| For delivery information, visit our website at www.usps.com | |
| Certified Mail Fee | |
| Extra Services & Fees (check box, and fee as appropriate) | |
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ |
| <input type="checkbox"/> Return Receipt (electronic) | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ |
| <input type="checkbox"/> Adult Signature Required | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |
| Postage | |
| Total Postage and Fees | |
| Pedregosa Partners LLC | |
| 5949 Sherry Lane | |
| Dallas TX 75225 | |
| Rockcliff-Kizer SWD1 | |





5949 Sherry Lane, Suite 835
Dallas, Texas 75225

October 6, 2016

Via email

Mr. Brian Wood
Permits West, Inc.
37 Verano Loop
Santa Fe, New Mexico 87508

RE: Kizer SWD #1
Chaves County, New Mexico
Fantail Prospect

Dear Brian:

Pedregosa Partners, LLC, partners in the Kizer SWD #1 well, hereby agrees to waive notice for the Kizer SWD #1 well. Please proceed with operations.

Thank you.

Very truly yours,

PEDREGOSA PARTNERS, LLC

A handwritten signature in dark ink, appearing to read 'David L. Cherry, Jr.', is written over the printed name.

David L. Cherry, Jr.
Manager

c: Mr. Paul Aguirre, Rockcliff Energy
Mr. Nick Koch, Rockcliff Energy
Mr. Bill Bahlburg



C-108 Review Checklist: Received 9/1/2016 Add. Request: 9/1/2016 Reply Date: 10/5/2016 Suspended: 11/1/2016 [Ver 15]

ORDER TYPE: WFX / PMX (SWD) Number: _____ Order Date: _____ Legacy Permits/Orders: _____

Well No. 1 Well Name(s): KI 2 C R L

API: 30-0 41-20961 Spud Date: TBD New or Old: N (UIC Class II Primacy 03/07/1982)

Footages 270 FSL 235 FSL Lot _____ or Unit P Sec 17 Tsp 8S Rge 34E County ROOSEVELT

General Location: 220 miles SE of Kenna Pool: SWD, Devonian-Silurian Pool No.: 97869

BLM 100K Map: _____ Operator: NEW MEXICO, LLC OGRID: 37115 Contact: Brian Woods, Agent

COMPLIANCE RULE 5.9: Total Wells: 51 Inactive: 1 Fincl Assur: OK Compl. Order? NA IS 5.9 OK? Y Date: 10-5-2016

WELL FILE REVIEWED ☒ Current Status: Proposed

WELL DIAGRAMS: NEW: Proposed ☒ or RE-ENTER: Before Conv. ☐ After Conv. ☐ Logs in Imaging: N/A

Planned Rehab Work to Well: _____

| Well Construction Details | | Sizes (in) Borehole / Pipe | Setting Depths (ft) | Cement Sx or Cf | Cement Top and Determination Method |
|---|------------------------|-------------------------------|---------------------------|--------------------|-------------------------------------|
| Planned ___ or Existing ___ Surface | <u>17 1/2 / 13 1/8</u> | <u>500'</u> | Stage Tool | <u>305</u> | <u>Surface / Visual</u> |
| Planned ___ or Existing ___ Interm/Prod | <u>12 1/4 / 1 5/8</u> | <u>525'</u> | | <u>1670</u> | <u>Surface / Visual</u> |
| Planned ___ or Existing ___ Interm/Prod | <u>8 3/4 / 7</u> | <u>1140</u> | <u>8325</u> | <u>1660</u> | <u>Surface / Visual</u> |
| Planned ___ or Existing ___ Prod/Liner | | | | | |
| Planned ___ or Existing ___ Liner | | | | | |
| Planned ___ or Existing ___ OH/PERF | <u>1410-1153</u> | | Inj Length <u>324'</u> | | |

| Injection Lithostratigraphic Units | Depths (ft) | Injection or Confining Units | Tops |
|------------------------------------|-------------|------------------------------|--------------|
| Adjacent Unit: Litho. Struc. Por. | <u>1153</u> | <u>MS</u> | <u>10734</u> |
| Confining Unit: Litho. Struc. Por. | | <u>LS</u> | <u>11234</u> |
| Proposed Inj Interval TOP: | | <u>DU</u> | <u>11400</u> |
| Proposed Inj Interval BOTTOM: | | | |
| Confining Unit: Litho. Struc. Por. | | | |
| Adjacent Unit: Litho. Struc. Por. | | | |

| Completion/Operation Details: | |
|-------------------------------|---|
| Drilled TD | <u>11800</u> PBTD <u>11730</u> |
| NEW TD | NEW PBTD |
| NEW Open Hole | <input checked="" type="checkbox"/> or NEW Perfs <input type="checkbox"/> |
| Tubing Size | <u>3 1/2</u> in. Inter Coated? <u>Y</u> |
| Proposed Packer Depth | <u>11350</u> ft |
| Min. Packer Depth | <u>11310</u> (100-ft limit) |
| Proposed Max. Surface Press. | <u>2282</u> psi |
| Admin. Inj. Press. | <u>2282</u> (0.2 psi per ft) |

AOR: Hydrologic and Geologic Information

POTASH: R-111-P Noticed? ☐ BLM Sec Ord ☐ WIPP ☐ Noticed? ☐ Salt/Salado T: _____ B: _____ NW: Cliff House fm _____

FRESH WATER: Aquifer 2200 Grotto Max Depth 2200 HYDRO AFFIRM STATEMENT By Qualified Person ☒

NMOSE Basin: CLAVIS CAPITAN REEF: thru adj NA No. Wells within 1-Mile Radius? 1 FW Analysis Y

Disposal Fluid: Formation Source(s) _____ Analysis? Y On Lease ☐ Operator Only ☐ or Commercial ☐

Disposal Int: Inject Rate (Avg/Max BWPD): 154/244 Protectable Waters? NA Source: _____ System: Closed or Open both

HC Potential: Producing Interval? NA Formerly Producing? _____ Method: Logs/DST/P&A/Other 2200 2-Mile Radius Pool Map ☐

AOR Wells: 1/2-M Radius Map? Y Well List? Y Total No. Wells Penetrating Interval: 0 Horizontals? 0

Penetrating Wells: No. Active Wells 0 Num Repairs? _____ on which well(s)? _____ Diagrams? _____

Penetrating Wells: No. P&A Wells 0 Num Repairs? _____ on which well(s)? _____ Diagrams? _____

NOTICE: Newspaper Date 9/4/2014 Mineral Owner State of NM Surface Owner KI 2 C R L N. Date _____

RULE 26.7(A): Identified Tracts? _____ Affected Persons: Yates, Redd, Juss, BLM, Blakely N. Date _____

Order Conditions: Issues: RUN C B-L OF 7" SURFACE

Add Order Cond: _____

NO wells within 1 mile
ONLY INFO

McMillan, Michael, EMNRD

From: McMillan, Michael, EMNRD
Sent: Wednesday, October 5, 2016 10:24 AM
To: 'Brian Wood'
Cc: Jones, William V, EMNRD
Subject: RE: Rockcliff Operating New Mexico the Kizer SWD Well No. 1 return receipt

The OCD will suspend the application for 10 days.

If at that time, there is no response your application will be cancelled, and you will have to resubmit the application.

Thank You

MICHAEL A. MCMILLAN

Engineering Bureau, Oil Conservation Division
1220 south St. Francis Dr., Santa Fe NM 87505
O; 505.476.3448
Michael.McMillan@state.nm.us

From: McMillan, Michael, EMNRD
Sent: Wednesday, October 5, 2016 10:16 AM
To: 'Brian Wood' <brian@permitswest.com>
Cc: Jones, William V, EMNRD <WilliamV.Jones@state.nm.us>
Subject: RE: Rockcliff Operating New Mexico the Kizer SWD Well No. 1 return receipt

Brian:

The OCD will require that due diligence was attempted for the Peregrine Partners LLC interest.
Did you try an internet search, public records search, or other methods to find the interest?

Thank You

MICHAEL A. MCMILLAN

Engineering Bureau, Oil Conservation Division
1220 south St. Francis Dr., Santa Fe NM 87505
O; 505.476.3448
Michael.McMillan@state.nm.us

From: Brian Wood [<mailto:brian@permitswest.com>]
Sent: Wednesday, October 5, 2016 9:31 AM
To: McMillan, Michael, EMNRD <Michael.McMillan@state.nm.us>
Subject: Re: Rockcliff Operating New Mexico the Kizer SWD Well No. 1 return receipt

Notice was sent and returned.