

**BEFORE THE OIL CONSERVATION DIVISION
EXAMINER HEARING FEBRUARY 22, 2018**

CASE NO. 15927, 15928, AND 15929

MARBOB 19 STATE WELL NO. 121H

MARBOB 19 STATE WELL NO. 122H

~AND~

MARBOB 19 STATE WELL NO. 124H

EDDY COUNTY, NEW MEXICO



BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 1
Submitted by:
MATADOR PRODUCTION COMPANY
Hearing Date: February 22, 2018



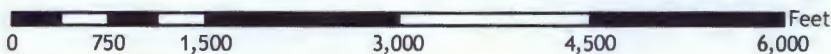
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1 inch = 1,500 feet

Southeast New Mexico

Date: January 3, 2018

Coordinate System: NAD 1927 StatePlane New Mexico East FIPS 3001
Projection: Transverse Mercator; Datum: North American 1927; Units: Foot US
Sources: IHS; ESRI;



District I
1625 N. French Dr., Hobbs, NM 88240
Phone (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone (505) 476-1460 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 30-015-44673		² Pool Code 55510		³ Pool Name SCANLON DRAW; BONE SPRING	
⁴ Property Code		⁵ Property Name MARBOB 19 STATE COM			⁶ Well Number #121H
⁷ GRID No.		⁸ Operator Name MATADOR PRODUCTION COMPANY			⁹ Elevation 3382'

¹⁰Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
1	19	19-S	29-E	-	199'	NORTH	220'	WEST	EDDY

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	19	19-S	29-E	-	330'	NORTH	240'	EAST	EDDY

¹¹ Dedicated Acres 152.67	¹² Joint or Infill	¹³ Consolidation Code	¹⁴ Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

				¹⁷OPERATOR 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 if this location is in a contract with an owner of such a mineral or working interest or in a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. <i>Nicholas Weeks</i> 1/8/2018 Signature Date Nicholas Weeks Printed Name nweeks@matadorresources.com E-mail Address
SURFACE LOCATION NEW MEXICO EAST NAD 1927 X=565435 Y=601374 LAT.: N 32.6530987 LONG.: W 104.1207301 NAD 1983 X=608614 Y=601436 LAT.: N 32.6532161 LONG.: W 104.1212377	FIRST PERFORATION POINT NEW MEXICO EAST NAD 1927 X=565645 Y=601242 LAT.: N 32.6527365 LONG.: W 104.1203730 NAD 1983 X=606724 Y=601305 LAT.: N 32.6528539 LONG.: W 104.1208805	LAST PERFORATION POINT NEW MEXICO EAST NAD 1927 X=569918 Y=601210 LAT.: N 32.6526224 LONG.: W 104.1061835 NAD 1983 X=611098 Y=601272 LAT.: N 32.6527399 LONG.: W 104.1066797	BOTTOM HOLE LOCATION NEW MEXICO EAST NAD 1927 X=570008 Y=601209 LAT.: N 32.6526200 LONG.: W 104.1058711 NAD 1983 X=611168 Y=601272 LAT.: N 32.6527376 LONG.: W 104.1063783	¹⁸SURVEYOR 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 to the best of my belief. 10/08/2017 Date of Survey Signature of Surveyor 19642 PROFESSIONAL SURVEYOR <i>Stan H. Lloyd</i> Certificate Number

X:\SURVEY\MATADOR RESOURCES\MARBOB 19 STATE COM\121H\FINAL PRODUCT\19 STATE COM\121H REV2.DWG 12/13/2017 5:42:12 AM Jlgreer

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 2
Submitted by:
MATADOR PRODUCTION COMPANY
Hearing Date: February 22, 2018

District I
1625 N. French Dr., Hobbs, NM 88240
Phone (575) 393-6101 Fax (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone (575) 748-1283 Fax (575) 748-0720
District III
1000 Rio Bravo 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

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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-44674	² Pool Code 55510	³ Pool Name SCANLON DRAW; BONE SPRING
⁴ Property Code	⁵ Property Name MARBOB 19 STATE COM	⁶ Well Number #122H
⁷ GRID No.	⁸ Operator Name MATADOR PRODUCTION COMPANY	⁹ Elevation 3377'

¹⁰Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
2	19	19-S	29-E	-	2125'	NORTH	220'	WEST	EDDY

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
H	19	19-S	29-E	-	1980'	NORTH	240'	EAST	EDDY

¹¹ Dedicated Acres 152.61	¹² Joint or Infill	¹³ Consolidation Code	¹⁴ Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

				¹⁷OPERATOR 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 underlying the proposed well location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the Division. Signature: <i>Nicholas Weeks</i> Date: <i>1/8/2013</i> Printed Name: Nicholas Weeks E-mail Address: <i>nweeks@matadorresources.com</i>
¹⁸SURVEYOR 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 to the best of my belief.				
SURFACE LOCATION NEW MEXICO EAST NAD 1927 X=585437 Y=599448 LAT.: N 32.6478050 LONG.: W 104.1207331 NAD 1983 X=606617 Y=599510 LAT.: N 32.6479224 LONG.: W 104.1212404	FIRST PERFORATION POINT NEW MEXICO EAST NAD 1927 X=585547 Y=599592 LAT.: N 32.6482009 LONG.: W 104.1203755 NAD 1983 X=606727 Y=599655 LAT.: N 32.6483183 LONG.: W 104.1208829	LAST PERFORATION POINT NEW MEXICO EAST NAD 1927 X=599922 Y=599560 LAT.: N 32.6480868 LONG.: W 104.1061632 NAD 1983 X=611102 Y=599622 LAT.: N 32.6482044 LONG.: W 104.1066702	BOTTOM HOLE LOCATION NEW MEXICO EAST NAD 1927 X=570012 Y=599559 LAT.: N 32.6480844 LONG.: W 104.1058708 NAD 1983 X=611192 Y=599621 LAT.: N 32.6482020 LONG.: W 104.1063778	
Date of Survey: <i>1/8/2013</i> Signature: <i>Stan H. Lloyd</i> Certificate Number: <i>19842</i>				

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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number	² Pool Code 55510	³ Pool Name SCANLON DRAW; BONE SPRING
⁴ Property Code	⁵ Property Name MARBOB 19 STATE COM	⁶ Well Number #124H
⁷ OGRID No.	⁸ Operator Name MATADOR PRODUCTION COMPANY	⁹ Elevation 3344'

¹⁰Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
4	19	19-S	29-E	-	135'	SOUTH	310'	WEST	EDDY

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	19	19-S	29-E	-	331'	SOUTH	240'	EAST	EDDY

¹¹ Dedicated Acres 152.49	¹² Joint or Infill	¹³ Consolidation Code	¹⁴ Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

SURFACE LOCATION NEW MEXICO EAST NAD 1927 X=565533 Y=596421 LAT.: N 32.6394844 LONG.: W 104.1204428 NAD 1983 X=606713 Y=596483 LAT.: N 32.6396019 LONG.: W 104.1209500	FIRST PERFORATION POINT NEW MEXICO EAST NAD 1927 X=565552 Y=596617 LAT.: N 32.6400214 LONG.: W 104.1203778 NAD 1983 X=606732 Y=596679 LAT.: N 32.6401388 LONG.: W 104.1208850	LAST PERFORATION POINT NEW MEXICO EAST NAD 1927 X=569928 Y=596592 LAT.: N 32.6399282 LONG.: W 104.1061639 NAD 1983 X=611108 Y=596654 LAT.: N 32.6400458 LONG.: W 104.1066707	BOTTOM HOLE LOCATION NEW MEXICO EAST NAD 1927 X=570018 Y=596591 LAT.: N 32.6399262 LONG.: W 104.1058715 NAD 1983 X=611198 Y=596653 LAT.: N 32.6400439 LONG.: W 104.1063783
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17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land enclosing 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. <i>Nicholas Weeks</i> 1/8/2018 Signature Date Nicholas Weeks Printed Name nweeks@matadorresources.com E-mail Address	
18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true to the best of my belief. 10/09/2017 Date of Survey <i>Stan W. Lloyd</i> Signature of Professional Surveyor NEW MEXICO 19642 PROFESSIONAL SURVEYOR Stan W. Lloyd Certificate Number	

Summary of Interests*

MRC Permian Company:		46.250051%
Voluntary Joinder:		11.116617%
Compulsory Pool:		42.633332%
Interest Owner:	Description	Interest
Alfred Rodriguez	Uncommitted Working Interest Owner	0.119316%
American Shale Energy, LLC	Uncommitted Working Interest Owner	0.327504%
Betty Read Young	Uncommitted Working Interest Owner	1.826618%
Carolyn R. Beall	Uncommitted Working Interest Owner	0.218336%
CSA Petroleum Corporation	Uncommitted Working Interest Owner	0.099414%
Donald E. Richter et ux, Glenda L. Richter	Uncommitted Working Interest Owner	0.099414%
Estate of Ralph E. Peacock, deceased	Uncommitted Working Interest Owner	0.099438%
George Philips Huey, Jr. (Life Estate) Texas A&M Foundation (Remainderman)	Uncommitted Working Interest Owner	0.198829%
H.W. Allen Company, LLC	Uncommitted Working Interest Owner	1.093470%
Jack C. Holland	Uncommitted Working Interest Owner	0.198876%
Joel M. Wigley	Uncommitted Working Interest Owner	0.264653%
Judy Scisson Ferreri	Uncommitted Working Interest Owner	0.024854%
Laura K. Read, LLC	Uncommitted Working Interest Owner	0.262003%
Lincoln Oil & Gas, LLC	Uncommitted Working Interest Owner	0.327504%
Nancy Peacock Mackey	Uncommitted Working Interest Owner	0.049707%
OXY USA Inc.	Uncommitted Working Interest Owner	35.699548%
Reserve Management Inc.	Uncommitted Working Interest Owner	0.198876%
Sharron S. Trollinger	Uncommitted Working Interest Owner	0.099414%
Sharron S. Trollinger, Trustee of the Sharron Stone Trollinger Trust	Uncommitted Working Interest Owner	0.099414%
Turner Royalties, LLC	Uncommitted Working Interest Owner	0.666483%
V.C. Desmond Trust	Uncommitted Working Interest Owner	0.198829%
Virginia A. Desmond	Uncommitted Working Interest Owner	0.198829%
William V. Palmer, LLC	Uncommitted Working Interest Owner	0.262003%



Marbob 19 State Com 121H

*The Summary of Interests was calculated based on a 152.67 acre unit and is subject to the final surveyed perimeter.

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico

Exhibit No. 3

Submitted by:

MATADOR PRODUCTION COMPANY

Hearing Date: February 22, 2018

Marbob 19 State Com 121H – ORRI Owners

COG Operating, LLC
600 W. Illinois Avenue
Midland, TX 79701

Concho Oil & Gas LLC
600 W. Illinois Avenue
Midland, TX 79701

Read & Stevens, LLC
P. O. Box 1518
Roswell, NM 88202

Read & Stevens, Inc.
P. O. Box 1518
Roswell, NM 88202

CBR Oil Properties, LLC
P. O. Box 1518
Roswell, NM 88202

Summary of Interests*

MRC Permian Company:			49.689347%
Voluntary Joinder:			11.116617%
Compulsory Pool:			39.194036%
Interest Owner:	Description	Interest	
American Shale Energy, LLC	Uncommitted Working Interest Owner	0.131053%	
Betty Read Young	Uncommitted Working Interest Owner	0.262106%	
Carolyn R. Beall	Uncommitted Working Interest Owner	0.262106%	
George Philips Huey, Jr. (Life Estate) Texas A&M Foundation (Remainderman)	Uncommitted Working Interest Owner	0.198907%	
Jack C. Holland	Uncommitted Working Interest Owner	0.198954%	
Joel M. Wigley	Uncommitted Working Interest Owner	0.264538%	
Judy Scisson Ferreri	Uncommitted Working Interest Owner	0.024863%	
Laura K. Read, LLC	Uncommitted Working Interest Owner	0.524212%	
Lincoln Oil & Gas, LLC	Uncommitted Working Interest Owner	0.131053%	
Nancy Peacock Mackey	Uncommitted Working Interest Owner	0.049727%	
OXY USA Inc.	Uncommitted Working Interest Owner	35.684097%	
Reserve Management Inc.	Uncommitted Working Interest Owner	0.198954%	
Sharron S. Trollinger	Uncommitted Working Interest Owner	0.198907%	
Turner Royalties, LLC	Uncommitted Working Interest Owner	0.666745%	
V.C. Desmond Trust	Uncommitted Working Interest Owner	0.198907%	
Virginia A. Desmond	Uncommitted Working Interest Owner	0.198907%	



Marbob 19 State Com 122H

*The Summary of Interests was calculated based on a 152.61 acre unit and is subject to the final surveyed perimeter.

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico

Exhibit No. 4

Submitted by:

MATADOR PRODUCTION COMPANY

Hearing Date: February 22, 2018

Marbob 19 State Com 122H – ORRI Owners

COG Operating, LLC
600 W. Illinois Avenue
Midland, TX 79701

Concho Oil & Gas LLC
600 W. Illinois Avenue
Midland, TX 79701

Read & Stevens, LLC
P. O. Box 1518
Roswell, NM 88202

Read & Stevens, Inc.
P. O. Box 1518
Roswell, NM 88202

CBR Oil Properties, LLC
P. O. Box 1518
Roswell, NM 88202

Summary of Interests*

MRC Permian Company:			51.469816%
Voluntary Joinder:			11.116617%
Compulsory Pool:			37.413567%
Interest Owner:	Description	Interest	
American Shale Energy, LLC	Uncommitted Working Interest Owner	0.131156%	
Betty Read Young	Uncommitted Working Interest Owner	0.262312%	
Blaine F. Roach (possible claimant to the Estate of Gerald F. Roach, Deceased)	Uncommitted Working Interest Owner	0.221941%	
Nina Anderson (possible claimant to the Estate of C. Lee Anderson, Deceased)	Uncommitted Working Interest Owner	0.665822%	
Carolyn R. Beall	Uncommitted Working Interest Owner	0.262312%	
Catherine B. Baker (possible claimant to the Estate of Gerald F. Roach, Deceased)	Uncommitted Working Interest Owner	0.221941%	
COG Operating LLC	Uncommitted Working Interest Owner	24.919667%	
Concho Oil & Gas LLC	Uncommitted Working Interest Owner	1.311561%	
George Phillips Huey, Jr. (Life Estate) Texas A&M Foundation (Remainderman)	Uncommitted Working Interest Owner	0.199063%	
Jack C. Holland	Uncommitted Working Interest Owner	0.199111%	
James W. Kennedy (possible claimant to the Estate of Faith Kennedy, Deceased)	Uncommitted Working Interest Owner	0.097099%	
Judy Scisson Ferreri	Uncommitted Working Interest Owner	0.024883%	
Laura K. Read, LLC	Uncommitted Working Interest Owner	0.524625%	
Lincoln Oil & Gas, LLC	Uncommitted Working Interest Owner	0.131156%	
Lola Roach Kelly (possible claimant to the Estate of Gerald F. Roach, Deceased)	Uncommitted Working Interest Owner	0.221941%	
Michael W. Kennedy (possible claimant to the Estate of Faith Kennedy, Deceased)	Uncommitted Working Interest Owner	0.097099%	
Nancy Peacock Mackey	Uncommitted Working Interest Owner	0.049766%	
Reserve Management Inc.	Uncommitted Working Interest Owner	0.199111%	
Richard D. Kennedy (possible claimant to the Estate of Faith Kennedy, Deceased)	Uncommitted Working Interest Owner	0.097099%	
Robert E. Ferguson et ux, Rosemary Ferguson	Uncommitted Working Interest Owner	5.326579%	
Sharron S. Trollinger, Trustee of the Sharron Stone Trollinger Trust	Uncommitted Working Interest Owner	0.199064%	
Sue Howard	Uncommitted Working Interest Owner	0.055484%	
Teresa Burnside	Uncommitted Working Interest Owner	0.055484%	
Turner Royalties, LLC	Uncommitted Working Interest Owner	0.667270%	
V.C. Desmond Trust	Uncommitted Working Interest Owner	0.199064%	
Velda Gass	Uncommitted Working Interest Owner	0.388397%	
Virginia A. Desmond	Uncommitted Working Interest Owner	0.199064%	
Wanda Porter	Uncommitted Working Interest Owner	0.388397%	
William Kent Kennedy (possible claimant to the Estate of Faith Kennedy, Deceased)	Uncommitted Working Interest Owner	0.097099%	



Marbob 19 State Com 124H

* The Summary of Interests was calculated based on a 152.49 acre unit and is subject to the final surveyed perimeter.

Marbob 19 State Com 124H – ORRI Owners

COG Operating, LLC
600 W. Illinois Avenue
Midland, TX 79701

Concho Oil & Gas LLC
600 W. Illinois Avenue
Midland, TX 79701

Read & Stevens, LLC
P. O. Box 1518
Roswell, NM 88202

Read & Stevens, Inc.
P. O. Box 1518
Roswell, NM 88202

CBR Oil Properties, LLC
P. O. Box 1518
Roswell, NM 88202

First Century Oil, Inc.
P. O. Box 1518
Roswell, NM 88202

Heirs or Devisees of T. K. Campbell
Curative working

Heirs or Devisees of Margaret T. Campbell
Curative working

Heirs or Devisees of Louie Edward Gwaltney
Curative working

Heirs or Devisees of Lillian Ward Gwaltney
Curative working

MRC Permian Company

One Lincoln Centre • 5400 LBJ Freeway • Suite 1500 • Dallas, Texas 75240
Voice 972.371.5481 • Fax 214.866.4981
nweeks@matadorresources.com

Nicholas Weeks
Landman

November 3, 2017

VIA CERTIFIED RETURN RECEIPT MAIL

Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130

Re: Marbob 19 State Com #121H Participation Proposal
NE/4 NE/4 (SHL) Section 24, T19S, R28E
NE/4 NE/4 (BHL) Section 19, T19S, R29E
Eddy County, New Mexico

Bernhardt Oil Corporation,

MRC Permian Company and its operating company Matador Production Company (collectively "MRC") propose the drilling of the Marbob 19 State Com #121H well (the "Well"), located in the N/2N/2 of Section 19, Township 19 South, Range 29 East, Eddy County, New Mexico, to test the Bone Spring formation. The estimated cost of drilling, testing, completing, and equipping the Well is \$6,757,127 as itemized on the enclosed Authority for Expenditure ("AFE") dated October 20, 2017.

The Well will be drilled to a total vertical depth of 7,880' and a total measured depth of 12,672', producing a treatable lateral of approximately 4,400' within the Bone Spring formation.

MRC reserves the right to modify the locations and drilling plans described above in order to address topography, cultural or environmental concerns, among other reasons. MRC will advise you of any such modifications.

MRC is proposing to drill the Well under the terms of the modified 1989 AAPL form of Operating Agreement ("OA") dated October 20, 2017. The Operating Agreement covers all of Section 19, Township 19 South, Range 29 East, Eddy County, New Mexico limited to those depths within the Bone Spring formation ("Contract Area") pursuant to the following terms:

- 100/300/300% Non-consent penalty
- \$7,000/\$700 Drilling and Producing overhead rate

MRC requests that you indicate your election to participate in the drilling and completion of the Well in the space provided below, sign and return one (1) copy of this letter along with your geological well requirements, and the AFE.

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico

Exhibit No. 6

Submitted by:

MATADOR PRODUCTION COMPANY

Hearing Date: February 22, 2018

Bernhardt Oil Corporation will own approximately 2.461004% working interest in the Well, subject to title verification.

If your election is to participate in the drilling and completion of the Well, please sign and return a copy of the enclosed AFE within thirty (30) days of receipt of this notice. Please be aware that the enclosed AFE is only an estimate of costs to be incurred and by electing to participate in the Well, each working interest owner shall be responsible for its proportionate share of all costs incurred.

Please contact me if you have any questions.

Sincerely,

MRC Permian Company



Nicholas Weeks

Enclosure(s)

Please elect one of the following and return to sender.

_____Bernhardt Oil Corporation hereby elects to participate for its proportionate share of the costs detailed in the enclosed AFE associated with the Marbob 19 State Com #121H.

_____Bernhardt Oil Corporation hereby elects not to participate for its proportionate share of the costs detailed in the enclosed AFE associated with the Marbob 19 State Com #121H.

I / We are interested in selling our interest in the Contract Area, please contact us to discuss.

Bernhardt Oil Corporation

By: _____

Title: _____

Date: _____

MATADOR PRODUCTION COMPANY

ONE LINCOLN CENTRE • 5400 LBJ FREEWAY • SUITE 1500 • DALLAS, TEXAS 75240
Phone (972) 371-5200 • Fax (972) 371-5201

ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

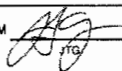
DATE:	October 20, 2017	AFE NO.:	
WELL NAME:	Marbob State Com #121H	FIELD:	Bone Spring
LOCATION:	N/2N/2 Sec 19, T19S-R29E	MD/TVD:	12672/7880'
COUNTY/STATE:	Eddy	LATERAL LENGTH:	4,400
MRC WI:			
GEOLOGIC TARGET:	2nd Bone Spring		
REMARKS:	Drill and complete a 2nd Bone Spring horizontal well		

INTANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	FACILITY COSTS	TOTAL COSTS
Land / Legal / Regulatory	\$ 100,000				\$ 100,000
Location, Surveys & Damages	155,500	13,000	5,000	20,000	193,500
Drilling	597,875				597,875
Cementing & Float Equip	191,000				191,000
Logging / Formation Evaluation		6,000			6,000
Mud Logging	19,000				19,000
Mud Circulation System	27,350				27,350
Mud & Chemicals	25,000	20,000			45,000
Mud / Wastewater Disposal	155,000				155,000
Freight / Transportation	20,000	12,000		7,000	39,000
Rig Supervision / Engineering	81,900	57,800	7,750	12,000	159,450
Drill Bits	72,500				72,500
Fuel & Power	73,125				73,125
Water	32,500	370,000			402,500
Drig & Completion Overhead	7,500	7,000			14,500
Plugging & Abandonment					
Directional Drilling, Surveys	175,000				175,000
Completion Unit, Swab, CTU		40,000	8,400		48,400
Perforating, Wireline, Slickline		116,500			116,500
High Pressure Pump Truck		84,000	3,200		87,200
Stimulation		1,980,000			1,980,000
Stimulation Flowback & Disp		180,500	105,000		285,500
Insurance	22,810				22,810
Labor	103,500	9,000	6,000		118,500
Rental - Surface Equipment	105,675	104,430	1,000	2,400	213,505
Rental - Downhole Equipment	33,500	28,000			61,500
Rental - Living Quarters	37,363	25,570		800	63,733
Contingency	101,795	244,304	2,815	4,220	353,134
TOTAL INTANGIBLES >	2,137,692	3,298,104	139,165	46,420	5,621,381
TANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	FACILITY COSTS	TOTAL COSTS
Surface Casing	\$ 24,300				\$ 24,300
Intermediate Casing	109,160				109,160
Drilling Liner					
Production Casing	242,924				242,924
Production Liner					
Tubing			55,512		55,512
Wellhead	38,000		17,500		55,500
Packers, Liner Hangers	8,000	30,600			38,600
Tanks				60,000	60,000
Production Vessels			51,000	22,500	73,500
Flow Lines			48,000		48,000
Rod string					
Artificial Lift Equipment			126,000		126,000
Compressor				10,000	10,000
Installation Costs			25,000	36,000	61,000
Surface Pumps			5,000		5,000
Non-controllable Surface					
Non-controllable Downhole					
Downhole Pumps					
Measurement & Meter Installation			15,250	47,000	62,250
Gas Conditioning / Dehydration					
Interconnecting Facility Piping				60,000	60,000
Gathering / Bulk Lines					
Valves, Dumps, Controllers				4,000	4,000
Tank / Facility Containment				15,000	15,000
Flare Stack				10,000	10,000
Electrical / Grounding			30,000	10,000	40,000
Communications / SCADA				12,500	12,500
Instrumentation / Safety			2,500	20,000	22,500
TOTAL TANGIBLES >	422,384	30,600	375,762	307,000	1,135,746
TOTAL COSTS >	2,560,076	3,328,704	514,927	353,420	6,757,127

PREPARED BY MATADOR PRODUCTION COMPANY:

Drilling Engineer: Patrick Walsh
Completions Engineer: Matt Ball
Production Engineer: Rakesh Patel

Team Lead - WTX/MM



MATADOR RESOURCES COMPANY APPROVAL:

Executive VP, COO/CFO: DEL
Executive VP, Legal: CA
President: MVH

VP - Res Engineering: BMR
Exec Dir - Exploration: NLF

VP - Drilling: BG
VP - Production: TWG

NON OPERATING PARTNER APPROVAL:

Company Name: _____ Working Interest (%): _____ Tax ID: _____
Signed by: _____ Date: _____
Title: _____ Approval: Yes _____ No (mark one) _____

The costs on this AFE are estimates only and may not be conclusive as to the actual cost of the project. Tubing installation approved under the AFE may be delayed up to a year after the well has been completed. In executing this AFE, the Participant agrees to pay its proportionate share of actual costs incurred, including legal, consulting, regulatory, insurance and other costs under the terms of the applicable joint operating agreement, regulatory order or other agreement covering the well. Participants shall be covered by and titled proportionately for Operator's well control and general liability insurance unless participant provides Operator with evidence of its own insurance or an amount acceptable to the Operator by the date of start.

MRC Permian Company

One Lincoln Centre • 5400 LBJ Freeway • Suite 1500 • Dallas, Texas 75240
Voice 972.371.5481 • Fax 214.866.4981
nweeks@matadorresources.com

Nicholas Weeks
Landman

November 3, 2017

VIA CERTIFIED RETURN RECEIPT MAIL

Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130

Re: Marbob 19 State Com #122H Participation Proposal
SE/4 NE/4 (SHL) Section 24, T19S, R28E
SE/4 NE/4 (BHL) Section 19, T19S, R29E
Eddy County, New Mexico

Bernhardt Oil Corporation,

MRC Permian Company and its operating company Matador Production Company (collectively "MRC") propose the drilling of the Marbob 19 State Com #122H well (the "Well"), located in the S/2N/2 of Section 19, Township 19 South, Range 29 East, Eddy County, New Mexico, to test the Bone Spring formation. The estimated cost of drilling, testing, completing, and equipping the Well is \$6,753,912 as itemized on the enclosed Authority for Expenditure ("AFE") dated October 20, 2017.

The Well will be drilled to a total vertical depth of 7,880' and a total measured depth of 12,672', producing a treatable lateral of approximately 4,400' within the Bone Spring formation.

MRC reserves the right to modify the locations and drilling plans described above in order to address topography, cultural or environmental concerns, among other reasons. MRC will advise you of any such modifications.

MRC is proposing to drill the Well under the terms of the modified 1989 AAPL form of Operating Agreement ("OA") dated October 20, 2017. The Operating Agreement covers all of Section 19, Township 19 South, Range 29 East, Eddy County, New Mexico limited to those depths within the Bone Spring formation ("Contract Area") pursuant to the following terms:

- 100/300/300% Non-consent penalty
- \$7,000/\$700 Drilling and Producing overhead rate

MRC requests that you indicate your election to participate in the drilling and completion of the Well in the space provided below, sign and return one (1) copy of this letter along with your geological well requirements, and the AFE.

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico

Exhibit No. 7

Submitted by:

MATADOR PRODUCTION COMPANY

Hearing Date: February 22, 2018

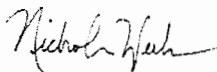
Bernhardt Oil Corporation will own approximately 2.461004% working interest in the Well, subject to title verification.

If your election is to participate in the drilling and completion of the Well, please sign and return a copy of the enclosed AFE within thirty (30) days of receipt of this notice. Please be aware that the enclosed AFE is only an estimate of costs to be incurred and by electing to participate in the Well, each working interest owner shall be responsible for its proportionate share of all costs incurred.

Please contact me if you have any questions.

Sincerely,

MRC Permian Company



Nicholas Weeks

Enclosure(s)

Please elect one of the following and return to sender.

_____Bernhardt Oil Corporation hereby elects to participate for its proportionate share of the costs detailed in the enclosed AFE associated with the Marbob 19 State Com #122H.

_____Bernhardt Oil Corporation hereby elects not to participate for its proportionate share of the costs detailed in the enclosed AFE associated with the Marbob 19 State Com #122H.

I / We are interested in selling our interest in the Contract Area, please contact us to discuss.

Bernhardt Oil Corporation

By: _____

Title: _____

Date: _____

MATADOR PRODUCTION COMPANY

ONE LINCOLN CENTRE • 5400 LBJ FREEWAY • SUITE 1500 • DALLAS, TEXAS 75240

Phone (972) 371-5200 • Fax (972) 371-5201

ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

DATE:	October 20, 2017	AFE NO.:	
WELL NAME:	Marbob State Com #122H	FIELD:	Bone Spring
LOCATION:	S/2N/2 Sec. 19, T19S-R29E	MD/TVD:	12672/7880'
COUNTY/STATE:	Eddy	LATERAL LENGTH:	4,400
MRC WI:			
GEOLOGIC TARGET:	2nd Bone Spring		
REMARKS:	Drill and complete a 2nd Bone Spring horizontal well		

	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	FACILITY COSTS	TOTAL COSTS
INTANGIBLE COSTS					
Land / Legal / Regulatory	\$ 100,000				\$ 100,000
Location, Surveys & Damages	155,500	13,000	5,000	20,000	193,500
Drilling	597,675				597,675
Cementing & Float Equip	191,000				191,000
Logging / Formation Evaluation		6,000			6,000
Mud Logging	19,000				19,000
Mud Circulation System	27,350				27,350
Mud & Chemicals	25,000	20,000			45,000
Mud / Wastewater Disposal	155,000				155,000
Freight / Transportation	20,000	12,000		7,000	39,000
Rig Supervision / Engineering	81,900	57,800	6,200	12,000	157,900
Drill Bits	72,500				72,500
Fuel & Power	73,125				73,125
Water	32,500	370,000			402,500
Drig & Completion Overhead	7,500	7,000			14,500
Plugging & Abandonment					
Directional Drilling, Surveys	175,000				175,000
Completion Unit, Swab, CTU		40,000	8,300		48,300
Perforating, Wireline, Slickline		116,500			116,500
High Pressure Pump Truck		84,000	4,500		88,500
Stimulation		1,980,000			1,980,000
Stimulation Flowback & Disp		180,500	105,000		285,500
Insurance	22,810				22,810
Labor	103,500	9,000	8,000		118,500
Rental - Surface Equipment	105,675	104,430	1,000	2,400	213,505
Rental - Downhole Equipment	33,500	28,000			61,500
Rental - Living Quarters	37,363	25,570		800	63,733
Contingency	101,795	244,304	2,450	4,220	352,769
TOTAL INTANGIBLES >	2,137,692	3,298,104	138,450	46,420	5,618,666
TANGIBLE COSTS					
Surface Casing	\$ 24,300				\$ 24,300
Intermediate Casing	109,180				109,180
Drilling Liner					
Production Casing	242,924				242,924
Production Liner					
Tubing			55,512		55,512
Wellhead	38,000		18,000		56,000
Packers, Liner Hangers	8,000	30,600			38,600
Tanks				60,000	60,000
Production Vessels			51,000	22,500	73,500
Flow Lines			46,000		46,000
Rod string					
Artificial Lift Equipment			124,000		124,000
Compressor				10,000	10,000
Installation Costs			28,000	36,000	64,000
Surface Pumps			5,000		5,000
Non-controllable Surface					
Non-controllable Downhole					
Downhole Pumps					
Measurement & Meter Installation			15,250	47,000	62,250
Gas Conditioning / Dehydration					
Interconnecting Facility Piping				60,000	60,000
Gathering / Bulk Lines					
Valves, Dumps, Controllers				4,000	4,000
Tank / Facility Containment				15,000	15,000
Flare Stack				10,000	10,000
Electrical / Grounding			30,000	10,000	40,000
Communications / SCADA				12,500	12,500
Instrumentation / Safety			2,500	20,000	22,500
TOTAL TANGIBLES >	422,384	30,600	375,262	307,000	1,135,246
TOTAL COSTS >	2,560,076	3,328,704	511,712	353,420	6,753,912

PREPARED BY MATADOR PRODUCTION COMPANY:

Drilling Engineer:	Patrick Walsh	Team Lead - WTX/NM:	
Completions Engineer:	Matt Bell		
Production Engineer:	Rakesh Patel		

MATADOR RESOURCES COMPANY APPROVAL:

Executive VP, COO/CFO	VP - Res Engineering	VP - Drilling
DEL	BMR	BG
Executive VP, Legal	Exec Dir - Exploration	VP - Production
CA	NLF	TWG
President		
MVH		

NON OPERATING PARTNER APPROVAL:

Company Name:	Working Interest (%):	Tax ID:
Signed by:	Date:	
Title:	Approval: Yes No (mark one)	

The costs on this AFE are estimates only and may not be construed as ceilings on any specific item or the total cost of the project. Tolling transactions accounted under the AFE may be delayed up to a year after the well has been completed. In executing this AFE, the Participant agrees to pay its proportionate share of actual costs incurred, including, legal, customs, regulatory, brokerage and well costs under the terms of the applicable joint operating agreement, regulatory order or other agreement covering this well. Participants shall be covered by and shall be responsible for Operator's well control and general liability insurance unless participant provides Operator a certificate evidencing its own insurance or an amount acceptable to the Operator by the date of sign.

MRC Permian Company

One Lincoln Centre • 5400 LBJ Freeway • Suite 1500 • Dallas, Texas 75240
Voice 972.371.5481 • Fax 214.866.4981
nweeks@matadorresources.com

**Nicholas Weeks
Landman**

November 3, 2017

VIA CERTIFIED RETURN RECEIPT MAIL

Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130

Re: Marbob 19 State Com #124H Participation Proposal
SE/4 SE/4 (SHL) Section 24, T19S, R28E
SE/4 SE/4 (BHL) Section 19, T19S, R29E
Eddy County, New Mexico

Bernhardt Oil Corporation,

MRC Permian Company and its operating company Matador Production Company (collectively "MRC") propose the drilling of the Marbob 19 State Com #124H well (the "Well"), located in the S/2S/2 of Section 19, Township 19 South, Range 29 East, Eddy County, New Mexico, to test the Bone Spring formation. The estimated cost of drilling, testing, completing, and equipping the Well is \$6,768,082 as itemized on the enclosed Authority for Expenditure ("AFE") dated October 20, 2017.

The Well will be drilled to a total vertical depth of 7,880' and a total measured depth of 12,672', producing a treatable lateral of approximately 4,400' within the Bone Spring formation.

MRC reserves the right to modify the locations and drilling plans described above in order to address topography, cultural or environmental concerns, among other reasons. MRC will advise you of any such modifications.

MRC is proposing to drill the Well under the terms of the modified 1989 AAPL form of Operating Agreement ("OA") dated October 20, 2017. The Operating Agreement covers all of Section 19, Township 19 South, Range 29 East, Eddy County, New Mexico limited to those depths within the Bone Spring formation ("Contract Area") pursuant to the following terms:

- 100/300/300% Non-consent penalty
- \$7,000/\$700 Drilling and Producing overhead rate

MRC requests that you indicate your election to participate in the drilling and completion of the Well in the space provided below, sign and return one (1) copy of this letter along with your geological well requirements, and the AFE.

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 8
Submitted by:
MATADOR PRODUCTION COMPANY
Hearing Date: **February 22, 2018**

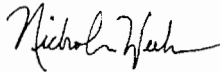
Bernhardt Oil Corporation will own approximately 2.461004% working interest in the Well, subject to title verification.

If your election is to participate in the drilling and completion of the Well, please sign and return a copy of the enclosed AFE within thirty (30) days of receipt of this notice. Please be aware that the enclosed AFE is only an estimate of costs to be incurred and by electing to participate in the Well, each working interest owner shall be responsible for its proportionate share of all costs incurred.

Please contact me if you have any questions.

Sincerely,

MRC Permian Company



Nicholas Weeks

Enclosure(s)

Please elect one of the following and return to sender.

_____ Bernhardt Oil Corporation hereby elects to participate for its proportionate share of the costs detailed in the enclosed AFE associated with the Marbob 19 State Com #124H.

_____ Bernhardt Oil Corporation hereby elects not to participate for its proportionate share of the costs detailed in the enclosed AFE associated with the Marbob 19 State Com #124H.

I / We are interested in selling our interest in the Contract Area, please contact us to discuss.

Bernhardt Oil Corporation

By: _____

Title: _____

Date: _____

MATADOR PRODUCTION COMPANY

ONE LINCOLN CENTRE • 5400 LBJ FREEWAY • SUITE 1500 • DALLAS, TEXAS 75240

Phone (972) 371-5200 • Fax (972) 371-5201

ESTIMATE OF COSTS AND AUTHORIZATION FOR EXPENDITURE

DATE:	October 20, 2017	AFE NO.:	
WELL NAME:	Marbob 19 State Corn #124H	FIELD:	Bone Spring
LOCATION:	S/2S/2 Sec. 19, T19S-R29E	MD/TVD:	12672/7880'
COUNTY/STATE:	Eddy	LATERAL LENGTH:	4,400
MRC WI:			
GEOLOGIC TARGET:	2nd Bone Spring		
REMARKS:	Drill and complete a 2nd Bone Spring horizontal well		

INTANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	FACILITY COSTS	TOTAL COSTS
Land / Legal / Regulatory	\$ 100,000				\$ 100,000
Location, Surveys & Damages	155,500	13,000	5,000	20,000	193,500
Drilling	597,875				597,875
Cementing & Floet Equip	191,000				191,000
Logging / Formation Evaluation	-	6,000	-		6,000
Mud Logging	19,000				19,000
Mud Circulation System	27,350				27,350
Mud & Chemicals	25,000	20,000			45,000
Mud / Wastewater Disposal	155,000	-			155,000
Freight / Transportation	20,000	12,000		7,000	39,000
Rig Supervision / Engineering	81,900	57,800	9,300	12,000	161,000
Drill Bits	72,500				72,500
Fuel & Power	73,125	-			73,125
Water	32,500	370,000			402,500
Drig & Completion Overhead	7,500	7,000			14,500
Plugging & Abandonment	-				-
Directional Drilling, Surveys	175,000				175,000
Completion Unit, Swab, CTU	-	40,000	8,400		48,400
Perforating, Wireline, Silckline	-	116,500			116,500
High Pressure Pump Truck	-	84,000	3,200		87,200
Stimulation	-	1,980,000			1,980,000
Stimulation Flowback & Disp	-	180,500	105,000		285,500
Insurance	22,810				22,810
Labor	103,500	9,000	6,000		118,500
Rental - Surface Equipment	105,675	104,430	1,000	2,400	213,505
Rental - Downhole Equipment	33,500	28,000			61,500
Rental - Living Quarters	37,363	25,570		800	63,733
Contingency	101,795	244,304	2,970	4,220	353,289
TOTAL INTANGIBLES >	2,137,692	3,298,104	140,870	46,420	5,623,086
TANGIBLE COSTS	DRILLING COSTS	COMPLETION COSTS	PRODUCTION COSTS	FACILITY COSTS	TOTAL COSTS
Surface Casing	\$ 24,300				\$ 24,300
Intermediate Casing	109,160				109,160
Drilling Liner	-				-
Production Casing	242,924				242,924
Production Liner	-				-
Tubing	-		55,512		55,512
Wellhead	38,000		18,000		56,000
Packers, Liner Hangers	8,000	30,600	-		38,600
Tanks	-			60,000	60,000
Production Vessels	-		51,000	22,500	73,500
Flow Lines	-		46,000		46,000
Rod string	-				-
Artificial Lift Equipment	-		124,000		124,000
Compressor	-			10,000	10,000
Installation Costs	-		26,000	36,000	64,000
Surface Pumps	-		5,000		5,000
Non-controllable Surface	-				-
Non-controllable Downhole	-				-
Downhole Pumps	-				-
Measurement & Meter Installation	-		25,000	47,000	72,000
Gas Conditioning / Dehydration	-				-
Interconnecting Facility Piping	-			60,000	60,000
Gathering / Bulk Lines	-				-
Valves, Dumps, Controllers	-			4,000	4,000
Tank / Facility Containment	-			15,000	15,000
Flare Stack	-			10,000	10,000
Electrical / Grounding	-		30,000	10,000	40,000
Communications / SCADA	-			12,500	12,500
Instrumentation / Safety	-		2,500	20,000	22,500
TOTAL TANGIBLES >	422,384	30,600	385,012	307,800	1,144,996
TOTAL COSTS >	2,560,076	3,328,704	525,882	353,420	6,768,082

PREPARED BY MATADOR PRODUCTION COMPANY:

Drilling Engineer: Patrick Walsh
 Completions Engineer: Matt Bell
 Production Engineer: Rakesh Patel

Team Lead - WTX/NM

[Signature]
JTG

MATADOR RESOURCES COMPANY APPROVAL:

Executive VP, COO/CFO	VP - Res Engineering	VP - Drilling
DEL	BMR	BG
Executive VP, Legal	Exec Dir - Exploration	VP - Production
CA	NLF	TWG
President		
MVH		

NON OPERATING PARTNER APPROVAL:

Company Name: _____ Working Interest (%): _____ Tax ID: _____
 Signed by: _____ Date: _____
 Title: _____ Approval: Yes _____ No (mark one) _____

The costs on this AFE are estimates only and may not be observed as savings on any specific item or the total cost of the project. Tubing installation approved under the AFE may be delayed up to a year after the well has been completed. In executing this AFE, the Participant agrees to pay its proportionate share of actual costs incurred, including legal, contract, regulatory, and well costs under the terms of the applicable joint operating agreement, regulatory order or other agreement covering this well. Participants shall be covered by and third party indemnity for Operator's well control and general liability insurance unless participant provides Operator a certificate evidencing its own insurance in an amount comparable to the Operator to the date of equal.

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

**APPLICATION OF MATADOR PRODUCTION
COMPANY FOR A NON-STANDARD SPACING
AND PRORATION UNIT AND COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.**

Case No. 15927

AFFIDAVIT OF NOTICE

COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)

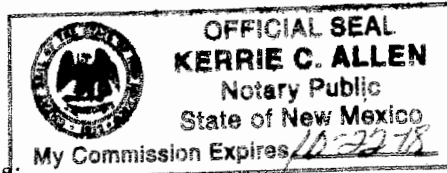
James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Matador Production Company.
3. Matador Production Company has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.



James Bruce

SUBSCRIBED AND SWORN TO before me this 16th day of February, 2018 by
James Bruce.



My Commission Expires: _____



Notary Public

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

December 22, 2017

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

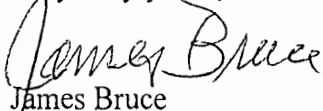
Ladies and gentlemen:

Enclosed is a copy of an application compulsory pooling, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the N½N½ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, January 11, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, January 4, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Matador Production Company

ATTACHMENT

A

Marbob 19 State Com 121H

Alfred Rodriguez
7777 Forest Lane
Suite C-236
Dallas, TX 75230

Betty Read Young
1311 W. Third Street
Roswell, NM 88201

Carolyn R. Beall
P.O. Box 3098
Midland, TX 79702

CSA Petroleum Corporation
P.O. Box 318
Hunt, TX 78024

Estate of Ralph E. Peacock, deceased
7918B East 40th Street
Tulsa, OK 74145

H.W. Allen Company, LLC
4835 South Peoria Avenue
Tulsa, OK 74105

Jack C. Holland
180 Mooring Buoy
Hilton Head, SC 29928

Judy Scisson Ferreri
3118 Timber Lane
Verona, WI 53593

Lincoln Oil & Gas, LLC
701 Three Cross
Roswell, NM 88201

OXY USA Inc.
5 Greenway Plaza
Suite 110
Houston, TX 77046

Sharron S. Trollinger
6026 Meadowcreek Drive
Dallas, TX 75248

Straight Profit, Inc.
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098

Turner Royalties, LLC

Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130

Buchholz Oil & Gas Co.
1201 Elm Street
#4300
Dallas, TX 75270

Colgate Production, LLC
306 West Wall Street
Midland, TX 79701

Donald E. Richter et ux, Glenda L. Richter
#9 Willow Wood
Dallas, TX 75205

George Phillips Huey, Jr. (Life Estate)
5850 E. Lovers Lane
#315
Dallas, TX 75206

Highland (Texas) Energy Company
700 N Pearl Street, Suite 360
RPR Tower, LB 305
Dallas, TX 75201

Joel M. Wigley
1502 N. Missouri Avenue
Roswell, NM 88201

Laura K. Read, LLC
1217 W. Third Street
Roswell, NM 88201

Nancy Peacock Mackey
4818 S. Zunis Avenue
Tulsa, OK 74105

Reserve Management Inc.
1127 Judson Road
#126
Longview, TX 75601

Sharron S. Trollinger, Trustee of the Sharron Stone Trollinger Trust
6026 Meadowcreek Drive
Dallas, TX 75248

Texas A&M Foundation (Remainderman)
401 George Bush Drive
College Station, TX 77840

EXHIBIT

A

Marbob 19 State Com 121H

3232 W. Britton Rd.
Suite 200
Oklahoma City, OK 73102

Virginia A. Desmond c/o First American Bank
P.O. Box 1857
Roswell, NM 88202

American Shale Energy, LLC
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098

Westway Petro Two
6440 N. Central Expressway
Suite 615
Dallas, TX 75206

V.C. Desmond Trust, 1st National Bank, Trustee
P.O. Box 1857
Roswell, NM 88202

Watson Properties, LLC
3905 Futura Drive
Roswell, NM 88201

Westway Petro One
6440 N. Central Expressway
Suite 615
Dallas, TX 75206

William V. Palmer, LLC
c/o Shelley Palmer 1004 Carter Avenue
Lovington, NM 88260

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:

H.W. Allen Company, LLC
4835 South Peoria Avenue
Tulsa, OK 74105



9590 9402 3526 7275 4732 03

2. Article

7017 0190 0000 8403 6484 (over \$500)

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

Domestic Return Receipt

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

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

Certified Mail Fee

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

Total Postage and Fees

Sent To H.W. Allen Company, LLC
4835 South Peoria Avenue
Tulsa, OK 74105
 Street and Apt. No., or P.O.
 City, State, ZIP+4®

Postmark
Here

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

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

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

Domestic Return Receipt

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:

Texas A&M Foundation (Remainderman)
401 George Bush Drive
College Station, TX 77840



9590 9402 3526 7275 4732 58

2. Article

7017 0190 0000 8403 6309 (over \$500)

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

Domestic Return Receipt

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

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

Certified Mail Fee

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

Total Postage and Fees

Sent To Texas A&M Foundation (Remainderman)
401 George Bush Drive
College Station, TX 77840
 Street and Apt. No., or P.O.
 City, State, ZIP+4®

Postmark
Here

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature X DiAnne Maus ☒ Agent ☐ Addressee
 B. Received by (Printed Name) DIANNE MAUS C. Date of Delivery 01-04-18
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

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

Domestic Return Receipt

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:

George Phillips Huey, Jr. (Life Estate)
5850 E. Lovers Lane
#315
Dallas, TX 75206



9590 9402 3526 7275 4733 26

2. Article Number

7017 0190 0000 8403 6378

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

1-2-1

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

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

OFFICIAL USE

Certified Mail Fee

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

Postmark
Here

Total Postage and Fees \$
 Sent To George Phillips Huey, Jr. (Life Estate)
 #315
 Dallas, TX 75206

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

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
 B. Received by (Printed Name) ☐ Addressee
 Curtis Swike 1/2/18
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Certified Mail Restricted Delivery Merchandise
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Insured Mail Restricted Delivery (over \$500)

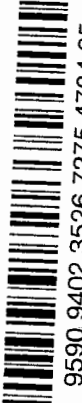
Domestic Return Receipt

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:

Jack C. Holland
180 Mooring Buoy
Hilton Head, SC 29928



9590 9402 3526 7275 4734 25

2. Article Number (Transfer from service label)

7017 0190 0000 8403 6477

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

1-2-1

Domestic Return Receipt

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, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$

Postmark
Here

Total Postage and Fees

Sent To Jack C. Holland
180 Mooring Buoy
Hilton Head, SC 29928
Street and Apt. No., or P.O. Box No.
City, State, ZIP+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

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

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

d Delivery

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

1-2-1

Domestic Return Receipt

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:

V.C. Desmond Trust, 1st National Bank, Trustee
P.O. Box 1857
Roswell, NM 88202



9590 9402 3526 7275 4738 07

2. 7017 0190 0000 8402 2869

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

121

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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



3. Service Type
☐ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Certified Mail®
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Postage

Total Postage and Fees

Sent To

Street and Apt. No., or P.O. Box, Houston, TX 77098

City, State, ZIP+4®

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

See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail OnlyFor delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee

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

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

Postage

Total Postage and Fees

Sent To

V.C. Desmond Trust, 1st National Bank, Trustee

P.O. Box 1857

Roswell, NM 88202

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

City, State, ZIP+4®

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

See Reverse for Instructions

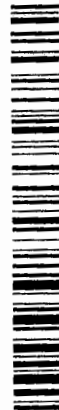
Postmark
Here

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:

Straight Profit, Inc.
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098



9590 9402 3526 7275 4733 71

2. Article

7017 0190 0000 8403 6422

(over \$500)

121

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

☐ Priority Mail Express®☐ Adult Signature☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Certified Mail®☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Postage

Total Postage and Fees

Sent To

Straight Profit, Inc.

2929 Buffalo Speedway

Suite 2106

Houston, TX 77098

City, State, ZIP+4®

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

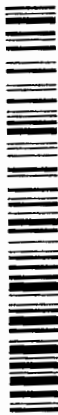
See Reverse for Instructions

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:

Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130



9590 9402 3526 7275 4733 64

2. Article Number (Transfer from envelope, if applicable)
7017 0190 0000 8403 6415 (over \$500)

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent
B. Received by (Printed Name) James Loggins ☒ Addressee
C. Date of Delivery 7/13/15

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

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Restricted Delivery

**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, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$

Postmark
Here

Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130

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

**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, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$

Postmark
Here

American Shale Energy, LLC
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098

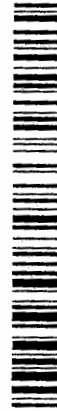
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

American Shale Energy, LLC
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098



9590 9402 3526 7275 4738 21

2. Article N

7017 0190 0000 8403 6415

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent
B. Received by (Printed Name) James Loggins ☒ Addressee
C. Date of Delivery 7/13/15
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Restricted Delivery

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

Domestic Return Receipt

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:

Reserve Management Inc.
1127 Judson Road
#126
Longview, TX 75601



9590 9402 3526 7275 4732 72

2. Article Number

7017 0190 0000 8403 6323

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

Domestic Return Receipt

121

COMPLETE THIS SECTION ON DELIVERY

- A. Signature x [Signature] ☐ Agent ☐ Addressee
- B. Received by (Printed Name) 1-3 C. Date of Delivery 1-3
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

**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, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$

Postmark
Here

Total Postage and Fees \$

Sent To Reserve Management Inc.
1127 Judson Road

Street and Apt. No., or P.O. Box #126

City, State, ZIP+4® Longview, TX 75601

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

**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, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$

Total Postage and Fees \$

Sent To Sharron S. Trolinger

Street and Apt. No., or P.O. Box 6026 Meadowcreek Drive

City, State, ZIP+4® Dallas, TX 75248

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

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:

Sharron S. Trolinger
6026 Meadowcreek Drive
Dallas, TX 75248



9590 9402 3526 7275 4733 88

2. Article Number (Transfer from front)

7017 0190 0000 8403 6439

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

Domestic Return Receipt

121

COMPLETE THIS SECTION ON DELIVERY

- A. Signature x [Signature] ☐ Agent ☐ Addressee
- B. Received by (Printed Name) Sharron Trolinger C. Date of Delivery 1-7-18
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

restricted Delivery

(over \$500)

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:

Sharon S. Trollering, Trustee of the Sharon Stone Trollering Trust
6026 Meadowcreek Drive
Dallas, TX 75248



9590 9402 3526 7275 4732 65

2. Article Number (Transfer from carrier label)

7017 0190 0000 8403 6316

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

121

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Sharon Stone Trollering C. Date of Delivery 11/3/18
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

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

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

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

Postmark
Here

Total Postage and Fees

Sent to Sharon S. Trollering, Trustee of the Sharon Stone Trollering Trust
6026 Meadowcreek Drive
Dallas, TX 75248
City, State, Zip+4®

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

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

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

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

Postmark
Here

Total Postage and Fees

Sent to Watson Properties, LLC
3905 Futura Drive
Roswell, NM 88201
City, State, Zip+4®

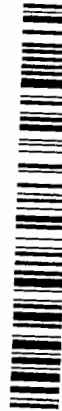
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Watson Properties, LLC
3905 Futura Drive
Roswell, NM 88201



9590 9402 3526 7275 4737 91

2. Article

7017 0190 0000 8402 2852

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

121

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Sharon Stone Trollering C. Date of Delivery 11/3/18
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

led 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:

Judy Scisson Ferreri
3118 Timber Lane
Verona, WI 53593



9590 9402 3526 7275 4734 18

2. Article

7017 0190 0000 8403 6460

☐ Insured Mail (over \$500)

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

Domestic Return Receipt

12-1

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

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail OnlyFor delivery information, visit our website at www.usps.com®

Certified Mail Fee \$

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

☐ Return Receipt (hardcopy) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Judy Scisson Ferreri
3118 Timber Lane
Verona, WI 53593

City, State, ZIP+4®

Postmark
Here

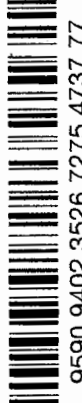
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Westway Petro One
6440 N. Central Expressway
Suite 615
Dallas, TX 75206



9590 9402 3526 7275 4737 77

2. Article

7017 0190 0000 8402 2845

(over \$500)

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

Domestic Return Receipt

12-1

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail OnlyFor delivery information, visit our website at www.usps.com®

Certified Mail Fee \$

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

☐ Return Receipt (hardcopy) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Westway Petro One
6440 N. Central Expressway
Suite 615
Dallas, TX 75206

City, State, ZIP+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery

U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$

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

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To OXY USA Inc. 5 Greenway Plaza Suite 110 Houston, TX 77046

Street and Apt. No., or PO Box

City, State, Zip+4[®]

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

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:

Westway Petro Two
6440 N. Central Expressway
Suite 615
Dallas, TX 75206

9590 9402 3526 7275 4738 14

2. Article Number (Transfer from service label)

7017 0190 0000 8402 2876

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

Domestic Return Receipt

121

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

☐ Priority Mail Express[®]

☐ Adult Signature

☐ Registered MailTM

☐ Certified Mail[®]

☐ Certified Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature ConfirmationTM

☐ Restricted Delivery

U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$

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

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Westway Petro Two 6440 N. Central Expressway Suite 615 Dallas, TX 75206

Street and Apt. No., or PO Box

City, State, Zip+4[®]

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

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:

OXY USA Inc.
5 Greenway Plaza
Suite 110
Houston, TX 77046

9590 9402 3526 7275 4733 95

2. Article Number (Transfer from service label)

7017 0190 0000 8403 6446

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

Domestic Return Receipt

121

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

☐ Priority Mail Express[®]

☐ Adult Signature

☐ Registered MailTM

☐ Certified Mail[®]

☐ Certified Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature ConfirmationTM

☐ Restricted Delivery

U.S. Postal ServiceTM
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

26E9 E048 0000 06T0 2T02

1. Article Addressed to:

Donald E. Richter et ux, Glenda L. Richter
#9 Willow Wood
Dallas, TX 75205

2. Article Number 7017 0190 0000 8403 6365

3. Service Type

☒ Adult Signature	☐ Priority Mail Express®
☐ Certified Mail®	☐ Registered Mail™
☐ Adult Signature Restricted Delivery	☐ Return Receipt for Merchandise
☐ Certified Mail Restricted Delivery	☐ Signature Confirmation™
☐ Return Receipt for Merchandise	☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes ☐ No

5. Postmark Here

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

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

7. Total Postage and Fees

Sent To Colgate Production, LLC
306 West Wall Street
Midland, TX 79701

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

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

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:

Donald E. Richter et ux, Glenda L. Richter
#9 Willow Wood
Dallas, TX 75205

2. Article Number

7017 0190 0000 8403 6365

3. Service Type

☒ Adult Signature

☐ Certified Mail

☐ Adult Signature Restricted Delivery

☐ Certified Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation

☐ Signature Confirmation Restricted Delivery

☐ Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

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

121

U.S. Postal ServiceTM

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

Total Postage and Fees

Sent To Donald E. Richter et ux, Glenda L. Richter

Street and Apt. No., or P.O. #9 Willow Wood

City, State, ZIP+4® Dallas, TX 75205

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

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:

Colgate Production, LLC
306 West Wall Street
Midland, TX 79701

2. Article Number

7017 0190 0000 8403 6365

3. Service Type

☒ Adult Signature

☐ Certified Mail

☐ Adult Signature Restricted Delivery

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Signature Confirmation

☐ Signature Confirmation Restricted Delivery

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation

Signature Confirmation Restricted Delivery

Domestic Return Receipt

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

121

U.S. Postal ServiceTM

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

Total Postage and Fees

Sent To Colgate Production, LLC

Street and Apt. No., or P.O. 306 West Wall Street

City, State, ZIP+4® Midland, TX 79701

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

121

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Official Mail Only

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

Certified Mail Fee \$

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

Total Postage and Fees \$
Sent To Betty Read Young
1311 W. Third Street
Roswell, NM 88201
Street and Apt. No., or P.O.
City, State, ZIP+4[®]

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

SENDER: COMPLETE THIS SECTION

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

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Collect on Delivery
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

9590 9402 3526 7275 4733 02

2. Article Number (Transit form only) 7017 0190 0000 8403 6354
(over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt 121

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Official Mail Only

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

Certified Mail Fee \$

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

Total Postage and Fees \$
Sent To Joel M. Wigley
1502 N. Missouri Avenue
Roswell, NM 88201
Street and Apt. No., or P.O. Box
City, State, ZIP+4[®]

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

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:

Betty Read Young
1311 W. Third Street
Roswell, NM 88201

9590 9402 3526 7275 4732 41

2. Article No. 7017 0190 0000 8403 6521
(over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt 121

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

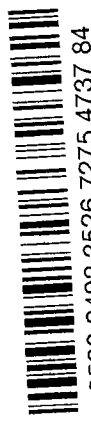
Domestic Return Receipt

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:

William V. Palmer, LLC
c/o Shelley Palmer 1004 Carter Avenue
Lovington, NM 88260



9590 9402 3526 7275 4737 84

2. 7017 0190 0000 8402 2838

(over \$500)

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature William V. Palmer Agent
B. Received by (Printed Name) William V. Palmer Date of Delivery 8/28/15
C. Is delivery address different from item 1? Yes ☒ Yes ☐ No
D. If YES, enter delivery address below:

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Restricted Delivery

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, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$

Sent To William V. Palmer, LLC
c/o Shelley Palmer 1004 Carter Avenue
Lovington, NM 88260
Street and Apt. No.,
City, State, Zip+4®

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

See Reverse for Instructions

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, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fee \$

Sent To Lincoln Oil & Gas, LLC
701 Three Cross
Roswell, NM 88201
Street and Apt. No.,
City, State, Zip+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature William V. Palmer Agent
B. Received by (Printed Name) William V. Palmer Date of Delivery 8/28/15
C. Is delivery address different from item 1? ☐ Yes ☒ No
D. If YES, enter delivery address below:

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Restricted Delivery

Domestic Return Receipt

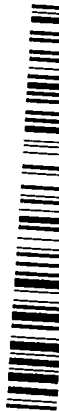
PS Form 3811, July 2015 PSN 7530-02-000-9053

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:

CSA Petroleum Corporation
P.O. Box 318
Hunt, TX 78024



9590 9402 3526 7275 4732 27

2. Article Number (Transfer from service label)

7017 0190 0000 8403 6507
PS Form 3811, July 2015 PSN 7530-02-000-9053

U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT[®]

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

Official Use

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

Total Postage and Fees \$
Sent To CSA Petroleum Corporation
P.O. Box 318
Hunt, TX 78024

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

COMPLETE THIS SECTION ON DELIVERY

Signature [Signature]
B. Received by (Printed Name) Alfred Rodriguez
C. Date of Delivery 7/12/17

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

3. Service Type
- ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail[®]
 - ☐ Certified Mail Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Insured Mail
 - ☐ Priority Mail Express[®]
 - ☐ Registered Mail[™]
 - ☐ Registered Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation[™]
 - ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Alfred Rodriguez
7777 Forest Lane
Suite C-236
Dallas, TX 75230



9590 9402 3526 7275 4737 60

2. Article

7017 0190 0000 8403 6538
PS Form 3811, July 2015 PSN 7530-02-000-9053

U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT[®]

Domestic Mail Only

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

Certified Mail Fee

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

Total Postage and Fees \$
Sent To Alfred Rodriguez
7777 Forest Lane
Suite C-236
Dallas, TX 75230

Street and Apt. No., or PO

City, State, ZIP+4[®]

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] Agent ☐ Addressee ☐
B. Received by (Printed Name) Alfred Rodriguez
C. Date of Delivery 7/12/17

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

3. Service Type
- ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail[®]
 - ☐ Certified Mail Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Insured Mail
 - ☐ Priority Mail Express[®]
 - ☐ Registered Mail[™]
 - ☐ Registered Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation[™]
 - ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Laura K. Read, LLC
1217 W. Third Street
Roswell, NM 88201



9590 9402 3526 7275 4732 96

2. Article Number:

7017 0190 0000 8403 6347
(over \$500)

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Adult Signature
 - ☐ Registered Mail™
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Restricted Delivery

**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, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$

Postmark
Here

Sent To Laura K. Read, LLC
1217 W. Third Street
Roswell, NM 88201

City, State, Zip+4®

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

See Reverse for Instructions

**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, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$

Postmark
Here

Sent To Carolyn R. Beall
P.O. Box 3098
Midland, TX 79702

City, State, Zip+4®

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

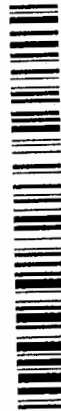
See Reverse for Instructions

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:

Carolyn R. Beall
P.O. Box 3098
Midland, TX 79702



9590 9402 3526 7275 4732 34

2. Article Number

7017 0190 0000 8403 6347
(over \$500)

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
- ☐ Adult Signature
 - ☐ Registered Mail™
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Restricted Delivery

Domestic Return Receipt

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

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

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

OFFICIAL USE

Certified Mail Fee		Postmark Here
\$		
Extra Services & Fees (check box, add fee as appropriate)		
☐ Return Receipt (hardcopy)	\$	
☐ Return Receipt (electronic)	\$	
☐ Certified Mail Restricted Delivery	\$	
☐ Adult Signature Required	\$	
☐ Adult Signature Restricted Delivery	\$	
Postage		
\$		
Total Postage and Fees		
\$		
Sent To Buchholz Oil & Gas Co.		
1201 Elm Street		
Street and Apt. No., or P.O. #4300		
City, State, ZIP+4 [®] Dallas, TX 75270		
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions		

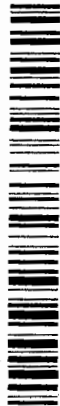
8049 8048 0000 0670 2702

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:

Highland (Texas) Energy Company
700 N Pearl Street, Suite 360
RPR Tower, LB 305
Dallas, TX 75201



9590 9402 3526 7275 4733 19

2. Article Number (Transfer from mailpiece label)

7017 0190 0000 8403 6361 (over \$500)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

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

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

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

Postage

Postmark
Here

Total Postage and Fees

Sent To Highland (Texas) Energy Company
700 N Pearl Street, Suite 360
RPR Tower, LB 305
Street and Apt. No., or P.O. Box Dallas, TX 75201
City, State, ZIP+4®

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

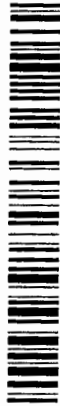
See Reverse for Instructions

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:

Nancy Peacock Mackey
4818 S. Zunis Avenue
Tulsa, OK 74105



9590 9402 3526 7275 4732 89

2. Article Number *(Transfer from envelope label)*
7017 0190 0000 8403 6330
(over \$500) 175
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

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

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

Domestic Return Receipt

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OFFICIAL USE

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

Postmark
Here

Sent To Nancy Peacock Mackey
4818 S. Zunis Avenue
Street and Apt. No., or P.O. Box Tulsa, OK 74105
City, State, ZIP+4®

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

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:

Estate of Ralph E. Peacock, deceased
79188 East 40th Street
Tulsa, OK 74145



9590 9402 3526 7275 4732 10

2. Article Number (Transfer from service label)

7017 0190 0000 8403 6491 (over \$500)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

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

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

3. Service Type

☐ Adult Signature ☐ Registered MailTM

☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted Delivery

☐ Certified Mail[®] ☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Restricted Delivery ☐ Signature ConfirmationTM

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal ServiceTM
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For delivery information, visit our website at www.usps.com

OFFICIAL U.S.

Certified Mail Fee

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

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

Total Postage and Fees

Sent To Estate of Ralph E. Peacock, deceased
79188 East 40th Street
Street and Apt. No., or Tulsa, OK 74145

City, State, ZIP+4[®]

Postmark
Here

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

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

February 1, 2018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

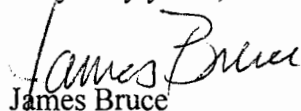
Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard spacing and proration unit and compulsory pooling, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the N½N½ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 22, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, February 15, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Matador Production Company

EXHIBIT A

Turner Royalties, LLC
3 Brass Horse Lane
Santa Fe, New Mexico 87508

Turner Royalties, LLC
16A Brass Horse Road
Santa Fe, New Mexico 87505

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:

Turner Royalties, LLC
3 Brass Horse Lane
Santa Fe, New Mexico 87508



9590 9402 3019 7124 7203 30

2. Article

7017 2680 0000 1773 1044

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

12-1 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee
B. Received by (Printed Name) [Signature]
C. Date of Delivery 2/7/18
D. Is delivery address different from that of the sender? ☐ Yes ☐ No
If YES, enter delivery address below:

FEB 07 2018

3. Service Type Priority Mail Express®
- ☐ Adult Signature Restricted Delivery™
 - ☐ Registered Mail™
 - ☐ Certified Mail®
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Restricted Delivery

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Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To
Street and Apt. No., or PO Box
City, State, ZIP+4®

Postmark
Here

Turner Royalties, LLC
3 Brass Horse Lane
Santa Fe, New Mexico 87508

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

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☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To
Street and Apt. No., or PO Box
City, State, ZIP+4®

Turner Royalties, LLC
16A Brass Horse Road
Santa Fe, New Mexico 87505

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

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

**APPLICATION OF MATADOR PRODUCTION
COMPANY FOR A NON-STANDARD SPACING
AND PRORATION UNIT AND COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.**

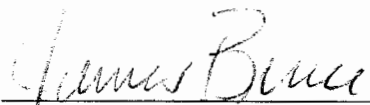
Case No. 15927

AFFIDAVIT OF NOTICE

COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)

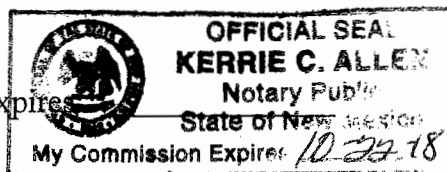
James Bruce, being duly sworn upon his oath, deposes and states:

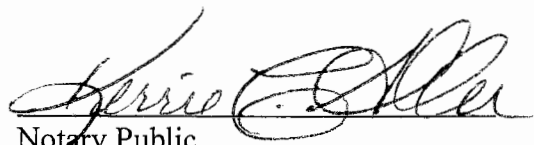
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Matador Production Company.
3. Matador Production Company has conducted a good faith, diligent effort to find the names and correct addresses of the offset operators or interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the offsets, at their last known addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.


James Bruce

SUBSCRIBED AND SWORN TO before me this 10th day of February, 2018 by James Bruce.

My Commission Expires




Notary Public

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruce@aol.com

February 1, 2018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

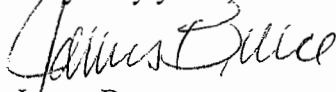
Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard spacing and proration unit, *etc.*, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the N½N½ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 22, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. **The Division requires applicant to notify offset operators or working interest owners of the non-standard unit portion of the application, and you offset the well unit.** You are not required to attend this hearing, but you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, February 15, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Matador Production Company

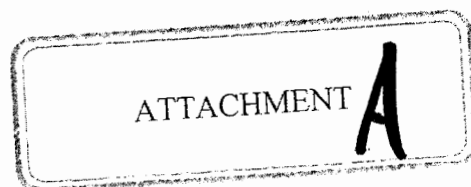


EXHIBIT A

Devon Energy Production Company, L.P.
333 West Sheridan
Oklahoma City, Oklahoma 73102

Mewbourne Oil Company
Suite 1020
500 West Texas
Midland, Texas 79701

COG Operating LLC
600 West Illinois
Midland, Texas 797

Cimarex Energy Co.
Suite 600
600 North Marienfeld
Midland, Texas 79701

Landcaster Resources
9414 South Vandalie
Tulsa, Oklahoma 74192

Huntington Resources
P.O. Box 700093
Tulsa, Oklahoma 74170

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OFFICIAL USE

Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	
Total Postage and Fees	
Sent To Mewbourne Oil Company Suite 1020 500 West Texas Midland, Texas 79701	
Street and Apt. No., or PO Box	
City, State, ZIP+4 [®]	

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

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OFFICIAL USE

Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	
Total Postage and Fees	
Sent To Devon Energy Production Company, L.P. 333 West Sheridan Oklahoma City, Oklahoma 73102	
Street and Apt. No.	
City, State, ZIP+4 [®]	

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

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:

Mewbourne Oil Company
Suite 1020
500 West Texas
Midland, Texas 79701



9590 9402 2703 6351 7693 77

2. Article Addressed to:

7017 0190 0000 8403 6552
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

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

- 3. Service Type ☐ Priority Mail Express[®] ☐ Registered Mail[™] ☐ Adult Signature Restricted Delivery ☐ Certified Mail[®] ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation[™] ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Devon Energy Production Company, L.P.
333 West Sheridan
Oklahoma City, Oklahoma 73102



9590 9402 3019 7124 7203 09

7017 0190 0000 8403 6552

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

COMPLETE THIS SECTION ON DELIVERY

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

- 3. Service Type ☐ Priority Mail Express[®] ☐ Registered Mail[™] ☐ Adult Signature Restricted Delivery ☐ Certified Mail[®] ☐ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature Confirmation[™] ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Cimaxex Energy Co.
Suite 600
600 North Marienfeld
Street and Apt. No., or P.O. Box
Midland, Texas 79701
City, State, Zip+4[®]

Postmark Here

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

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Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To COG Operating LLC
600 West Illinois
Street and Apt. No., or P.O. Box
Midland, Texas 797
City, State, Zip+4[®]

Postmark Here

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

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:

Cimaxex Energy Co.
Suite 600
600 North Marienfeld
Midland, Texas 79701

9590 9402 2703 6351 7693 53

2. Art 7017 0190 0000 8403 6583

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

Domestic Return Receipt

121

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent ☒ Addressee ☐
B. Received by (Printed Name) *B. Russell* C. Date of Delivery *2-8-15*
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature ConfirmationTM
☐ 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:

COG Operating LLC
600 West Illinois
Midland Texas 797

9590 9402 2703 6351 7693 60

2. Art 7017 0190 0000 8403 6576

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

Domestic Return Receipt

121

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent ☐ Addressee ☒
B. Received by (Printed Name) *B. Russell* C. Date of Delivery *2-8-15*
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

U.S. Postal ServiceTM
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OFFICIAL USE

Certified Mail Fee \$

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

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

Postage \$

Total Postage and Fees \$

Sent To Huntington Resources

P.O. Box 700093

Street and Apt. No., or PO Box, Oklahoma 74170

City, State, ZIP+4®

Postmark Here

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

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OFFICIAL USE

Certified Mail Fee \$

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

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

Postage \$

Total Postage and Fees \$

Sent To Landcaster Resources

9414 South Vandalic

Street and Apt. No., or PO Box, Tulsa, Oklahoma 74192

City, State, ZIP+4®

Postmark Here

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

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

**APPLICATION OF MATADOR PRODUCTION
COMPANY FOR A NON-STANDARD SPACING
AND PRORATION UNIT AND COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.**

Case No. 15927

AFFIDAVIT OF NOTICE

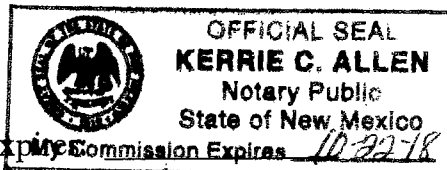
COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)

James Bruce, being duly sworn upon his oath, deposes and states:

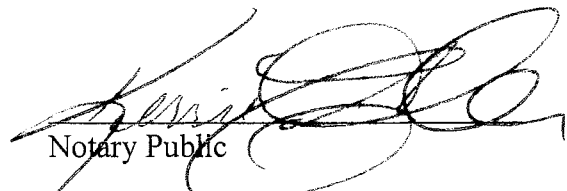
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Matador Production Company.
3. Matador Production Company has conducted a good faith, diligent effort to find the names and correct addresses of the overriding interest owners in the well unit being pooled.
4. Notice of the application was provided to the interest owners by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.


James Bruce

SUBSCRIBED AND SWORN TO before me this 11th day of February, 2018 by James Bruce.



My Commission Expires 10-31-18


Notary Public

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

February 2, 2018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Overriding royalty interest owners on Exhibit A

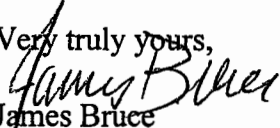
Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard spacing and proration unit and compulsory pooling, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the N½N½ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 22, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, **but as an owner of an overriding royalty interest that may be affected by this application, you may appear and present testimony.** Your interest is non-cost bearing, but the OCD has requested operators to pool overriding royalty interest owners. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, February 15, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Matador Production Company

EXHIBIT A

COG Operating LLC
Concho Oil & Gas LLC
600 West Illinois
Midland, Texas 79701

Read & Stevens, LLC
Read & Stevens, Inc.
P.O. Box 1518
Roswell, New Mexico 88202

CBR Oil Properties, LLC
P.O. Box 1518
Roswell, New Mexico 88202

U.S. Postal ServiceTM
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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fee \$
Read & Stevens, LLC
Read & Stevens, Inc.
P.O. Box 1518
Roswell, New Mexico 88202
Sent To
Street and Apt. No., or
City, State, ZIP+4®
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAIL® RECEIPT
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☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fee \$
COG Operating LLC
Concho Oil & Gas LLC
600 West Illinois
Midland, Texas 79701
Sent To
Street and Apt. No., or
City, State, ZIP+4®
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:
Read & Stevens, LLC
Read & Stevens, Inc.
P.O. Box 1518
Roswell, New Mexico 88202

2. Article Number (Printed on back of mailpiece)
9590 9402 3019 7124 7203 23

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

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

COMPLETE THIS SECTION ON DELIVERY

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

Domestic Return Receipt

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:
COG Operating LLC
Concho Oil & Gas LLC
600 West Illinois
Midland, Texas 79701

2. Article Number (Printed on back of mailpiece)
9590 9402 3019 7124 7202 93

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

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

COMPLETE THIS SECTION ON DELIVERY

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

Domestic Return Receipt

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT[®]
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To CBR Oil Properties, LLC
P.O. Box 1518
Street and Apt. No., or Roswell, New Mexico 88202
City, State, ZIP+4[®]

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

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:

CBR Oil Properties, LLC
P.O. Box 1518
Roswell, New Mexico 88202



9590 9402 3019 7124 7203 16

2. Article N 7017 2680 0000 1773 1068

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature M. Noe ☐ Agent
B. Received by (Printed Name) M. Noe ☐ Addressee
C. Date of Delivery NOV 11
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

Domestic Return Receipt

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

**APPLICATION OF MATADOR PRODUCTION
COMPANY FOR A NON-STANDARD SPACING
AND PRORATION UNIT AND COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.**

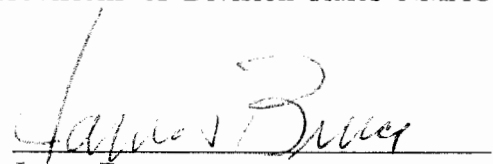
Case No. 15927

AFFIDAVIT OF NOTICE

COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)

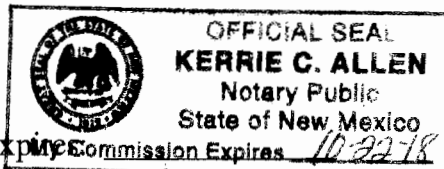
James Bruce, being duly sworn upon his oath, deposes and states:

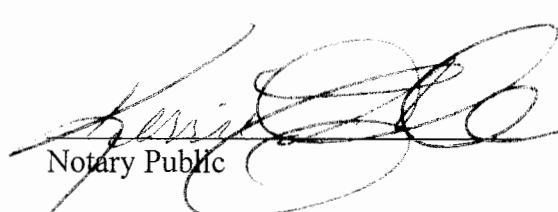
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Matador Production Company.
3. Matador Production Company has conducted a good faith, diligent effort to find the names and correct addresses of the overriding interest owners in the well unit being pooled.
4. Notice of the application was provided to the interest owners by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.


James Bruce

SUBSCRIBED AND SWORN TO before me this 16th day of February, 2018 by James Bruce.

My Commission Expires




Notary Public

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

February 2, 2018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Overriding royalty interest owners on Exhibit A

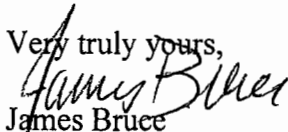
Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard spacing and proration unit and compulsory pooling, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the N $\frac{1}{2}$ N $\frac{1}{2}$ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 22, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, **but as an owner of an overriding royalty interest that may be affected by this application, you may appear and present testimony.** Your interest is non-cost bearing, but the OCD has requested operators to pool overriding royalty interest owners. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, February 15, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Matador Production Company

EXHIBIT A

COG Operating LLC
Concho Oil & Gas LLC
600 West Illinois
Midland, Texas 79701

Read & Stevens, LLC
Read & Stevens, Inc.
P.O. Box 1518
Roswell, New Mexico 88202

CBR Oil Properties, LLC
P.O. Box 1518
Roswell, New Mexico 88202

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT¹
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

Postmark
Here

Total Postage and Fees

\$ Sent To CBR Oil Properties, LLC
P.O. Box 1518

Street and Apt. No., or Roswell, New Mexico 88202

City, State, Zip+4[®]

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

8907 1772 0000 0892 2702

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

December 22, 2017

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

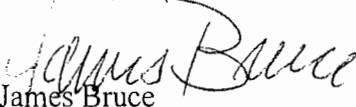
Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard unit and compulsory pooling, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the S½N½ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

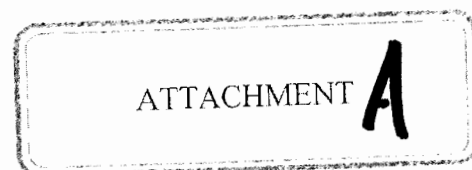
This matter is scheduled for hearing at 8:15 a.m. on Thursday, January 11, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, January 4, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Matador Production Company



Marbob 19 State Com 122H

Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130

Buchholz Oil & Gas Co.
1201 Elm Street
#4300
Dallas, TX 75270

Colgate Production, LLC
306 West Wall Street
Midland, TX 79701

Jack C. Holland
180 Mooring Buoy
Hilton Head, SC 29928

Judy Scisson Ferreri
3118 Timber Lane
Verona, WI 53593

Lincoln Oil & Gas, LLC
701 Three Cross
Roswell, NM 88201

OXY USA Inc.
5 Greenway Plaza
Suite 110
Houston, TX 77046

Sharron S. Trollinger
6026 Meadowcreek Drive
Dallas, TX 75248

American Shale Energy, LLC
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098

Turner Royalties, LLC
3232 W. Britton Rd.
Suite 200
Oklahoma City, OK 73102

Betty Read Young
1311 W. Third Street
Roswell, NM 88201

Carolyn R. Beall
P.O. Box 3098
Midland, TX 79702

George Phillips Huey, Jr. (Life Estate)
5850 E. Lovers Lane
#315
Dallas, TX 75206

Joel M. Wigley
1502 N. Missouri Avenue
Roswell, NM 88201

Laura K. Read, LLC
1217 W. Third Street
Roswell, NM 88201

Nancy Peacock Mackey
4818 S. Zunis Avenue
Tulsa, OK 74105

Reserve Management Inc.
1127 Judson Road
#126
Longview, TX 75601

Straight Profit, Inc.
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098

Texas A&M Foundation (Remainderman)
401 George Bush Drive
College Station, TX 77840

V.C. Desmond Trust, 1st National Bank, Trustee
P.O. Box 1857
Roswell, NM 88202

EXHIBIT

A

Marbob 19 State Com 122H

Virginia A. Desmond c/o First American Bank
P.O. Box 1857
Roswell, NM 88202

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
- 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.

Joel M. Wigley
1502 N. Missouri Avenue
Roswell, NM 88201



9590 9402 2691 6351 9019 02

2. Article N 7017 2680 0000 1773 0818

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

Domestic Return Receipt

1722

COMPLETE THIS SECTION ON DELIVERY

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

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

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OFFICIAL USE

Certified Mail Fee \$

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

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

Postmark
Here

Total Postage and Fees \$

Sent To Colgate Production, LLC
306 West Wall Street
Midland, TX 79701

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

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

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OFFICIAL USE

Certified Mail Fee \$

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

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

Postmark
Here

Total Postage and Fees \$

Sent To Joel M. Wigley
1502 N. Missouri Avenue
Roswell, NM 88201

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

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

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
- 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:

Colgate Production, LLC
306 West Wall Street
Midland, TX 79701



9590 9402 2691 6351 9020 15

2. Article Number 7017 2680 0000 1773 0702

(over \$500)

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery 7/2/18
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

Domestic Return Receipt

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:

Betty Read Young
1311 W. Third Street
Roswell, NM 88201



9590 9402 2691 6351 9019 88

2. Article 1 7017 2680 0000 1773 0788

(over \$500)

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

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Certified Mail Fee

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

Postage

Total Postage and Fees

Sent To Betty Read Young
1311 W. Third Street
Roswell, NM 88201

City, State, ZIP+4[®]

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

See Reverse for Instructions

Postmark
Here

COMPLETE THIS SECTION ON DELIVERY

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

- 3. Service Type
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Return Receipt for Merchandise
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

Delivery

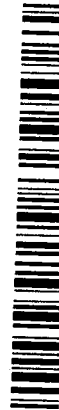
Domestic Return Receipt

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:

Lincoln Oil & Gas, LLC
701 Three Cross
Roswell, NM 88201



9590 9402 2691 6351 9019 88

2. Article Num

7017 2680 0000 1773 0733

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

Domestic Return Receipt

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Certified Mail Fee

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

Postage

Total Postage and Fees

Sent To Lincoln Oil & Gas, LLC
701 Three Cross
Street and Apt. No., or P.O. Box Roswell, NM 88201

City, State, ZIP+4[®]

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

See Reverse for Instructions

Postmark
Here

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:

V.C. Desmond Trust, 1st National Bank, Trustee
P.O. Box 1857
Roswell, NM 88202



9590 9402 2691 6351 9018 41

2. **7017 2680 0000 1773 0870**

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X Pamela Gray** ☐ Agent ☐ Addressee
B. Received by (Printed Name) **PAULEA GRAY** C. Date of Delivery

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

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Adult Signature
 - ☐ Registered Mail™
 - ☐ Certified Mail®
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Restricted Delivery

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

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

Postage

Total Postage and Fees

Sent To V.C. Desmond Trust, 1st National Bank, Trustee
P.O. Box 1857
Roswell, NM 88202
City, State, ZIP+4®

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

See Reverse for Instructions

Laura K. Read, LLC
1217 W. Third Street
Roswell, NM 88201

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:



9590 9402 2691 6351 9018 96

2. Article Number **7017 2680 0000 1773 0825**

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

Domestic Return Receipt

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

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

Postage

Total Postage and Fees

Sent To Laura K. Read, LLC
1217 W. Third Street
Roswell, NM 88201
City, State, ZIP+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X Laura K. Read** ☐ Agent ☐ Addressee
B. Received by (Printed Name) C. Date of Delivery

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

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Adult Signature
 - ☐ Registered Mail™
 - ☐ Certified Mail®
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Restricted Delivery

Insured Mail Restricted Delivery (over \$500)

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Reserve Management Inc.
1127 Judson Road
#126
Street and Apt. No., or P.O. Longview, TX 75601
City, State, ZIP+4[®]
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

9590 9402 2691 6351 9018 72

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
B. Received by (Printed Name) Davis, Lynn C. Date of Delivery 7/30/15
D. Is delivery address different from item 1? ☒ Yes ☐ No
If YES, enter delivery address below:

American Shale Energy, LLC
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098



9590 9402 2691 6351 9018 72

2. Article Number 7017 2680 0000 1773 0764
PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To American Shale Energy, LLC
2929 Buffalo Speedway
Suite 2106
Street and Apt. No., or P.O. Box Houston, TX 77098
City, State, ZIP+4[®]
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

9590 9402 2691 6351 9018 72

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:

Reserve Management Inc.
1127 Judson Road
#126
Longview, TX 75601



9590 9402 2691 6351 9018 72

2. Article Number 7017 2680 0000 1773 0856
PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
B. Received by (Printed Name) Jill Pickett C. Date of Delivery 7-5
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Restricted Delivery
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Judy Scisson Ferreri
3118 Timber Lane
Verona, WI 53593



9590 9402 2691 6351 9019 95

2. Article Number 7017 2680 0000 1773 0726

☐ Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

172

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee

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

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

3. Service Type
- ☐ Adult Signature
 - ☐ Registered Mail™
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery

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

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

OFFICIAL USE

Certified Mail Fee

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

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

Postmark
Here

Total Postage and Fees

Sent To Sharron S. Trollinger
6026 Meadowcreek Drive
Dallas, TX 75248
Street and Apt. No., or PO
City, State, ZIP+4®

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

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

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

OFFICIAL USE

Certified Mail Fee

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

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

Postmark
Here

Total Postage and Fees

Sent To Judy Scisson Ferreri
3118 Timber Lane
Verona, WI 53593
Street and Apt. No., or PO
City, State, ZIP+4®

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

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:

Sharron S. Trollinger
6026 Meadowcreek Drive
Dallas, TX 75248



9590 9402 2691 6351 9019 64

2. Article Number 7017 2680 0000 1773 0757

☐ Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

172

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

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

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

3. Service Type
- ☐ Adult Signature
 - ☐ Registered Mail™
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ 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:

Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130



9590 9402 2691 6351 9020 39

7017 2680 0000 1773 0687

2. Article Number
- ☐ Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

122

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Adult Signature
B. Received by (Printed Name) William Bernhardt
C. Date of Delivery 7/11/15

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

3. Service Type
- ☐ Priority Mail Express®
☐ Adult Signature
☒ Registered Mail™
☐ Certified Mail®
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Restricted Delivery

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail OnlyFor delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee

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

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

Postage

Postmark
Here

Total Postage and Fees

Sent To Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130

City, State, Zip+4®

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

See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail OnlyFor delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee

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

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

Postage

Total Postage and Fees

Sent To Carolyn R. Beall
P.O. Box 3098
Midland, TX 79702

City, State, Zip+4®

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

See Reverse for Instructions

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:

Carolyn R. Beall
P.O. Box 3098
Midland, TX 79702



9590 9402 2691 6351 9019 26

2. Article Number

7017 2680 0000 1773 0795

(over \$500)

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

Domestic Return Receipt

122

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Carolyn R. Beall ☐ Agent ☐ Addressee
- B. Received by (Printed Name) Carolyn R. Beall C. Date of Delivery 7/11/15
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

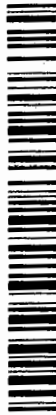
very

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:

OXY USA Inc.
5 Greenway Plaza
Suite 110
Houston, TX 77046



9590 9402 2691 6351 9019 71

2. Article Number (Transfer from front)

7017 2680 0000 1773 0740

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

122

Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee

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

Total Postage and Fees

Sent To OXY USA Inc.

5 Greenway Plaza
Suite 110

Street and Apt. No., or PO Box Houston, TX 77046

City, State, Zip+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

- ☒ Agent
- ☐ Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

1578

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

- 3. Service Type**
- ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Certified Mail Restricted Delivery Merchandise
 - ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Registered Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery
 - ☐ Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

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:

Jack C. Holland
180 Mooring Buoy
Hilton Head, SC 29928



9590 9402 2691 6351 9020 08

2. Article Number

7017 2680 0000 1773 0719

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

122

Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee

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

Total Postage and Fees

Sent To Jack C. Holland

180 Mooring Buoy
Hilton Head, SC 29928

Street and Apt. No., or PO

City, State, Zip+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

- ☒ Agent
- ☐ Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

8102 9-11

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

- 3. Service Type**
- ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Certified Mail Restricted Delivery Merchandise
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Registered Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Turner Royalties, LLC
3232 W. Britton Rd.
Suite 200
Oklahoma City, OK 73102



9590 9402 2691 6351 9019 40

2. Article

7017 2680 0000 1773 0771

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

122

Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee

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

Postage

Total Postage and Fees

Sent To
Turner Royalties, LLC
3232 W. Britton Rd.
Suite 200
Oklahoma City, OK 73102

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

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

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

73120

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

Domestic Return Receipt

122

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:

Virginia A. Desmond c/o First American Bank
P.O. Box 1857
Roswell, NM 88202



9590 9402 2691 6351 9020 46

2. A

7017 2680 0000 1773 0672

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

122

Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee

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

Postage

Total Postage and Fees

Sent To
Virginia A. Desmond c/o First American Bank
P.O. Box 1857
Roswell, NM 88202

Street and Apt. No., or PO Box

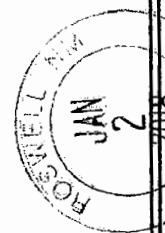
City, State, ZIP+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

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



3. Service Type
☐ Priority Mail Express®
☐ Adult Signature
☐ Registered Mail™
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Texas A&M Foundation (Remainderman)
401 George Bush Drive
College Station, TX 77840



9590 9402 2691 6351 9018 58

2. Article Number

7017 2680 0000 1773 0863

☐ Insured Mail Restricted Delivery (over \$500)

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

122

Domestic Return Receipt

U.S. Postal ServiceTM
CERTIFIED MAIL® RECEIPT
Domestic Mail OnlyFor delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee

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

Postage

Total Postage and Fees

Sent To
Texas A&M Foundation (Remainderman)
401 George Bush Drive
College Station, TX 77840
City, State, ZIP+4®

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
B. Received by (Printed Name) DIANNE HAYS Date of Delivery 07/21/18
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express®
☐ Registered MailTM
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Collect on Delivery
☐ Restricted Delivery
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

2. Article Number

7017 2680 0000 1773 0863

☐ Insured Mail Restricted Delivery (over \$500)

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

122

Domestic Return Receipt

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:

George Phillips Huey, Jr. (Life Estate)
5850 E. Lovers Lane
#315
Dallas, TX 75206



9590 9402 2691 6351 9019 19

2. Article Number

7017 2680 0000 1773 0801

☐ Insured Mail Restricted Delivery (over \$500)

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

122

Domestic Return Receipt

U.S. Postal ServiceTM
CERTIFIED MAIL® RECEIPT
Domestic Mail OnlyFor delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee

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

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

Postage

Total Postage and Fees

Sent To

George Phillips Huey, Jr. (Life Estate)

5850 E. Lovers Lane

#315

Dallas, TX 75206

City, State, ZIP+4®

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
B. Received by (Printed Name) George Phillips Huey, Jr. C. Date of Delivery 7/21/18
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express®
☐ Registered MailTM
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Signature ConfirmationTM
☐ 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:

Straight Profit, Inc.
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098



9590 9402 2691 6351 9018 65

2. Article Number (Minimum 13 digits)
7017 2680 0000 1773 0849
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☒ Addressee
B. Received by (Printed Name)
James Lagerman
C. Date of Delivery
1/13/2017
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

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

Domestic Return Receipt

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

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

OFFICIAL USE

Certified Mail Fee		Postmark Here	
Extra Services & Fees (check box, add fee as appropriate)			
☐ Return Receipt (hardcopy)	\$		
☐ Return Receipt (electronic)	\$		
☐ Certified Mail Restricted Delivery	\$		
☐ Adult Signature Required	\$		
☐ Adult Signature Restricted Delivery	\$		
Postage			
Total Postage and Fees			
Sent To		Straight Profit, Inc.	
		2929 Buffalo Speedway	
Street and Apt. No., or P.O. Box		Suite 2106	
City, State, ZIP+4®		Houston, TX 77098	

U.S. Postal ServiceTM
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee		Postmark Here	
\$			
Extra Services & Fees (check box, add fee as appropriate)			
☐ Return Receipt (hardcopy)	\$		
☐ Return Receipt (electronic)	\$		
☐ Certified Mail Restricted Delivery	\$		
☐ Adult Signature Required	\$		
☐ Adult Signature Restricted Delivery	\$		
Postage			
\$			
Total Postage and Fees		Buchholz Oil & Gas Co.	
\$		1201 Elm Street	
Sent To		#4300	
Street and Apt. No., or P.O. #		Dallas, TX 75270	
City, State, ZIP+4®			
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions			

7017 2102 0892 0000 1723 0690

CERTIFIED MAIL RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

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

Postage

Total Postage and Fees

Sent To Nancy Peacock Mackey

4818 S. Zuni Avenue

Tulsa, OK 74105

Street and Apt. No., or PO Box

City, State, Zip+4

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

2680 6227 0000 1773 0832

Postmark
Here

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:

Nancy Peacock Mackey
4818 S. Zuni Avenue
Tulsa, OK 74105



9590 9402 2691 6351 9018 89

2. Article N

7017 2680 0000 1773 0832

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent
☐ Addressee

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

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

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

Domestic Return Receipt

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

**APPLICATION OF MATADOR PRODUCTION
COMPANY FOR A NON-STANDARD SPACING
AND PRORATION UNIT AND COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.**

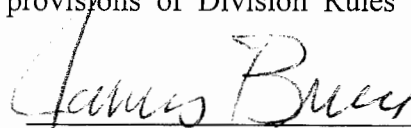
Case No. 15928

AFFIDAVIT OF NOTICE

COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)

James Bruce, being duly sworn upon his oath, deposes and states:

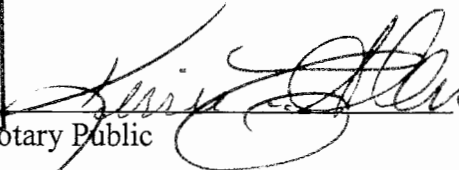
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Matador Production Company.
3. Matador Production Company has conducted a good faith, diligent effort to find the names and correct addresses of the offset operators or interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the offsets, at their last known addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.


James Bruce

SUBSCRIBED AND SWORN TO before me this 16th day of February, 2018 by James Bruce.

My Commission Expires:




Notary Public

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruce@aol.com

February 1, 2018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

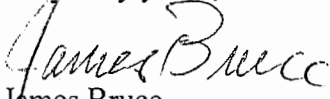
Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard spacing and proration unit, *etc.*, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the S½N½ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 22, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. **The Division requires applicant to notify offset operators or working interest owners of the non-standard unit portion of the application, and you offset the well unit.** You are not required to attend this hearing, but you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, February 15, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Matador Production Company

ATTACHMENT

A

EXHIBIT A

Devon Energy Production Company, L.P.
333 West Sheridan
Oklahoma City, Oklahoma 73102

Mewbourne Oil Company
Suite 1020
500 West Texas
Midland, Texas 79701

Alfred Rodriguez
7777 Forest Lane
Suite C-236
Dallas, TX 75230

Estate of Ralph E. Peacock
7918B East 40th Street
Tulsa, OK 74145

H.W. Allen Company, LLC
4835 South Peoria Avenue
Tulsa, OK 74105

Sharron S. Trollinger,
Trustee of the Sharron Stone Trollinger Trust
6026 Meadowcreek Drive
Dallas, TX 75248

Westway Petro One
6440 N. Central Expressway
Suite 615
Dallas, TX 75206

William V. Palmer, LLC
c/o Shelley Palmer 1004 Carter Avenue
Lovington, NM 88260

Turner Royalties, LLC
3 Brass Horse Lane
Santa Fe, New Mexico 87508

Turner Royalties, LLC
16A Brass Horse Road
Santa Fe, New Mexico 87505

CSA Petroleum Corporation
P.O. Box 318
Hunt, TX 78024

Donald E. Richter et ux, Glenda L. Richter
#9 Willow Wood
Dallas, TX 75205

Highland (Texas) Energy Company
700 N Pearl Street, Suite 360
RPR Tower, LB 305
Dallas, TX 75201

Watson Properties, LLC
3905 Futura Drive
Roswell, NM 88201

Westway Petro Two
6440 N. Central Expressway
Suite 615
Dallas, TX 75206

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:

Turner Royalties, LLC
16A Brass Horse Road
Santa Fe, New Mexico 87508



9590 9402 3019 7124 7204 39

2. Article Number (Transcribe from mailpiece label)
7017 2680 0000 1774 6277

(OVER \$500)

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

Domestic Return Receipt

122

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
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For delivery information, visit our website at www.usps.com.

OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To \$
Street and Apt. No., or P.O. Box
Santa Fe, New Mexico 87508
City, State, ZIP+4[®]

Postmark
Here

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

See Reverse for Instructions

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:

Turner Royalties, LLC
16A Brass Horse Road
Santa Fe, New Mexico 87505



9590 9402 3019 7124 7204 46

2. Article Number (Transcribe from mailpiece label)

7017 2680 0000 1774 6277

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

Domestic Return Receipt

122

COMPLETE THIS SECTION ON DELIVERY

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

FEB 07 2018

- 3. Service Type ☐ Priority Mail Express[®] ☐ Registered MailTM ☐ Registered Mail Restricted Delivery ☐ Certified Mail[®] ☐ Return Receipt for Merchandise ☐ Signature ConfirmationTM ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

122

COMPLETE THIS SECTION ON DELIVERY

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

FEB 07 2018

- 3. Service Type ☐ Priority Mail Express[®] ☐ Registered MailTM ☐ Registered Mail Restricted Delivery ☐ Certified Mail[®] ☐ Return Receipt for Merchandise ☐ Signature ConfirmationTM ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

122

U.S. Postal ServiceTM
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	
\$	
Total Postage and Fees	
\$	
Sent To	Donald E. Richter et ux, Glenda L. Richter
Street and Apt. No.,	#9 Willow Wood
	Dallas, TX 75205
City, State, ZIP+4®	

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

U.S. Postal ServiceTM
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OFFICIAL USE

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	
\$	
Total Postage and Fees	
\$	
Sent To	CSA Petroleum Corporation
Street and Apt. No., or P.O. Box	P.O. Box 318
	Hunt, TX 78024
City, State, ZIP+4®	

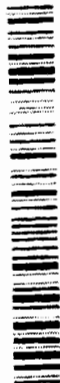
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

Donald E. Richter et ux, Glenda L. Richter
#9 Willow Wood
Dallas, TX 75205



9590 9402 3019 7124 7204 60

2. Article Number (transfer from service label)

7017 2680 0000 1774 6291

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature	☐ Agent
B. Received by (Printed Name)	☐ Addressee
C. Date of Delivery	7-8-12
D. Is delivery address different from item 1? If YES, enter delivery address below:	☐ Yes ☐ No

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

CSA Petroleum Corporation
P.O. Box 318
Hunt, TX 78024



9590 9402 3019 7124 7204 53

2. Article Number (transfer from service label)

7017 2680 0000 1774 6284

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature	☐ Agent
B. Received by (Printed Name)	☐ Addressee
C. Date of Delivery	7-8-12
D. Is delivery address different from item 1? If YES, enter delivery address below:	☐ Yes ☐ No

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

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OFFICIAL USE

Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	
Total Postage and Fees	
Sent To	Watson Properties, LLC
	3905 Futura Drive
Street and Apt. No.	Roswell, NM 88201
City, State, Zip+4 [®]	

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

4TE9 4227 0000 0892 2702

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
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OFFICIAL USE

Certified Mail Fee	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	
Total Postage and Fees	
Sent To	Highland (Texas) Energy Company
	700 N Pearl Street, Suite 360
Street and Apt. No., 1	RPR Tower, LB 305
City, State, Zip+4 [®]	Dallas, TX 75201

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

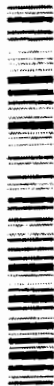
2DE9 4227 0000 0892 2702

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:

Watson Properties, LLC
3905 Futura Drive
Roswell, NM 88201



9590 9402 3452 7275 9512 88

2. PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature	☐ Agent
B. Received by (Printed Name)	☐ Addressee
C. Date of Delivery	
D. Is delivery different from item 1? ☐ Yes	
If YES, enter delivery address below: ☐ No	
3. Service Type	
☐ Adult Signature	☐ Priority Mail Express [®]
☐ Certified Mail [®]	☐ Registered Mail [™]
☐ Collect on Delivery	☐ Registered Mail Restricted Delivery
☐ Collect on Delivery Restricted Delivery	☐ Return Receipt for Merchandise
☐ Signature Confirmation [™]	☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal ServiceTM

CERTIFIED MAIL[®] RECEIPT

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OFFICIAL USE

Certified Mail Fee

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

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

Postage

Total Postage and Fees

Sent To Devon Energy Production Company, L.P.

333 West Sheridan

Oklahoma City, Oklahoma 73102

Street and Apt. No., or

City, State, ZIP+4[®]

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

U.S. Postal ServiceTM

CERTIFIED MAIL[®] RECEIPT

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

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

Postage

Total Postage and Fees

Sent To Westway Petro Two

6440 N. Central Expressway

Dallas, TX 75206

Street and Apt. No., or

City, State, ZIP+4[®]

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

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:

Devon Energy Production Company, L.P.
333 West Sheridan
Oklahoma City, Oklahoma 73102



9590 9402 3452 7275 9513 01

2. Article

7017 2680 0000 1773 1020

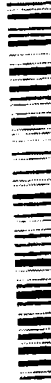
PS Form 3811, July 2015 PSN 7530-02-000-9053

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:

Westway Petro Two
6440 N. Central Expressway
Suite 615
Dallas, TX 75206



9590 9402 3452 7275 9512 95

2. Article

7017 2680 0000 1774 7243

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent

☐ Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

- 3. Service Type
 - ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail
 - ☐ Certified Mail Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Registered Mail[®]
 - ☐ Registered Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature ConfirmationTM
 - ☐ Signature Confirmation Restricted Delivery
 - ☐ Priority Mail Express[®]

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent

☐ Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

- 3. Service Type
 - ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail
 - ☐ Certified Mail Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Registered Mail[®]
 - ☐ Registered Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature ConfirmationTM
 - ☐ Signature Confirmation Restricted Delivery
 - ☐ Priority Mail Express[®]

Domestic Return Receipt

U.S. Postal ServiceTM

CERTIFIED MAIL[®] RECEIPT

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OFFICIAL USE

Certified Mail Fee

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

☐ Return Receipt (hardcopy)

☐ Return Receipt (electronic)

☐ Certified Mail Restricted Delivery

☐ Adult Signature Required

☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees

Sent To

Alfred Rodriguez

7777 Forest Lane

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

Suite C-236

Dallas, TX 75230

City, State, ZIP+4[®]

Postmark Here

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

U.S. Postal ServiceTM

CERTIFIED MAIL[®] RECEIPT

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

☐ Return Receipt (hardcopy)

☐ Return Receipt (electronic)

☐ Certified Mail Restricted Delivery

☐ Adult Signature Required

☐ Adult Signature Restricted Delivery

Postage

Total Postage and Fees

Sent To

Mewbourne Oil Company

Suite 1020

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

500 West Texas

Midland, Texas 79701

City, State, ZIP+4[®]

Postmark Here

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

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
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For delivery information, visit our website at www.usps.com.

OFFICIAL USE

Certified Mail Fee

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

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

Postage

Total Postage and Fees

Sent To H.W. Allen Company, LLC

4835 South Peoria Avenue

Street and Apt. No., or Tulsa, OK 74105

City, State, Zip+4[®]

Postmark
Here

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

See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
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OFFICIAL USE

Certified Mail Fee

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

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

Postage

Total Postage and Fees

Sent To Estate of Ralph E. Peacock

79188 East 40th Street

Street and Apt. No., or Tulsa, OK 74145

City, State, Zip+4[®]

Postmark
Here

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

See Reverse for Instructions

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:

H.W. Allen Company, LLC
4835 South Peoria Avenue
Tulsa, OK 74105



9590 9402 3019 7124 7203 92

2. Article Number (Transfer from carrier label)

7017 2680 0000 1774 6222

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

ed Delivery

Domestic Return Receipt

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee
\$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Westway Petro One
6440 N. Central Expressway
Suite 615
Dallas, TX 75206
Street and Apt. No., or P.O. Box
City, State, ZIP+4[®]

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

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee
\$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Sharon S. Trollinger,
Trustee of the Sharon Stone Trollinger Trust
6026 Meadowcreek Drive
Dallas, TX 75248
Street and Apt. No., or P.O. Box
City, State, ZIP+4[®]

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

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:

Westway Petro One
6440 N. Central Expressway
Suite 615
Dallas, TX 75206



9590 9402 3019 7124 7204 15

2. Article No.

7017 2680 0000 1774 6245
PS Form 3811, July 2015 PSN 7530-02-000-9053

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:

Sharon S. Trollinger,
Trustee of the Sharon Stone Trollinger Trust
6026 Meadowcreek Drive
Dallas, TX 75248



9590 9402 3019 7124 7204 08

2. Article Number (Transfer from service label)

7017 2680 0000 1774 6239
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] Agent ☒ Addressee ☐
B. Received by (Printed Name) William Road C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
if YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] Agent ☐ Addressee ☐
B. Received by (Printed Name) Sharon Trollinger C. Date of Delivery 2/8/18
D. Is delivery address different from item 1? ☐ Yes
if YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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

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

OFFICIAL USE

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

Postmark
Here

Sent To	William V. Palmer, LLC
Street and Apt. No., or Livingston, NM 88260	c/o Shelley Palmer 1004 Carter Avenue
City, State, ZIP+4®	

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

70127 2642 0000 12224 553

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 10-C
Submitted by:
MATADOR PRODUCTION COMPANY
Hearing Date: February 22, 2018

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

February 1, 2018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Overriding royalty interest owners on Exhibit A

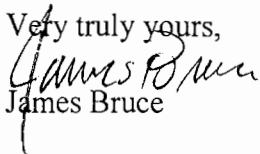
Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard spacing and proration unit and compulsory pooling, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the S½N½ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 22, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, **but as an owner of an overriding royalty interest that may be affected by this application, you may appear and present testimony.** Your interest is non-cost bearing, but the OCD has requested operators to pool overriding royalty interest owners. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, February 15, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Matador Production Company

ATTACHMENT

A

EXHIBIT A

COG Operating LLC
Concho Oil & Gas LLC
600 West Illinois
Midland, Texas 79701

Read & Stevens, LLC
Read & Stevens, Inc.
P.O. Box 1518
Roswell, New Mexico 88202

CBR Oil Properties, LLC
P.O. Box 1518
Roswell, New Mexico 88202

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:

COG Operating LLC
Concho Oil & Gas LLC
600 West Illinois
Midland, Texas 79701



9590 9402 3452 7275 9513 32

2. Article Number (Transfer from service label)

7017 2680 0000 1767 1050

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

Domestic Return Receipt

122

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee

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

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

3. Service Type

☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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

Postage \$ _____

Total Postage and Fees \$ _____

Sent To CBR Oil Properties, LLC
P.O. Box 1518
Roswell, New Mexico 88202

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

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

Postmark
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Certified Mail Fee \$ _____

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

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

Postage \$ _____

Total Postage and Fees \$ _____

Sent To COG Operating LLC
Concho Oil & Gas LLC
600 West Illinois
Midland, Texas 79701

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

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

Postmark
Here

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- 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:

CBR Oil Properties, LLC
P.O. Box 1518
Roswell, New Mexico 88202



9590 9402 3452 7275 9513 18

2

7017 2680 0000 1767 1036

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

Domestic Return Receipt

122

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

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

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

3. Service Type

☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Restricted Delivery

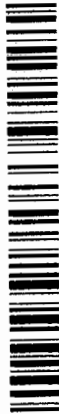
Over \$500

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:

Read & Stevens, LLC
Read & Stevens, Inc.
P.O. Box 1518
Roswell, New Mexico 88202



9590 9402 3452 7275 9513 49

2.

7017 2680 0000 1767 1043

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent
B. Received by (Printed Name) W. NOVAK ☐ Addressee
C. Date of Delivery 5/23/15
D. Is delivery address different from item 1? ☒ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☐ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☐ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |

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

Sent To Read & Stevens, LLC
Read & Stevens, Inc.
P.O. Box 1518
Street and Apt. No., or # Roswell, New Mexico 88202
City, State, ZIP+4®

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

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

**APPLICATION OF MATADOR PRODUCTION
COMPANY FOR A NON-STANDARD SPACING
AND PRORATION UNIT AND COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.**

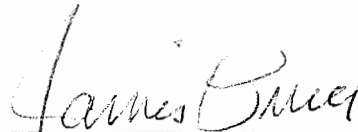
Case No. 15929

AFFIDAVIT OF NOTICE

COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)

James Bruce, being duly sworn upon his oath, deposes and states:

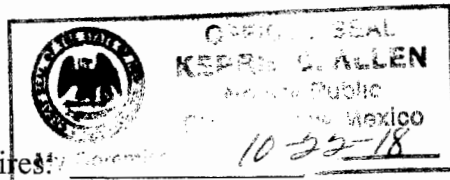
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Matador Production Company.
3. Matador Production Company has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.

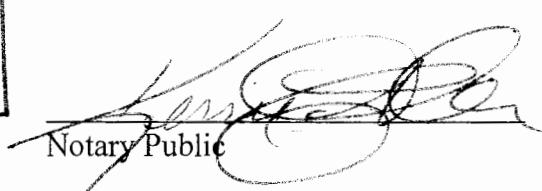


James Bruce

SUBSCRIBED AND SWORN TO before me this 16th day of February, 2018 by
James Bruce.

My Commission Expires:





Notary Public

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

December 22, 2017

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

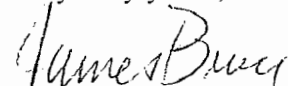
Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard unit and compulsory pooling, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the S½S½ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, January 11, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, January 4, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Matador Production Company

ATTACHMENT

A

Marbob 19 State Com 124H

Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130

Buchholz Oil & Gas Co.
1201 Elm Street
#4300
Dallas, TX 75270

Carolyn R. Beall
P.O. Box 3098
Midland, TX 79702

COG Operating LLC
600 W. Illinois Avenue
Midland, TX 79701

Concho Oil & Gas LLC
600 W. Illinois Avenue
Midland, TX 79701

Catherine Roach Baker
Possible claimant to the Estate of Gerald F. Roach, Deceased
5607 Valley Meadow Lane
Arlington, TX 76013

Lola Roach Kelly
Possible claimant to the Estate of Gerald F. Roach, Deceased
4020 Willow Run Lane
Arlington, TX 76013

Herbert Spencer
811 Clayton
Artesia, NM 88210

Jack C. Holland
180 Mooring Buoy
Hilton Head, SC 29928

John A. Yates
Trustee of Trust Q u/w/o Peggy A. Yates, deceased
105 S. 4th Street
Artesia, NM 97201

Laura K. Read, LLC
1217 W. Third Street
Roswell, NM 88201

Michael W. Kennedy
Possible claimant to the Estate of Faith Kennedy
205 S. Alma Street
Goldsmith, TX 79741

Reserve Management Inc.
1127 Judson Road
#126
Longview, TX 75601

Betty Read Young
1311 W. Third Street
Roswell, NM 88201

Nina Anderson
Possible claimant to the Estate of C. Lee Anderson, Deceased
396 J.B. Copeland Rd.
Benton, KY 42025

Charlene M. Ward
101 South Fourth Street
Artesia, NM 88210

Colgate Production, LLC
306 West Wall Street
Midland, TX 79701

EHW, LLC
101 South Fourth Street
Artesia, NM 88210

Blaine Roach
Possible claimant to the Estate of Gerald F. Roach, Deceased
4001 Rana
Apt. No. 166
Arlington, TX 76013

George Phillips Huey, Jr. (Life Estate)
5850 E. Lovers Lane
#315
Dallas, TX 75206

Simms and Reese Oil Company
811 Clayton
Artesia, NM 88210

James W. Kennedy
Possible claimant to the Estate of Faith Kennedy
1716 E. Crescent Drive
Odessa, TX 79761

Judy Scisson Ferreri
3118 Timber Lane
Verona, WI 53593

Lincoln Oil & Gas, LLC
701 Three Cross
Roswell, NM 88201

Nancy Peacock Mackey
4818 S. Zunis Avenue
Tulsa, OK 74105

EXHIBIT

A

Marbob 19 State Com 124H

Robert E. Ferguson et ux, Rosemary Ferguson
P. O. Drawer 2
Artesia, NM 88210

Sharron S. Trollinger
Trustee of the Sharron Stone Trollinger Trust
6026 Meadowcreek Drive
Dallas, TX 75248

American Shale Energy, LLC
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098

Teresa Burnside
301 Wilcrest
#3605
Houston, TX 77042

Turner Royalties, LLC
3232 W. Britton Rd.
Suite 200
Oklahoma City, OK 73102

Velda Gass
2507 Fontana Street
Odessa, TX 79763

Wanda Porter
P.O. Box 337
Waxahachie, TX 75168

William Kent Kennedy
Possible claimant to the Estate of Faith Kennedy
4810 Valley View
Odessa, TX 79764

Richard D. Kennedy
Possible claimant to the Estate of Faith Kennedy
4821 N. Butterfield Avenue
Odessa, TX 79764

Roxanna Lynne Mills
2816 Castlereach Street
Trophy Club, TX 76262

Straight Profit, Inc.
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098

Sue Howard
1309 Iris Lane
Lewisville, TX 76057

Texas A&M Foundation (Remainderman)
401 George Bush Drive
College Station, TX 77840

V.C. Desmond Trust, 1st National Bank, Trustee
P.O. Box 1857
Roswell, NM 88202

Virginia A. Desmond c/o First American Bank
P.O. Box 1857
Roswell, NM 88202

Ward Investments, Ltd. Co.
P.O. Box 706
Artesia, NM 88210

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:

Jack C. Holland
180 Mooring Buoy
Hilton Head, SC 29928



9590 9402 2691 6351 9012 30

2. Article No.

7017 2680 0000 1773 3895

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

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☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$

Postmark
Here

Total Postage and Fees

Sent To Jack C. Holland
180 Mooring Buoy
Hilton Head, SC 29928

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

City, State, Zip+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Adult Signature
 - ☐ Registered Mail™
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
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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:

Ward Investments, Ltd. Co.
P.O. Box 706
Artesia, NM 88210



9590 9402 2691 6351 9008 44

2. Article Number

7017 2680 0000 1773 0665

(over \$500)

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

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☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$

Postmark
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Total Postage and Fees

Sent To Ward Investments, Ltd. Co.
P.O. Box 706
Artesia, NM 88210

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

City, State, Zip+4®

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

See Reverse for Instructions

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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 Roxanna Lynne Mills
Street and Apt. No., or P.O. Box 2816 Castlereach Street
City, State, Zip+4[®] Trophy Club, TX 76262
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

1. Article Addressed to:
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:
Roxanna Lynne Mills
2816 Castlereach Street
Trophy Club, TX 76262

2. Article Number 7017 2680 0000 1773 3598
PS Form 3811, July 2015 PSN 7530-02-000-9053

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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 V.C. Desmond Trust, 1st National Bank, Trustee
P.O. Box 1857
City, State, Zip+4[®] Roswell, NM 88202
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

1. Article Addressed to:
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:
Roxanna Lynne Mills
2816 Castlereach Street
Trophy Club, TX 76262

2. Article Number 7017 2680 0000 1773 3635
PS Form 3811, July 2015 PSN 7530-02-000-9053

5998 2227 0000 0892 2702

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Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Roxanna Lynne Mills
Street and Apt. No., or P.O. Box 2816 Castlereach Street
City, State, Zip+4[®] Trophy Club, TX 76262
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

1. Article Addressed to:
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:
Roxanna Lynne Mills
2816 Castlereach Street
Trophy Club, TX 76262

2. Article Number 7017 2680 0000 1773 3598
PS Form 3811, July 2015 PSN 7530-02-000-9053

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Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To V.C. Desmond Trust, 1st National Bank, Trustee
P.O. Box 1857
City, State, Zip+4[®] Roswell, NM 88202
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Roxanna Lynne Mills
2816 Castlereach Street
Trophy Club, TX 76262

2. Article Number 7017 2680 0000 1773 3635
PS Form 3811, July 2015 PSN 7530-02-000-9053

5998 2227 0000 0892 2702

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☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Roxanna Lynne Mills
Street and Apt. No., or P.O. Box 2816 Castlereach Street
City, State, Zip+4[®] Trophy Club, TX 76262
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Roxanna Lynne Mills
2816 Castlereach Street
Trophy Club, TX 76262

2. Article Number 7017 2680 0000 1773 3598
PS Form 3811, July 2015 PSN 7530-02-000-9053

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Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To V.C. Desmond Trust, 1st National Bank, Trustee
P.O. Box 1857
City, State, Zip+4[®] Roswell, NM 88202
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Attach this card to the back of the mailpiece, or on the front if space permits.
1. Article Addressed to:
Roxanna Lynne Mills
2816 Castlereach Street
Trophy Club, TX 76262

2. Article Number 7017 2680 0000 1773 3635
PS Form 3811, July 2015 PSN 7530-02-000-9053

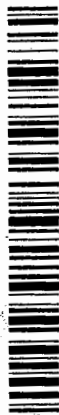
5998 2227 0000 0892 2702

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:

Straight Profit, Inc.
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098



9590 9402 2691 6351 9008 99

2. Article Num.

7017 2680 0000 1773 3628

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

Domestic Return Receipt

127

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Richard D. Kennedy C. Date of Delivery 7/16/2015
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery
 - ☐ Insured Mail Restricted Delivery (over \$500)

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

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

OFFICIAL USE

Certified Mail Fee

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

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

Postage \$

Postmark
Here

Total Postage and Fees

Sent To Straight Profit, Inc.
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098

Street and Apt. No., or PO Box

City, State, ZIP+4®

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

See Reverse for Instructions

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:

Richard D. Kennedy
Possible claimant to the Estate of Faith Kennedy
4821 N. Butterfield Avenue
Odessa, TX 79764



9590 9402 2691 6351 9009 12

2. Article Num.

7017 2680 0000 1773 3642

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

Domestic Return Receipt

127

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Richard D. Kennedy C. Date of Delivery 7/16/2015
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery
 - ☐ Insured Mail Restricted Delivery (over \$500)

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OFFICIAL USE

Certified Mail Fee

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

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

Postage \$

Postmark
Here

Total Postage \$ Richard D. Kennedy
Possible claimant to the Estate of Faith Kennedy
Sent To 4821 N. Butterfield Avenue
Odessa, TX 79764

Street and Apt. No., or PO Box

City, State, ZIP+4®

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

See Reverse for Instructions

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:

Carolyn R. Beall
P.O. Box 3098
Midland, TX 79702



9590 9402 2691 6351 9011 79

2. Article Number () 7017 2680 0000 1773 0924

☐ Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

124

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Carolyn R. Beall
P.O. Box 3098
Midland, TX 79702
Street and Apt. No., or PO Box
City, State, ZIP+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

124

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:

Catherine Roach Baker
Possible claimant to the Estate of Gerald F. Roach, Deceased
5607 Valley Meadow Lane
Arlington, TX 76013



9590 9402 2691 6351 9012 09

2. Article Number () 7017 2680 0000 1773 0924

☐ Insured Mail Restricted Delivery (over \$500)

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

Domestic Return Receipt

124

**U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Catherine Roach Baker
Possible claimant to the Estate of Gerald F. Roach, Deceased
5607 Valley Meadow Lane
Arlington, TX 76013
Street and Apt. No., or PO Box
City, State, ZIP+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

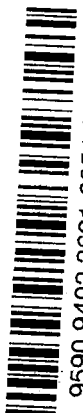
124

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:

James W. Kennedy
Possible claimant to the Estate of Faith Kennedy
1716 E. Crescent Drive
Odessa, TX 79761



9590 9402 2691 6351 9010 32

7017 2680 0000 1773 3765

2. Article No.

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

Domestic Return Receipt

U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT[®] Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee

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

Postmark
Here

Postage

Total Postage and Fees

Sent To

James W. Kennedy
Possible claimant to the Estate of Faith Kennedy
1716 E. Crescent Drive
Odessa, TX 79761

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

City, State, ZIP+4[®]

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature Rhonda L. Kennedy ☐ Agent
 B. Received by (Printed Name) Rhonda L. Kennedy ☐ Addressee
 C. Date of Delivery JAN - 9 2018

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below:



3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

(over 500)

Domestic Return Receipt

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:

American Shale Energy, LLC
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098



9590 9402 2691 6351 9009 74

2. Article No.

7017 2680 0000 1773 3703

(over \$500)

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

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OFFICIAL USE

Certified Mail Fee

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

Postmark
Here

Postage

Total Postage and Fees

Sent To

American Shale Energy, LLC
2929 Buffalo Speedway
Suite 2106
Houston, TX 77098

City, State, ZIP+4[®]

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent
 B. Received by (Printed Name) James W. Kennedy ☐ Addressee
 C. Date of Delivery JAN - 9 2018
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130



9590 9402 2691 6351 9011 55

2. Article Number (Transfer from service label)

7017 2680 0000 1773 0948

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

(over \$500)

Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee

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

Postmark
Here

Total Postage and Fees

Sent To Bernhardt Oil Corporation
12170 Jaycie Circle
Midwest City, OK 73130

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *George Phillips Huey, Jr.* Agent
 B. Received by (Printed Name) C. Date of Delivery

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

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Registered Mail™
 - ☐ Adult Signature Restricted Delivery
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ 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:

George Phillips Huey, Jr. (Life Estate)
5850 E. Lovers Lane
#315
Dallas, TX 75206



9590 9402 2691 6351 9010 56

2. Article Number

7017 2680 0000 1773 3789

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

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OFFICIAL USE

Certified Mail Fee

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

Postmark
Here

Total Postage and Fees

Sent To George Phillips Huey, Jr. (Life Estate)
5850 E. Lovers Lane
#315

Street and Apt. No., or Dallas, TX 75206

City, State, ZIP+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *George Phillips Huey, Jr.* Agent
 B. Received by (Printed Name) C. Date of Delivery

Curtis Swike 1/2/18

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Judy Scisson Ferreri
3118 Timber Lane
Verona, WI 53593



9590 9402 2691 6351 9010 25

2. Article Number

7017 2680 0000 1773 3758

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

(over \$500)

Domestic Return Receipt

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
Domestic Mail OnlyFor delivery information, visit our website at www.usps.com.

OFFICIAL USE

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

Sent To Judy Scisson Ferreri
3118 Timber Lane
Verona, WI 53593

City, State, ZIP+4[®]

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

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

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Nina Anderson
Possible claimant to the Estate of C. Lee Anderson,
396 J.B. Copeland Rd.
Benton, KY 42025



9590 9402 2691 6351 9011 00

2. Article Number

7017 2680 0000 1773 3833

(over \$500)

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Virginia A. Desmond c/o First American Bank
P.O. Box 1857
Roswell, NM 88202



9590 9402 2691 6351 9008 51

2. Article Num

7017 2680 0000 1773 3581

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

124

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
X Pamela Gray ☐ Addressee
B. Received by (Printed Name) **PAMELA GRAY** C. Date of Delivery

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



3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Insured Mail Restricted Delivery (over \$500)

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Colgate Production, LLC
306 West Wall Street
Midland, TX 79701
Street and Apt. No., or P.O. Box
City, State, Zip+4®
Postmark Here
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

6789E 6727 0000 0892 2702

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OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Virginia A. Desmond c/o First American Bank
P.O. Box 1857
Roswell, NM 88202
Street and Apt. No., or P.O. Box
City, State, Zip+4®
Postmark Here
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

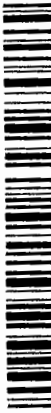
7017 2680 0000 0892 2702

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:

Colgate Production, LLC
306 West Wall Street
Midland, TX 79701



9590 9402 2691 6351 9010 87

2. Article Number

7017 2680 0000 1773 3581

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

124

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
X Kathryn Hansen ☐ Addressee
B. Received by (Printed Name) **KATHRYN HANSEN** C. Date of Delivery **7/2/18**
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery
☐ Insured Mail Restricted Delivery (over \$500)

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:

Blaine Roach
Possible claimant to the Estate of Gerald F. Roach
4001 Rana
Apt. No. 166
Arlington, TX 76013



9590 9402 2691 6351 9010 63

2. Article Number (Transfer from PSN)

7017 2680 0000 1773 3796

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

Domestic Return Receipt

124

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OFFICIAL USE

Certified Mail Fee \$

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

Postage \$

Total Postage and Fees \$

Sent To Blaine Roach

Possible claimant to the Estate of Gerald F. Roach
4001 Rana

Apt. No. 166

Arlington, TX 76013

City, State, ZIP+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ AddresseeB. Received by (Printed Name) Vicki V. Roach C. Date of Delivery 7/31D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Insured Mail Restricted Delivery (over \$500)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

124

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:

Sharron S. Trolinger
Trustee of the Sharron Stone Trolinger Trust
6026 Meadowcreek Drive
Dallas, TX 75248



9590 9402 2691 6351 9009 81

2. Article Number

7017 2680 0000 1773 3710

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

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OFFICIAL USE

Certified Mail Fee \$

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

Postage \$

Total Postage and Fees \$

Sent To

Sharron S. Trolinger

Street and Apt. No. Trustee of the Sharron Stone Trolinger Trust

City, State, ZIP+4® 6026 Meadowcreek Drive

Dallas, TX 75248

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

See Reverse for Instructions

Postmark
Here

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent ☐ AddresseeB. Received by (Printed Name) Sharron Trolinger Date of Delivery 7/31/17D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

y

Domestic Return Receipt

124

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:

Simms and Reese Oil Company
811 Clayton
Artesia, NM 88210



9590 9402 2691 6351 9010 49

2. Article Number

7017 2680 0000

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

174

Domestic Return Receipt

Insured mail restricted delivery
(over \$500)

1773 3772

3. Service Type

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

Delivery

3. Service Type

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

Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Herbert Spencer*
B. Received by (Printed Name)
C. Date of Delivery
11-2-18

Agent

Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

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

Delivery

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail OnlyFor delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

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

Postage

Total Postage and Fees

Sent To

Simms and Reese Oil Company
811 Clayton
Artesia, NM 88210

City, State, ZIP+4®

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

See Reverse for Instructions

Postmark
Here

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:

Herbert Spencer
811 Clayton
Artesia, NM 88210



9590 9402 2691 6351 9012 23

2. Article N

7017 2680 0000 1773 3901

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

174

Delivery

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent

Addressee

C. Date of Delivery

11-2-18

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

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

Delivery

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail OnlyFor delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

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

Postage

Total Postage and Fees

Sent To

Herbert Spencer
811 Clayton
Artesia, NM 88210

City, State, ZIP+4®

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

See Reverse for Instructions

Postmark
Here

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

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

Sent To William Kent Kennedy
Possible claimant to the Estate of Faith Kennedy
Street and Apt. No. 4810 Valley View
City, State, Zip+4[®] Odessa, TX 79764
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

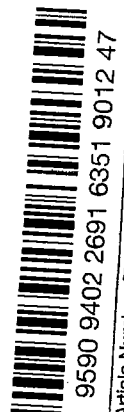
659E 2221 0000 0992 2102

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:

John A. Yates
Trustee of Trust Q u/w/o Peggy A. Yates, deceased
105 S. 4th Street
Artesia, NM 87201



9590 9402 2691 6351 9012 47

2. Article Number (Transfer from service label)

7017 2680 0000 1773 3888
PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

3. Service Type
- ☐ Priority Mail Express[®]
 - ☐ Adult Signature
 - ☒ Registered Mail[™]
 - ☐ Certified Mail[®]
 - ☐ Collect on Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation[™]
 - ☐ Signature Confirmation Restricted Delivery

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

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

Sent To John A. Yates
Trustee of Trust Q u/w/o Peggy A. Yates, deceased
Street and Apt. No., or PO Box No. 105 S. 4th Street
City, State, Zip+4[®] Artesia, NM 87201

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

7017 2680 0000 1773 3888

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:

William Kent Kennedy
Possible claimant to the Estate of Faith Kennedy
4810 Valley View
Odessa, TX 79764



9590 9402 2691 6351 9009 29

2. Article Number

7017 2680 0000 1773 3659
PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

3. Service Type
- ☐ Priority Mail Express[®]
 - ☐ Adult Signature
 - ☒ Registered Mail[™]
 - ☐ Certified Mail[®]
 - ☐ Collect on Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation[™]
 - ☐ Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

A. Signature X *William Kent Kennedy* ☐ Agent ☐ Addressee
B. Received by (Printed Name) C. Date of Delivery 1/3/18
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

Domestic Return Receipt

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:

Reserve Management Inc.
1127 Judson Road
#126
Longview, TX 75601



9590 9402 2691 6351 9011 24

2. Article No.

7017 2680 0000 1773 3857

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

124

Domestic Return Receipt

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Adult Signature
 - ☐ Registered Mail™
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery
 - ☐ Insured Mail Restricted Delivery (over \$500)

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) _____
- C. Date of Delivery 1-3
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

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

OFFICIAL USE

Certified Mail Fee

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

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

Postmark
Here

Total Postage and Fees \$

Sent To

Laura K. Read, LLC
1217 W. Third Street
Roswell, NM 88201

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

See Reverse for Instructions

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

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

OFFICIAL USE

Certified Mail Fee

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

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

Postmark
Here

Total Postage and Fees \$

Sent To Reserve Management Inc.

1127 Judson Road

#126

Longview, TX 75601

City, State, ZIP+4®

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

See Reverse for Instructions

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:

Laura K. Read, LLC
1217 W. Third Street
Roswell, NM 88201



9590 9402 2691 6351 9011 48

2. Article Number (Transfer from certified mail)

7017 2680 0000 1773 3871

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

124

Domestic Return Receipt

3. Service Type
- ☐ Priority Mail Express®
 - ☐ Adult Signature
 - ☐ Registered Mail™
 - ☐ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation™
 - ☐ Signature Confirmation Restricted Delivery

COMPLETE THIS SECTION ON DELIVERY

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

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.

Article Addressed to:

Texas A&M Foundation (Remainderman)
401 George Bush Drive
College Station, TX 77840



9590 9402 2691 6351 9008 75

Article 7017 2680 0000 1773 3604

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

Domestic Return Receipt

127

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

Total Postage and Fees \$
 Sent To Texas A&M Foundation (Remainderman)
 401 George Bush Drive
 College Station, TX 77840
 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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) DIANNE MARSO C. Date of Delivery 08-18
- D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☒ Certified Mail[®]
☐ Return Receipt for Merchandise
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

Insured Mail Restricted Delivery (over \$500)

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:

Wanda Porter
P.O. Box 337
Waxahachie, TX 75168



9590 9402 2691 6351 9009 36

Article 7017 2680 0000 1773 3666

(over \$500)

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

Domestic Return Receipt

127

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

Total Postage and Fees \$

Sent To Wanda Porter
P.O. Box 337
Street and Apt. No., Waxahachie, TX 75168
City, State, Zip+4[®]

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Wanda Porter C. Date of Delivery 08-18
- D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☒ Certified Mail[®]
☐ Return Receipt for Merchandise
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

127

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:

Lola Roach Kelly
Possible claimant to the Estate of Gerald F. Roach, Deceased
4020 Willow Run Lane
Arlington, TX 76013



9590 9402 2691 6351 9012 16

2. Article Num 7017 2680 0000 1773 0887

Insured (over \$500)

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

Domestic Return Receipt

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

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

OFFICIAL USE

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

Sent To

Possible claimant to the Estate of Gerald F. Roach, Deceased
4020 Willow Run Lane
Arlington, TX 76013

Street and Apt. No., or

City, State, ZIP+4®

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

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

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

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

Domestic Return Receipt

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:

Velda Gass
2507 Fontana Street
Odessa, TX 79763



9590 9402 2691 6351 9009 43

2. Article

7017 2680 0000 1773 3673

(over \$500)

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

Domestic Return Receipt

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

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

OFFICIAL USE

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

Sent To

Velda Gass

2507 Fontana Street

Odessa, TX 79763

City, State, ZIP+4®

See Reverse for Instructions

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

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

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

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

1 Delivery

(over \$500)

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

Domestic Return Receipt

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:

COG Operating LLC
600 W. Illinois Avenue
Midland, TX 79701



9590 9402 2691 6351 9011 86

2. Article Number (Transfer from service label)

7017 2680 0000 1773 0917

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

Domestic Return Receipt

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

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

Postmark
Here

Sent To
COG Operating LLC
600 W. Illinois Avenue
Midland, TX 79701
City, State, ZIP+4[®]

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

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Charlene M. Ward C. Date of Delivery 12-18
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

127

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:

Charlene M. Ward
101 South Fourth Street
Artesia, NM 88210



9590 9402 2691 6351 9010 94

2. Article

7017 2680 0000 1773 3826

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

Domestic Return Receipt

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

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

Sent To
Charlene M. Ward
101 South Fourth Street
Artesia, NM 88210
City, State, ZIP+4[®]

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

See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

Postage

Total Postage and Fees

Sent To

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

Lincoln Oil & Gas, LLC
701 Three Cross
Roswell, NM 88201

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

Postmark
Here

7017 2680 0000 0892 2702

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:

EHW, LLC
101 South Fourth Street
Artesia, NM 88210



9590 9402 2691 6351 9010 70

2. Article Number

7017 2680 0000 1773 3802

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

Domestic Return Receipt

124

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

Postage

Total Postage and Fees

Sent To

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

EHW, LLC
101 South Fourth Street
Artesia, NM 88210

Postmark
Here

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:

Lincoln Oil & Gas, LLC
701 Three Cross
Roswell, NM 88201



9590 9402 2691 6351 9010 18

2. Article Number

7017 2680 0000 1773 3741

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

Domestic Return Receipt

124

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
X Valley Budding Agent
- B. Received by (Printed Name)
Valley Budding Addressee
- C. Date of Delivery
7/27/15
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

- 3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature ConfirmationTM
☐ 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:

Betty Read Young
1311 W. Third Street
Roswell, NM 88201



9590 9402 2691 6351 9011 17

2. Article Number (Transfer from service label)
7017 2680 0000 1773 3840
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Betty Read Young ☐ Agent
B. Received by (Printed Name) Betty Read Young ☐ Addressee
C. Date of Delivery 12/18
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

Domestic Return Receipt

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

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

OFFICIAL USE

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

Sent To Betty Read Young
1311 W. Third Street
Roswell, NM 88201
Street and Apt. No., or PO Box No.
City, State, ZIP+4®

Postmark Here

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

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

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

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

Postage

Total Postage and Fees

Sent To Michael W. Kennedy

Possible claimant to the Estate of Faith Kennedy

Street and Apt. 1 205 S. Alma Street

City, State, ZIP+4[®] Goldsmith, TX 79741

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

Postmark
Here

4996 6227 0000 2773 3864

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:

Michael W. Kennedy
Possible claimant to the Estate of Faith Kennedy
205 S. Alma Street
Goldsmith, TX 79741



9590 9402 2691 6351 9011 31

2. Article Number

7017 2680 0000

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent

☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery

☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

1773 3864

Restricted Mail Restricted Delivery (over \$500)

Domestic Return Receipt

127

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
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For delivery information, visit our website at www.usps.com.

OFFICIAL USE

Certified Mail Fee

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

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

Postage

Total Postage and Fees

Sent To Robert E. Ferguson et ux, Rosemary Ferguson
P. O. Drawer 2

Street and Apt. No., C, P.O. Box NM 88210

City, State, ZIP+4[®]

Postmark
Here

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

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:

Robert E. Ferguson et ux, Rosemary Ferguson
P. O. Drawer 2
Artesia, NM 88210



9590 9402 2691 6351 9009 98

Article No.

7017 2680 0000 1773 3727

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent

☐ Addressee

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

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com™.

OFFICIAL USE

Certified Mail Fee

\$ _____

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

☐ Return Receipt (hardcopy) \$ _____

☐ Return Receipt (electronic) \$ _____

☐ Certified Mail Restricted Delivery \$ _____

☐ Adult Signature Required \$ _____

☐ Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Apt. No., or PO Box _____

City, State, ZIP+4® _____

Postmark Here

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

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

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

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

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

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

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

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

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

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

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:

Nancy Peacock Mackey
4818 S. Zuni Avenue
Tulsa, OK 74105



9590 9402 2691 6351 9010 01

2. Article N

7017 2680 0000 1773 3734

(over \$500)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

□ Agent

B. Received by (Printed Name)

□ Addressee

C. Date of Delivery

D. Is delivery address different from item 1? □ Yes □ No

If YES, enter delivery address below:

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

Domestic Return Receipt

Handwritten signature

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

Certified Mail Fee

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

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

Postage

Total Postage and Fees

Sent To Teresa Burnside

301 Wilcrest

#3605

Street and Apt. No., or PO Box Houston, TX 77042

City, State, ZIP+4®

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

See Reverse for Instructions

Postmark
Here

7017 2680 0000 0892 2702

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:

Teresa Burnside
301 Wilcrest
#3605
Houston, TX 77042



9590 9402 2691 6351 9009 67

2. Article Number (Transfer from service label)

7017 2680 0000 1773 3697

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Indicated Delivery

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee		Postmark Here
Extra Services & Fees (check box, add fee as appropriate)		
☐ Return Receipt (hardcopy)	\$	
☐ Return Receipt (electronic)	\$	
☐ Certified Mail Restricted Delivery	\$	
☐ Adult Signature Required	\$	
☐ Adult Signature Restricted Delivery	\$	
Postage		
\$		
Total Postage and Fees		
\$		
Sent To		
Buchholz Oil & Gas Co.		
1201 Elm Street		
M4300		
Street and Apt. No., or PO Box No.		
Dallas, TX 75270		
City, State, ZIP+4 [®]		
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions		

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee		Postmark Here
Extra Services & Fees (check box, add fee as appropriate)		
☐ Return Receipt (hardcopy)	\$	
☐ Return Receipt (electronic)	\$	
☐ Certified Mail Restricted Delivery	\$	
☐ Adult Signature Required	\$	
☐ Adult Signature Restricted Delivery	\$	
Postage		
\$		
Total Postage and Fees		
\$		
Sent To		
Sue Howard		
1309 Iris Lane		
Lewisville, TX 76057		
Street and Apt. No., or PO Box		
City, State, ZIP+4 [®]		
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions		

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

January 31, 2018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

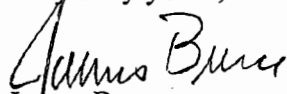
Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard spacing and proration unit and compulsory pooling, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the S½S½ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 22, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, February 15, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Matador Production Company

EXHIBIT A

Turner Royalties, LLC
3 Brass Horse Lane
Santa Fe, New Mexico 87508

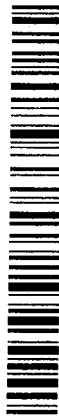
Turner Royalties, LLC
16A Brass Horse Road
Santa Fe, New Mexico 87505

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:

Turner Royalties, LLC
 16A Brass Horse Road
 Santa Fe, New Mexico 87505



9590 9402 3452 7275 9503 59

2. Article Number (Transmit to)
 7017 2680 0000 1767 0978
 PS Form 3811, July 2015 PSN 7530-02-000-9053

M-124

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) C. Date of Delivery
 Leslie A. Turner 1/5/18
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

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

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

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

OFFICIAL USE

Certified Mail Fee

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

Total Postage and Fees

Sent To Turner Royalties, LLC
 16A Brass Horse Road
 Santa Fe, New Mexico 87505
 City, State, Zip+4

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

See Reverse for Instructions

U.S. Postal Service™

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OFFICIAL USE

Certified Mail Fee

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

Total Postage and Fees

Sent To Turner Royalties, LLC
 3 Brass Horse Lane
 Santa Fe, New Mexico 87508
 City, State, Zip+4

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

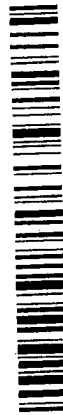
See Reverse for Instructions

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:

Turner Royalties, LLC
 3 Brass Horse Lane
 Santa Fe, New Mexico 87508



9590 9402 3452 7275 9503 42

2. Article Number (Transmit to)

7017 2680 0000 1767 0978

(over 500)

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) C. Date of Delivery
 Leslie A. Turner 1/5/18
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

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

Domestic Return Receipt

M-124

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

**APPLICATION OF MATADOR PRODUCTION
COMPANY FOR A NON-STANDARD SPACING
AND PRORATION UNIT AND COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.**

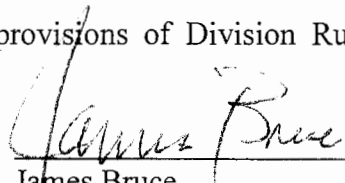
Case No. 15929

AFFIDAVIT OF NOTICE

COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)

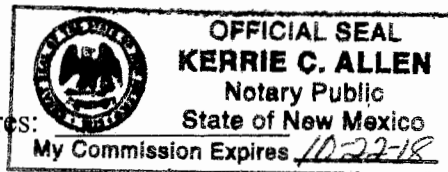
James Bruce, being duly sworn upon his oath, deposes and states:

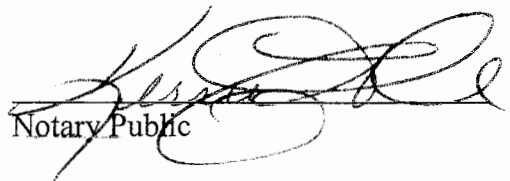
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Matador Production Company.
3. Matador Production Company has conducted a good faith, diligent effort to find the names and correct addresses of the offset operators or interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the offsets, at their last known addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.


James Bruce

SUBSCRIBED AND SWORN TO before me this 16th day of February, 2018 by James Bruce.

My Commission Expires:




Notary Public

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

January 31, 2018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

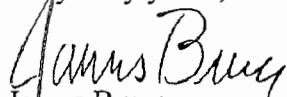
Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard spacing and proration unit, *etc.*, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the S½S½ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 22, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. **The Division requires applicant to notify offset operators or working interest owners of the non-standard unit portion of the application, and you offset the well unit.** You are not required to attend this hearing, but you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, February 15, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Matador Production Company

ATTACHMENT

A

EXHIBIT A

Devon Energy Production Company, L.P.
333 West Sheridan
Oklahoma City, Oklahoma 73102

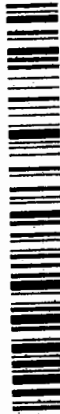
Mewbourne Oil Company
Suite 1020
500 West Texas
Midland, Texas 79701

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:

Mewbourne Oil Company
Suite 1020
500 West Texas
Midland, Texas 79701



9590 9402 3452 7275 9503 35

2. Article Number (Transfer from service label)

7017 2680 0000 1767 0985

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

Domestic Return Receipt

124

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

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

OFFICIAL USE

Certified Mail Fee

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

Total Postage and Fees

Sent To Mewbourne Oil Company
Suite 1020
500 West Texas
Midland, Texas 79701
City, State, Zip+4

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

See Reverse for Instructions

Postmark
Here

COMPLETE THIS SECTION ON DELIVERY

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

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

3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

ated 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:

Devon Energy Production Company, L.P.
333 West Sheridan
Oklahoma City, Oklahoma 73102



9590 9402 3019 7124 7203 54

2. Article Number (Transfer from service label)

7017 2680 0000 1773 1037

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

Domestic Return Receipt

124

COMPLETE THIS SECTION ON DELIVERY

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

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



3. Service Type
☐ Priority Mail Express®
☐ Registered Mail™
☒ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Total \$500

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruce@aol.com

February 1, 2018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Overriding royalty interest owners on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard spacing and proration unit and compulsory pooling, filed with the New Mexico Oil Conservation Division by Matador Production Company, regarding a Bone Spring well in the S½S½ of Section 19, Township 19 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 22, 2018, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, **but as an owner of an overriding royalty interest that may be affected by this application, you may appear and present testimony.** Your interest is non-cost bearing, but the OCD has requested operators to pool overriding royalty interest owners. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, February 15, 2018. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,

James Bruce
James Bruce

Attorney for Matador Production Company



EXHIBIT A

COG Operating LLC
Concho Oil & Gas LLC
600 West Illinois
Midland, Texas 79701

Read & Stevens, LLC
Read & Stevens, Inc.
P.O. Box 1518
Roswell, New Mexico 88202

First Century Oil, Inc.
P.O. Box 1518
Roswell, New Mexico 88202

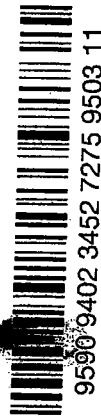
CBR Oil Properties, LLC
P.O. Box 1518
Roswell, New Mexico 88202

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:

COG Operating LLC
Concho Oil & Gas LLC
600 West Illinois
Midland, Texas 79701



9590 9402 3452 7275 9503 11

2. Article Addressed to:

7017 2680 0000 1767 1005

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

Domestic Return Receipt

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U.S. Postal ServiceTM
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Domestic Mail Only

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OFFICIAL USE

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

Postmark
Here

Total Postage and Fees \$
Sent To \$
COG Operating LLC
Concho Oil & Gas LLC
600 West Illinois
Midland, Texas 79701
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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type
- ☐ Priority Mail Express[®]
 - ☐ Registered MailTM
 - ☐ Registered Mail Restricted Delivery
 - ☐ Certified Mail[®]
 - ☐ Certified Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Signature ConfirmationTM
 - ☐ 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:

Read & Stevens, LLC
Read & Stevens, Inc.
P.O. Box 1518
Roswell, New Mexico 88202



9590 9402 3452 7275 9513 63

2. Article Addressed to:

7017 2680 0000 1767 1012

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

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OFFICIAL USE

Certified Mail Fee \$

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

Postmark
Here

Total Postage and Fees \$

Sent To \$

Read & Stevens, LLC

Read & Stevens, Inc.

P.O. Box 1518

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

Roswell, New Mexico 88202

City, State, ZIP+4[®]

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
- X
- B. Received by (Printed Name)
- M. Stevens
- C. Date of Delivery
- 7/15/15
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

3. Service Type
- ☐ Priority Mail Express[®]
 - ☐ Registered MailTM
 - ☐ Registered Mail Restricted Delivery
 - ☐ Certified Mail[®]
 - ☐ Certified Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Collect on Delivery
 - ☐ Collect on Delivery Restricted Delivery
 - ☐ Signature ConfirmationTM
 - ☐ Signature Confirmation Restricted Delivery

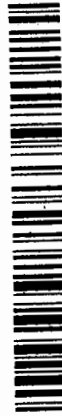
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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:

First Century Oil, Inc.
P.O. Box 1518
Roswell, New Mexico 88202



9590 9402 3452 7275 9513 56

2. Article Number (Transfer from service label)
7017 2680 0000 1767 1029

(over \$500)

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

Domestic Return Receipt

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OFFICIAL USE

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

Postmark
Here

Sent To First Century Oil, Inc.
Street and Apt. No., or PO: P.O. Box 1518
City, State, ZIP+4: Roswell, New Mexico 88202

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature M. Novak ☒ Agent ☐ Addressee
B. Received by (Printed Name) M. Novak C. Date of Delivery 7/1/15
D. Is delivery address different from item 1? ☒ Yes ☐ No
If YES, enter delivery address below: 1111 N. 1st St.

3. Service Type
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Adult Signature Restricted Delivery
☐ Certified Mail[®]
☒ Certified Mail Restricted Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature ConfirmationTM
☐ 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:

CBR Oil Properties, LLC
P.O. Box 1518
Roswell, New Mexico 88202



9590 9402 3452 7275 9513 25

2. A 7017 2680 0000 1767 1067

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

Domestic Return Receipt

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OFFICIAL USE

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

Postmark
Here

Sent To CBR Oil Properties, LLC
Street and Apt. No., or PO: P.O. Box 1518
City, State, ZIP+4: Roswell, New Mexico 88202

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature M. Novak ☒ Agent ☐ Addressee
B. Received by (Printed Name) M. Novak C. Date of Delivery 7/1/15
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Adult Signature Restricted Delivery
☐ Certified Mail[®]
☒ Certified Mail Restricted Delivery
☐ Collect on Delivery Restricted Delivery
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

February 8, 2018

NOTICE

To: Buchholz Oil & Gas Co., Nancy Peacock Mackey, Turner Royalties, LLC, Ralph E. Peacock, Highland (Texas) Energy Company, Huntington Resources, Landcaster Resources, or your successors, heirs, devisees, or assigns: Matador Production Company has filed an application with the New Mexico Oil Conservation Division seeking an order approving a 152.67-acre non-standard spacing and proration unit (project area) in the Bone Spring formation comprised of Lot 1, N/2NE/4, and NE/4NW/4 (the N/2N/2) of Section 19, Township 19 South, Range 29 East, NMPM. Applicant further seeks the pooling of all mineral interests in the Bone Spring formation underlying the non-standard spacing and proration unit (project area). The unit will be dedicated to the Marbob 19 State Well No. 121H, a horizontal well with a surface location in Lot 1, and a terminus in the NE/4NE/4, of Section 19. The producing interval will be orthodox. Also to be considered will be the cost of drilling and completing the well and the allocation of the cost thereof, as well as actual operating costs and charges for supervision, designation of applicant as operator of the well, and a 200% charge for the risk involved in drilling and completing the well. The application is scheduled to be heard at 8:15 a.m. on Thursday, February 22, 2018 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well unit or offsetting the well unit, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date. The attorney for applicant is James Bruce, P.O. Box 1056, Santa Fe, New Mexico 87504. The unit is located approximately 14 miles south-southwest of Loco Hills, New Mexico.

Affidavit of Publication

State of New Mexico,
County of Eddy, ss.

Danny Fletcher, being first duly sworn, on oath says:

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

February 8 2018

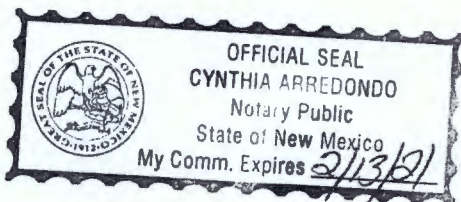
That the cost of publication is \$104.24 and that payment thereof has been made and will be assessed as court costs.

Subscribed and sworn to before me this 13 day of February, 2018

Cynthia Arredondo

My commission Expires 2/13/21

Notary Public



February 8, 2018

NOTICE

To: Buchholz Oil & Gas Co., Nancy Peacock Mackey, Turner Royalties, LLC, Alfred Rodriguez, CSA Petroleum Corporation, Donald E. Richter, Glenda L. Richter, Ralph E. Peacock, H.W. Allen Company, LLC, Highland (Texas) Energy Company, Sharon S. Trollinger as Trustee of the Sharon Stone Trollinger Trust, Watson Properties, LLC, Westway Petro One, Westway Petro Two, and William V. Palmer, LLC, or your successors, heirs, devisees, or assigns: Matador Production Company has filed an application with the New Mexico Oil Conservation Division seeking an order approving a 152.61-acre non-standard spacing and proration unit (project area) in the Bone Spring formation comprised of Lot 2,

S/2NE/4, and SE/4NW/4 (the S/2N/2) of Section 19, Township 19 South, Range 29 East, NMPM. Applicant further seeks the pooling of all mineral interests in the Bone Spring formation underlying the non-standard spacing and proration unit (project area). The unit will be dedicated to the Marbob 19 State Well No. 122H, a horizontal well with a surface location in Lot 2, and a terminus in the SE/4NE/4, of Section 19. The producing interval will be orthodox. Also to be considered will be the cost of drilling and completing the well and the allocation of the cost thereof, as well as actual operating costs and charges for supervision, designation of applicant as operator of the well, and a 200% charge for the risk involved in drilling and completing the well. The application is scheduled to be heard at 8:15 a.m. on Thursday, February 22, 2018 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well unit, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date. The attorney for applicant is

James Bruce, P.O. Box 1056, Santa Fe, New Mexico 87504. The unit is located approximately 14 miles south-southwest of Loco Hills, New Mexico.

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 13
Submitted by:
MATADOR PRODUCTION COMPANY
Hearing Date: February 22, 2018

Affidavit of Publication

State of New Mexico,
County of Eddy, ss.

Danny Fletcher, being first duly sworn, on oath says:

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

February 8 2018

That the cost of publication is \$113.59 and that payment thereof has been made and will be assessed as court costs.

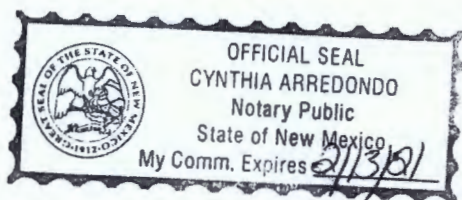
D C 70

Subscribed and sworn to before me this 13 day of February, 2018

Cynthia Arredondo

My commission Expires 2/13/21

Notary Public



February 8, 2018

NOTICE

To: T.K. Campbell,
Margaret T. Campbell,
Louie Edward
Gwaltney, Lillian Ward
Gwaltney, Buchholz
Oil & Gas Co., Faith
Kennedy, Michael W.
Kennedy, Nancy Pea-
cock Mackey, Robert
E. Ferguson, Rosema-
ry Ferguson, Teresa
Burnsides, Sue Ho-
ward, Turner Royalti-
ties, LLC or your suc-
cessors, heirs,
devises, or assigns:
Matador Production
Company has filed an
application with the
New Mexico Oil Con-
servation Division
seeking an order ap-
proving a 152.49-acre
non-standard spacing
and proration unit
(project area) in the
Bone Spring formation
comprised of Lot 4,
S/2SE/4, and
SE/4SW/4 (the
S/2S/2) of Section 19,
Township 19 South,
Range 29 East,
NMPM. Applicant fur-
ther seeks the pooling
of all mineral interests
in the Bone Spring for-
mation underlying the
non-standard spacing
and proration unit

(project area). The
unit will be dedicated
to the Marbob 19
State Well No. 124H, a
horizontal well with a
surface location in Lot
4, and a terminus in
the SE/4SE/4, of Sec-
tion 19. The producing
interval will be ortho-
dox. Also to be con-
sidered will be the
cost of drilling and
completing the well
and the allocation of
the cost thereof, as
well as actual operat-
ing costs and charges
for supervision, desig-
nation of applicant as
operator of the well,
and a 200% charge
for the risk involved in
drilling and complet-
ing the well. The appli-
cation is scheduled to
be heard at 8:15 a.m.
on Thursday, February
22, 2018 at the Divi-
sion's offices at 1220
South St. Francis
Drive, Santa Fe, New
Mexico 87505. As an
interest owner in the
well unit, you have the
right to enter an ap-
pearance, and partici-
pate in the case. Fail-
ure to appear will pre-
clude you from con-
testing this matter at
a later date. The attor-
ney for applicant is
James Bruce, P.O. Box
1056, Santa Fe, New
Mexico 87504. The
unit is located approx-
imately 14-1/2 miles
south-southwest of
Loco Hills, New Mexico.

Affidavit of Publication

State of New Mexico,
County of Eddy, ss.

Danny Fletcher, being first duly
sworn, on oath says:

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

February 8 2018

That the cost of publication is
\$107.58 and that payment thereof
has been made and will be
assessed as court costs.

[Signature]

Subscribed and sworn to before me
this 13 day of February, 2018

Cynthia Arredondo

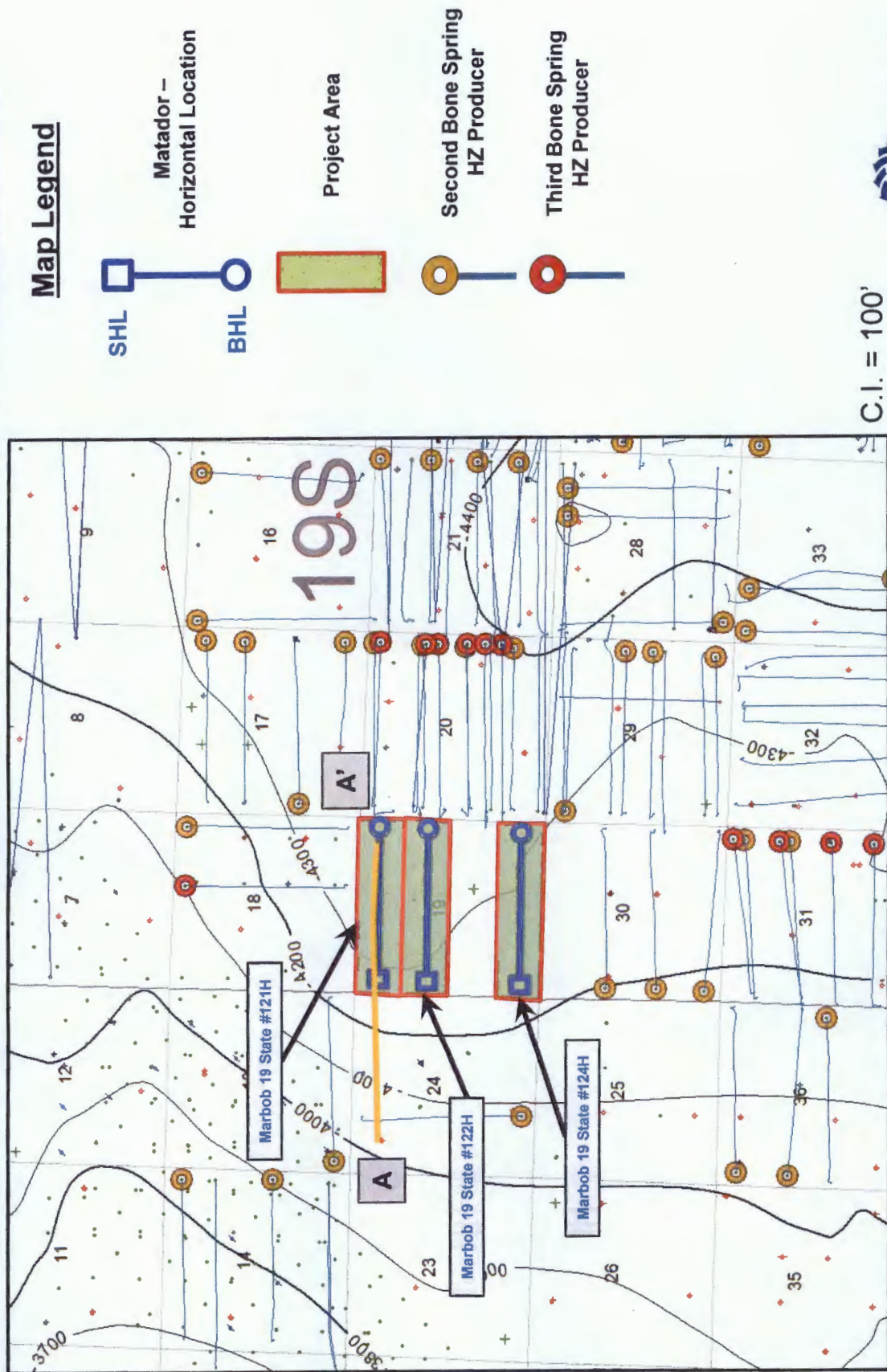
My commission Expires 2/13/21

Notary Public



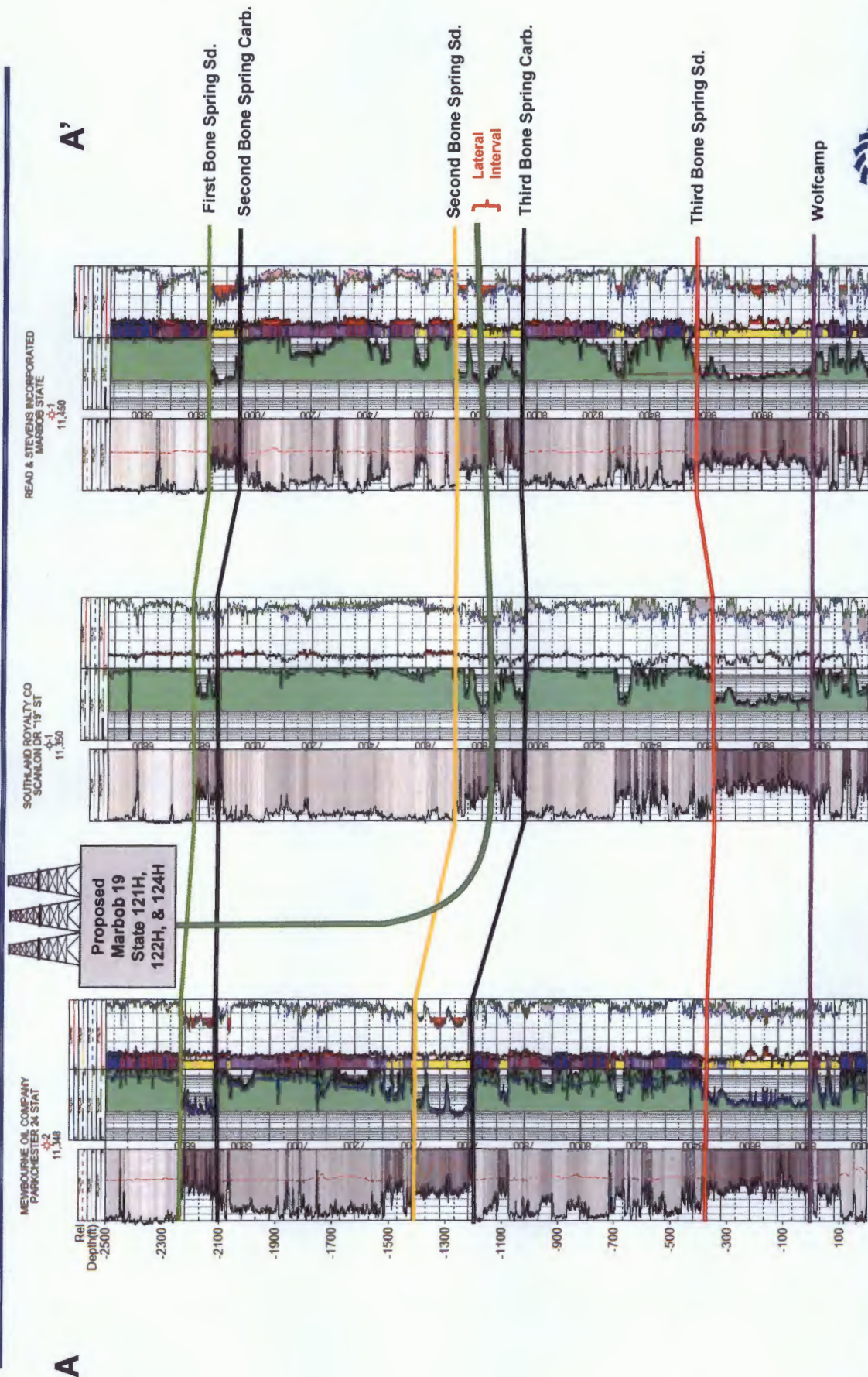
BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 14
Submitted by:
MATADOR PRODUCTION COMPANY
Hearing Date: February 22, 2018

Scanlon Draw; Bone Spring (Pool Code: 55510) Structure Map (Top Second Bone Spring)



Marbob 19 State Com # 121H, 122H, & 124H

Scanlon Draw; Bone Spring (Pool Code: 55510) Stratigraphic Cross Section A - A'



Marbob 19 State Com # 121H, 122H, & 124H

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico

Exhibit No. 16

Submitted by:

MATADOR PRODUCTION COMPANY

Hearing Date: February 22, 2018