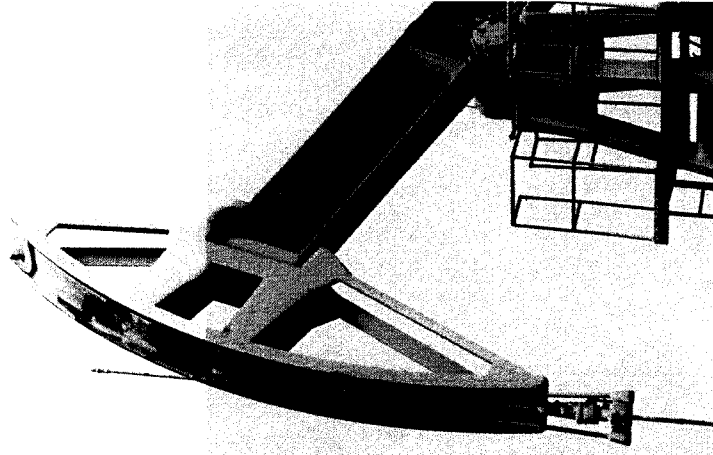
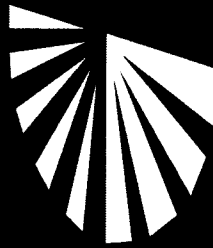


Avion Federal Com Well No. 301H
Case No. 16052
April 4, 2018



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

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

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

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number		² Pool Code		³ Pool Name	
⁴ Property Code		⁵ Property Name AVION FEDERAL COM			⁶ Well Number 301H
⁷ OGRID No. 229137		⁸ Operator Name COG OPERATING, LLC			⁹ Elevation 3698.7

¹⁰ Surface Location

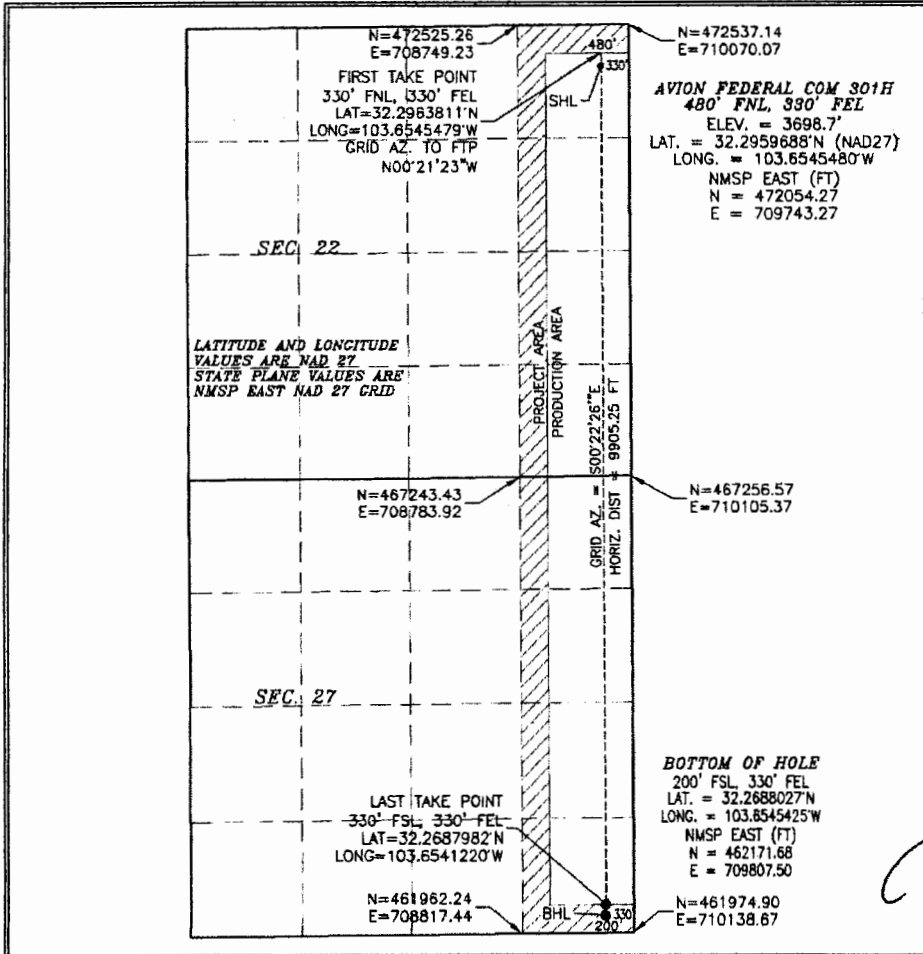
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	22	23 S	32 E		480	NORTH	330	EAST	LEA

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	27	23 S	32 E		200	SOUTH	330	EAST	LEA

¹² Dedicated Acres	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.



¹⁷ OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

BEFORE THE OIL CONSERVATION DIVISION

Santa Fe, New Mexico
Case No. 16052 Exhibit No. 1
Submitted by:
COG OPERATING LLC
Hearing Date: April 4, 2018

¹⁸ SURVEYOR CERTIFICATION

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

JANUARY 11, 2018
Date of Survey

Felimon E. Zaramillo
Signature and Seal of Professional Surveyor:
Certificate Number: FELIMON E. ZARAMILLO, PLS 12797
SURVEY NO. 5609C

AVION FEDERAL COM #301H
T23S-R32E-Section 22, E/2 E/2
T23S-R32E-Section 27, E/2 E/2
Lea County, NM

	TRACT 1 E/2 E/2 160 AC.
22 27	TRACT 2 E/2 E/2 160 AC.

Tract 1: E/2 E/2 Section 22-T23S-R32E (160 ACRES)

<u>COG Operating LLC</u>	100.00%
Total	100.00%

Tract 2: E/2 E/2 Section 27-T23S-R32E (160 ACRES)

<u>ConocoPhillips Company</u>	100.00%
Total	100.00%

UNIT RECAPITULATION

T23S-R32E-Section 22, E/2 E/2
T23S-R32E-Section 27, E/2 E/2
Lea County, NM

COG Operating LLC	50.00%
<u>ConocoPhillips Company</u>	<u>50.00%</u>
Total:	100.00%

Interest seeking to Compulsory Pool



January 15, 2018

US Certified Mail – 91 7199 9991 7038 1528 6057

ConocoPhillips Company
600 N. Dairy Ashford
Houston, TX 77079-1175
Attention: Joey Moppert

Re: Well Proposal – Avion Federal Com 301H (AFE #NDO17411)
Sec 22: E/2 E/2 - T23S-R32E
Sec 27: E/2 E/2 - T23S-R32E
SHL: 480' FNL/ 330' FEL, or a legal location in Sec 22 (Unit A)
BHL: 200' FSL/ 330' FEL, or a legal location in Sec 27 (Unit P)
Lea County, New Mexico

Dear Sir/Madam:

COG Operating LLC (COG), as Operator, hereby proposes to drill the Avion Federal Com 301H well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately 9,690' and a MD of approximately 19,400' to test the Bone Spring formation ("Operation"). The total cost of the Operation is estimated to be \$11,018,300.00, and a detailed description of the cost is set out in the enclosed Authority for Expenditure ("AFE").

COG is proposing to drill this well under the terms of the modified 1989 AAPL form of Operating Agreement which is enclosed for your review and approval. The Operating Agreement covers Sec 22: E/2 E/2 - T23S-R32E and Sec 27: E/2 E/2 - T23S-R32E. It has the following general provisions:

- 100/300 Non-Consenting Penalty
- \$7,000/\$700 Drilling and Producing Rate
- COG Operating LLC named as Operator

Please indicate your participation election in the space provided below, sign and return this letter, along with a signed copy of the enclosed AFE and a copy of your geologic well requirements. A self-addressed, postage paid envelope is enclosed for your convenience. If you do not wish to participate, COG proposes to acquire your interest via farmout.

If an agreement cannot be reached within 30 days of the date of this letter, COG will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well if uncommitted at such time.

If you have any questions, please do not hesitate to contact the undersigned at (432) 685-2588.

Respectfully,

Megan L. Tipton

Megan L Tipton
Landman

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Case No. 16052 Exhibit No. 3
Submitted by:
COG OPERATING LLC
Hearing Date: April 4, 2018

March 16, 2018

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.
Avion Federal Com Well No. 301H.**

Ladies and Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division seeking a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on April 5, 2018. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Office located at 1220 South Saint 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 challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13(B) to file a Pre-Hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above-specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all 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 are to be resolved prior to hearing.

Sincerely,



Ocean Munds-Dry
Senior Counsel
COG Operating LLC

CORPORATE ADDRESS

ONE CONCHO CENTER | 600 WEST ILLINOIS AVENUE | MIDLAND, TEXAS 79701
P 432.683.7443 | F 432.683.7441

SANTA FE OFFICE

1048 PASEO DE PERALTA | SANTA FE, NEW MEXICO 87501
P 505.730.8000 | F 505.422.0485

March 16, 2018

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING OPERATORS AND LESSEES

**Re: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.
Avion Federal Com Well No. 301H.**

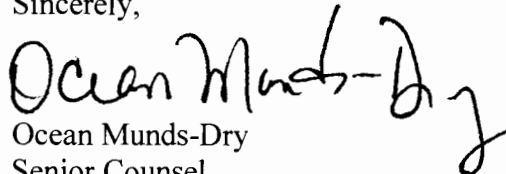
Ladies and Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application*, but as an operator or lessee of an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on April 5, 2018. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Office located at 1220 South Saint 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 challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13(B) to file a Pre-Hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above-specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all 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 are to be resolved prior to hearing.

Sincerely,



Ocean Munds-Dry
Senior Counsel
COG Operating LLC

CORPORATE ADDRESS

ONE CONCHO CENTER | 600 WEST ILLINOIS AVENUE | MIDLAND, TEXAS 79701
P 432.683.7443 | F 432.693.7441

SANTA FE OFFICE

1048 PASEO DE PERALTA | SANTA FE, NEW MEXICO 87501
P 505.780.6000 | F 505.428.0485

_____ I/We hereby elect to participate in the Avion Federal Com 301H.

_____ I/We hereby elect ***not*** to participate in the Avion Federal Com 301H.

Company: **CONOCOPHILLIPS COMPANY** _____

By: _____

Name: _____

Title: _____

Date: _____

Avion Federal Com #301H Offset & Pooling Notification Lists

Offset Notification List:

23S-32E, Section 22 (B, G, J, O)

COG Operating LLC
600 W. Illinois Ave.
Midland, TX 79701
Attn: Megan Tipton 1CC-8

23S-32E, Section 27 (B, G)

ConocoPhillips Company
PO Bx. 2197
Houston, TX 77252-2197

ConocoPhillips Company
600 North Dairy Ashford
Houston, TX 77079
Attention: Joey Moppert

23S-32E, Section 27 (J, O)

OXY USA
10889 Wilshire Boulevard
Los Angeles, CA 90024

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

The Allar Company
PO Bx. 1567
Graham, TX 76450

The Allar Company
735 Elm Street
Graham, TX 76450

Strategic Energy Income Fund IV, LP
2350 North Forest Road
Getzville, NY 14068

Twin Montana Inc.
PO Bx. 1210
Graham, TX 76450

O Sec. 15	P	M Sec. 14
B	A	D
G	H	E
J	I	L
O Sec. 22	P	M Sec. 23
B	A	D
G	H	E
J	I	L
O Sec. 27	P	M Sec. 26
B Sec. 34	A	D Sec. 35

Talus Inc.
PO Bx. 1210
Graham, TX 76450

Mark Stodola
917 East
Graham, TX 76450

Tom Golden
PO Bx. 1210
Graham, TX 76450

Randal Schmidt
PO Bx. 515
Graham, TX 76450

Kenneth C. Haggart
PO Bx. 1210
Graham, TX 76450

ConocoPhillips Company
PO Bx. 2197
Houston, TX 77252-2197

ConocoPhillips Company
600 North Dairy Ashford
Houston, TX 77079
Attention: Joey Moppert

23S-32E, Section 34 (B, A)

EOG Resources, Inc.
PO Box 2267
Midland, TX 79702

EOG Resources, Inc.
5509 Champions Drive
Midland, TX 79706

First Roswell Company, Ltd
PO Box 1797
Roswell, NM 88202

Thomas E. Jennings
710 North Kentucky
Roswell, NM 88201

Timothy Z. Jennings
3968 Cottonwood
Roswell, NM 88201

23S-32E, Section 35 (D)

COG Operating LLC
600 W. Illinois Ave.
Midland, TX 79701
Attn: Megan Tipton 1CC-8

23S-32E, Section 26 (M, L)

ConocoPhillips Co.
600 North Dairy Ashford
Houston, TX 77079
Attention: Joey Moppert

Magnum Hunter Production, Inc.
600 N. Marienfeld St., Ste. 600
Midland, TX 79701

23S-32E, Section 26 (E, D)

EOG Y Resources, Inc.
5509 Champions Drive
Midland, TX 79706

EOG A Resources, Inc.
5509 Champions Drive
Midland, TX 79706

EOG M Resources, Inc.
5509 Champions Drive
Midland, TX 79706

Oxy Y-1 Company
5 Greenway Plaza, Ste. 110
Houston, TX 77046

23S-32E, Section 23 (M, L, E, D)

Cimarex Energy Company of Colorado
600 North Marienfeld Street, Ste. 600
Midland, TX 79701

23S-32E, Section 14 (M)

Marathon Oil Permian LLC
5555 San Felipe Street
Houston, TX 77056

Petrolux, Inc.
200 West 1st St., Suite 436
Roswell, NM 88201

Cimarex Energy Co.
600 N. Marienfeld St., Ste. 600
Midland, TX 79701

23S-32E, Section 15 (P, O)

Devon Energy Production Company LP
20 N Broadway #1500
Oklahoma City OK 73102

Devon Energy Production Company LP
333 West Sheridan Ave.
Oklahoma City, OK 73102

Pooling Notification List:

ConocoPhillips Company
600 N. Dairy Ashford
Houston, TX 77079-1175
Attention: Joey Moppert

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OFFICIAL RECEIPT

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 \$

SANTA FE, NM 77079-1175
 MAR 18 2018
 Here

ConocoPhillips Company
 600 N. Diary Ashford
 Houston, TX 77079-1175
 Attn: Joey Moppert

See reverse for instructions

2201 1370 0000 0267 9102

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.

ConocoPhillips Company
 600 N. Diary Ashford
 Houston, TX 77079-1175
 Attn: Joey Moppert



9590 9403 0584 5183 3644 24

7016 1370 0000 0397 1072

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 B. Received by (Printed Name) Addressee
 C. Date of Delivery 03/17/18
 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
 Mail 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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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 \$

ConocoPhillips Company
 P.O. Box 2197
 Houston, TX 77252-2197

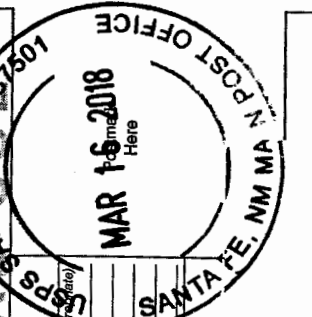
PS Form 3811, April 2015 PSN 7530-02-000-9053

7016 1370 0000 0397 1058

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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 \$

ConocoPhillips Company
 600 N. Dairy Ashford
 Houston, TX 77079-1175
 Attn: Joey Moppert

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

7016 1370 0000 0397 1058

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:

ConocoPhillips Company
 P.O. Box 2197
 Houston, TX 77252-2197



9590 9402 1627 6053 9158 23

2. Article Number (Transfer from service label)

7016 1370 0000 0397 1065

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

Domestic Return Receipt

A. Signature Agent
 B. Received by (Printed Name) LAURA HANAGANE
 C. Date of Delivery 03/20/18

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



3. Service Type Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 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:

ConocoPhillips Company
 600 N. Dairy Ashford
 Houston, TX 77079-1175
 Attn: Joey Moppert



9590 9402 1627 6053 9158 30

2. Article Number (Transfer from service label)

7016 1370 0000 0397 1058

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

Domestic Return Receipt

A. Signature Agent
 B. Received by (Printed Name) LAURA HANAGANE
 C. Date of Delivery 3/19/18

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

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

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

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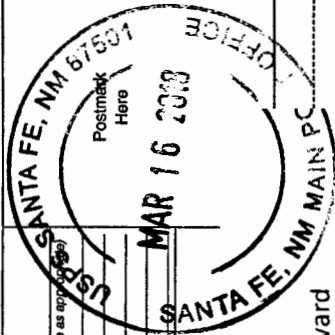
OFFICIAL USE

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 \$

OXY USA
10889 Wilshire Boulevard
Los Angeles, CA 90024



for Instructions

7016 1370 0000 0397 1034

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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 \$

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



for Instructions

7016 1370 0000 0397 1034

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
10889 Wilshire Boulevard
Los Angeles, CA 90024



9590 9402 1627 6053 9158 47

2. Article Number (Transfer from service label)

7016 1370 0000 0397 1034

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

Domestic Return Receipt

A. Signature

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

13/9/18

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

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



9590 9402 1627 6053 9158 54

2. Article Number (Transfer from service label)

7016 1370 0000 0397 1034

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

Domestic Return Receipt

A. Signature

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

13/9/18

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

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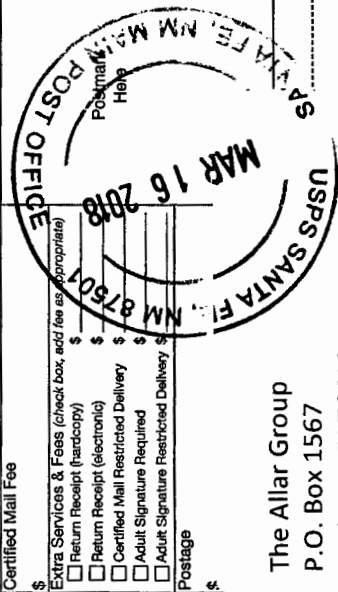
OFFICIAL USE

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 \$

Postage \$



The Allar Group
P.O. Box 1567
Graham, TX 76450

See Reverse for Instructions

7016 1370 0000 0397 1010

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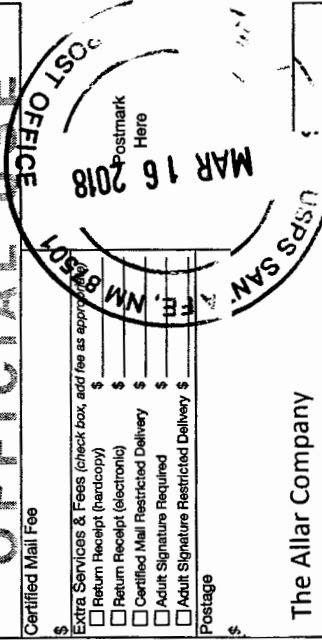
OFFICIAL USE

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 \$



The Allar Company
735 Elm Street
Graham, TX 76450

See Reverse for Instructions

7016 1370 0000 0397 1010

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:

The Allar Group
P.O. Box 1567
Graham, TX 76450



9590 9402 1627 6053 9158 61

2. Article Number (Transfer from service label)

7016 1370 0000 0397 1010

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:

The Allar Company
735 Elm Street
Graham, TX 76450



9590 9402 1627 6053 9158 78

2. Article Number (Transfer from service label)

7016 1370 0000 0397 1010

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

SENDER: COMPLETE THIS SECTION

A. Signature

Melanie Bant

B. Received by (Printed Name)

Melanie Bant

C. Date of Delivery

3-19-18

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



- 3. Service Type 750-USP Registered Mail™
- Adult Signature Registered Mail Express®
- Adult Signature Restricted Delivery Registered Mail™
- Certified Mail® Restricted Mail
- Certified Mail Restricted Delivery Restricted Mail for
- Collect on Delivery Return Receipt for Confirmation™
- Collect on Delivery Restricted Delivery Signature Confirmation™
- Collect on Delivery Restricted Delivery Restricted Delivery

Domestic Return Receipt

RECIPIENT: COMPLETE THIS SECTION

A. Signature

Melanie Bant

B. Received by (Printed Name)

C. Date of Delivery

3-19-18

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

Domestic Return Receipt

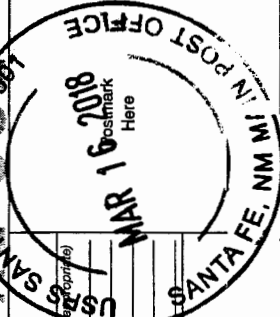
**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

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 \$

Strategic Energy Income Fund IV, LP
 2350 North Forest Road
 Getzville, NY 14068



for Instructions

7016 1370 0000 0397 1003

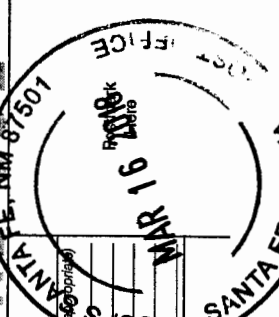
**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

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 \$

Twin Montana Inc.
 P.O. Box 1210
 Graham, TX 76450



for Instructions

9590 9403 0404 5163 6712 02

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.

Strategic Energy Income Fund IV, LP
 2350 North Forest Road
 Getzville, NY 14068



9590 9403 0404 5163 6712 19

Article Number (Transfer from services label)
 7016 1370 0000 0397 1003

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

CERTIFIED MAIL

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

A. Signature

X *Nancy Kaldubek* Agent Addressee

B. Received by (Printed Name)
 N KRACZYK 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 Restricted Delivery™
 Adult Signature Registered Delivery™
 Certified Mail®
 Certified Mail Restricted Delivery™
 Collect on Delivery Restricted Delivery™
 Collect on Delivery Restricted Delivery™
 Mail Restricted Delivery™
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery™
 Return Receipt for Merchandise™
 Signature Confirmation™
 Signature Confirmation Restricted Delivery™

Domestic Return Receipt

CERTIFIED MAIL

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

A. Signature

X *Melanie Guerrero* Agent Addressee

B. Received by (Printed Name)
 MELANIE GUERRERO 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 Restricted Delivery™
 Adult Signature Registered Delivery™
 Certified Mail®
 Certified Mail Restricted Delivery™
 Collect on Delivery Restricted Delivery™
 Collect on Delivery Restricted Delivery™
 Insured Mail™
 Mail 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, April 2015 PSN 7530-02-000-9053

Article Number (Transfer from services label)
 7016 1370 0000 0397 0990



9590 9403 0404 5163 6712 02

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

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:

Talus Inc.
P.O Box 1210
Graham, TX 76450



9590 9403 0404 5163 6711 96

7016 1370 0000 0397 0983

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

A. Signature
[Handwritten Signature]

B. Received by (Printed Name)
Melissa Guercio

C. Date of Delivery
MAR 21 2018

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

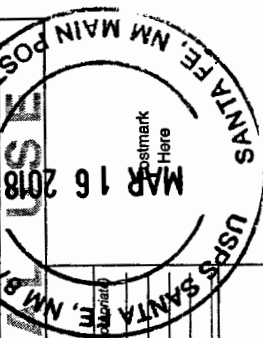
3. Service Type
- Priority Mail Express®
 - Registered Mail™
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Signature Confirmation™
 - Restricted Delivery

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 \$

Talus Inc.
P.O Box 1210
Graham, TX 76450

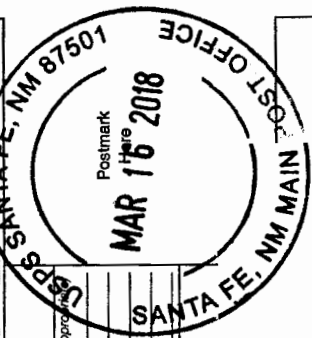
for Instructions

9260 2660 0000 0267 9702

**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 \$

Mark Stodola
917 East
Graham, TX 76450

See reverse for Instructions

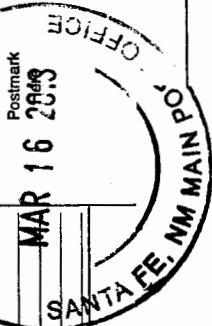
9260 2660 0000 0267 9702

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

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

OFFICIAL RECEIPT
Certified Mail Fee \$

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



Tom Golden
P.O. Box 1210
Graham, TX 76450

for Instructions

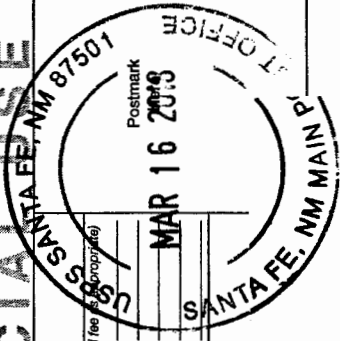
7016 1370 0000 0397 0952

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

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

OFFICIAL RECEIPT
Certified Mail Fee \$

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



Randal Schmidt
P.O. Box 515
Graham, TX 76450

see reverse for Instructions

7016 1370 0000 0397 0952

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:

Tom Golden
P.O. Box 1210
Graham, TX 76450



9590 9403 0404 5163 6711 72

2. Article Number (Transfer from service label)
7016 1370 0000 0397 0952

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

RECIPIENT: 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:

Randal Schmidt
P.O. Box 515
Graham, TX 76450



9590 9403 0404 5163 6711 65

2. Article Number (Transfer from service label)
7016 1370 0000 0397 0952

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

COMPLETE THIS SECTION

A. Signature Agent

B. Received by (Printed Name) Address

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
 Collect on Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery
 Mail Restricted Delivery (over \$500)

Domestic Return Receipt

COMPLETE THIS SECTION

A. Signature Agent
 Addressee

B. Received by (Printed Name) Date of Delivery

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
 Collect on Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery
 Collect on Delivery Restricted Delivery (over \$500)

Domestic Return Receipt

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

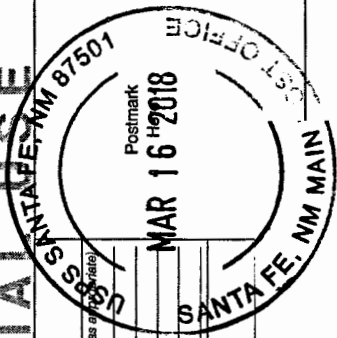
For delivery information, visit our website at www.usps.com™.

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 \$



Kenneth C. Haggart
P.O. Box 1210
Graham, TX 76450

for Instructions

5460 2660 0000 0397 0945

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

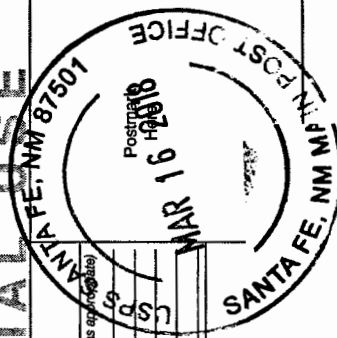
For delivery information, visit our website at www.usps.com™.

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 \$



EOG Resources, Inc.
5509 Champions Drive
Midland, TX 79706

See reverse for Instructions

5460 2660 0000 0397 0921

N DELIVERY

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

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:

Kenneth C. Haggart
P.O. Box 1210
Graham, TX 76450



9590 9403 0404 5163 6711 58

Article Number (Transfer from service label)

7016 1370 0000 0397 0945

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

A. Signature

Kenneth C. Haggart

B. Received by (Printed Name)

Melodie Guested

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™
 - Registered Mail Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery
 - Restricted Delivery

Domestic Return R

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:

EOG Resources, Inc.
5509 Champions Drive
Midland, TX 79706



9590 9403 0404 5163 6711 34

Article Number (Transfer from service label)

7016 1370 0000 0397 0921

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

A. Signature

Robert Jora

Agent

B. Received by (Printed Name)

R. Jora

C. Date of Delivery

3-20-18

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

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

Domestic Return Receipt

LIVERY

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

5460 2660 0000 0397 0921

**U.S. Postal Service™
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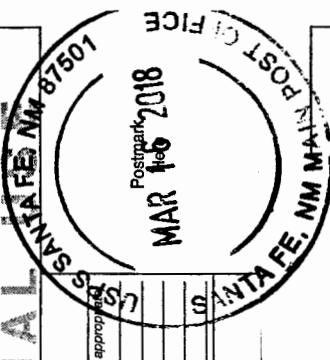
Domestic Mail Only

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

OFFICIAL

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 \$



EOG Resources, Inc.
 P.O. Box 2267
 Midland, TX 79702

See Reverse for Instructions

2016 1370 0000 0397 0938

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

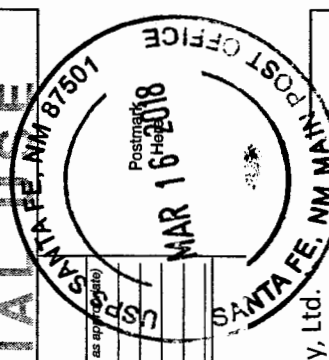
Domestic Mail Only

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

OFFICIAL

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 \$



First Roswell Company, Ltd.
 P.O. Box 1797
 Roswell, New Mexico 88202

See Reverse for Instructions

2016 1370 0000 0397 0938

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:

EOG Resources, Inc.
 P.O. Box 2267
 Midland, TX 79702



9590 9403 0404 5163 6711 41

7016 1370 0000 0397 0938

PS Form 3811, April 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:

First Roswell Company, Ltd.
 P.O. Box 1797
 Roswell, New Mexico 88202



9590 9403 0404 5163 6711 27

7016 1370 0000 0397 0938

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

A. Signature **X [Signature]** Agent

B. Received by (Printed Name) **R. Fellee**
 C. Date of Delivery **3-20-18**

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
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - all Restricted Delivery

Domestic Return Receipt



DELIVERY

A. Signature **X [Signature]** Agent

B. Received by (Printed Name) **Ray Spader**
 C. Date of Delivery **3-20-18**

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
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - all Restricted Delivery

Domestic Return Receipt

ON DELIVERY

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

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:
 Thomas E. Jennings
 710 North Kentucky
 Roswell, New Mexico 88201

A. Signature *[Signature]* Agent

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

2. 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
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

4. Collect on Delivery Restricted Delivery

5. Mail Restricted Delivery

PS Form 3811, April 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.

Timothy Z. Jennings
 3968 Cottonwood
 Roswell, New Mexico 88201

A. Signature *[Signature]* Agent Addressee

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

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
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

4. Collect on Delivery Restricted Delivery

5. Mail Restricted Delivery

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

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OFFICIAL MAIL FEE

Certified Mail Fee \$ 2.60

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

Return Receipt (hardcopy) \$ 0.00

Return Receipt (electronic) \$ 0.00

Certified Mail Restricted Delivery \$ 0.00

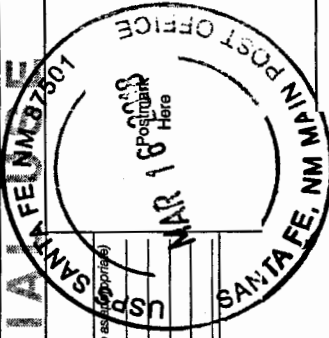
Adult Signature Required \$ 0.00

Adult Signature Restricted Delivery \$ 0.00

Postage \$ 0.00

Thomas E. Jennings
 710 North Kentucky
 Roswell, New Mexico 88201

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



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 Domestic Mail Only**

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

OFFICIAL MAIL FEE

Certified Mail Fee \$ 2.60

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

Return Receipt (hardcopy) \$ 0.00

Return Receipt (electronic) \$ 0.00

Certified Mail Restricted Delivery \$ 0.00

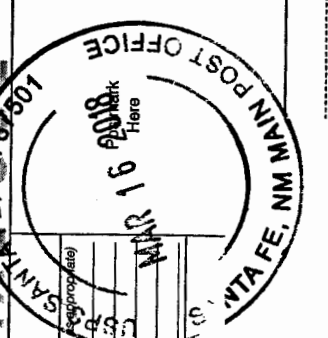
Adult Signature Required \$ 0.00

Adult Signature Restricted Delivery \$ 0.00

Postage \$ 0.00

Timothy Z. Jennings
 3968 Cottonwood
 Roswell, New Mexico 88201

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



2016 1370 0000 0397 0907

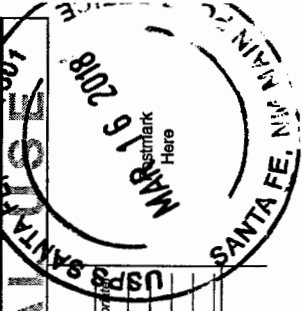
2016 1370 0000 0397 0891

Domestic Return Receipt

Domestic Return Receipt

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 \$

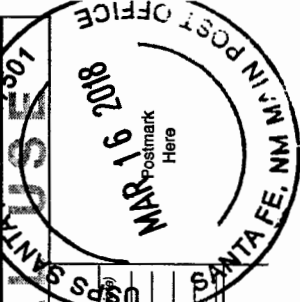
Magnum Hunter Production, Inc.
600 N. Marientfeld St., Suite 600
Midland, TX 79701

for instructions

7016 1370 0000 0397 0884

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 \$

EOG Y Resources, Inc.
5509 Champions Drive
Midland, TX 79706

for instructions

7016 1370 0000 0397 0877

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.

Magnum Hunter Production, Inc.
600 N. Marientfeld St., Suite 600
Midland, TX 79701



9590 9403 0584 5183 3643 25

Article Number (Transfer from previous label)
7016 1370 0000 0397 0884

PS Form 3811, April 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.

EOG Y Resources, Inc.
5509 Champions Drive
Midland, TX 79706



9590 9403 0404 5183 6711 03

Article Number (Transfer from previous label)
7016 1370 0000 0397 0877

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

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS FOR DELIVERY TO THE RIGHT

V DELIVERY

A. Signature [Signature] Agent

X [Signature] 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[®]
 Adult Signature Restricted Delivery
 Certified Mail[®]
 Certified Mail Restricted Delivery
 Collect on Delivery Restricted Delivery
 Signature Confirmation[™]
 Signature Confirmation Restricted Delivery
 Return Receipt for Merchandise
 Return Receipt for Signature Confirmation Restricted Delivery

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS FOR DELIVERY TO THE RIGHT

V DELIVERY

A. Signature [Signature] Agent

X [Signature] Addressee
 B. Received by (Printed Name) R-FORRE C. Date of Delivery 3-20-18

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

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

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

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

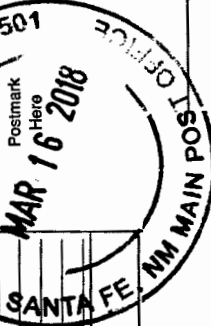
OFFICIAL USE

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 \$

Postage \$



EOG A Resources, Inc.
5509 Champions Drive
Midland, TX 79706

for Instructions

0980 2660 0000 0397 0853

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

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

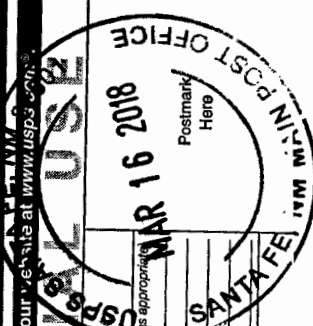
OFFICIAL USE

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 \$



EOG M Resources, Inc.
5509 Champions Drive
Midland, TX 79706

See Reverse for Instructions

0980 2660 0000 0397 0853

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:

EOG A Resources, Inc.
5509 Champions Drive
Midland, TX 79706



9590 9403 0404 5163 6710 80

7016 1370 0000 0397 0860

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

DELIVERY

A. Signature Agent Addressee

X *Robert J. Foree*
B. Received by (Printed Name) *R. Foree* C. Date of Delivery *3-20-18*

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

3. Service Type
- Priority Mail Express®
 - Adult Signature
 - 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

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.

EOG M Resources, Inc.
5509 Champions Drive
Midland, TX 79706



9590 9403 0584 5163 3643 49

7016 1370 0000 0397 0853

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

DELIVERY

A. Signature Agent Addressee

X *Robert J. Foree*
B. Received by (Printed Name) *R. Foree* C. Date of Delivery *3-20-18*

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

3. Service Type
- Priority Mail Express®
 - Adult Signature
 - 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

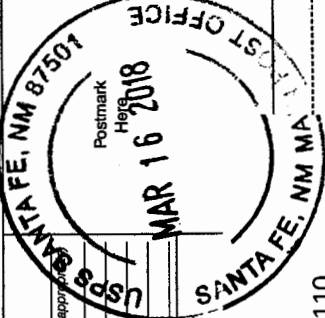
U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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 \$



OXY Y-1 Company
 5 Greenway Plaza, Ste. 110
 Houston, TX 77046

for Instructions

7016 1370 0000 0397 0846

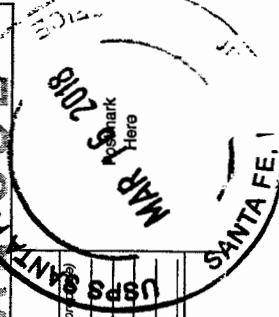
U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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 \$



Cimarex Energy Company
 600 N. Marienfeld St., Ste. 600
 Midland, TX 79701

for Instructions

7016 1370 0000 0397 0846

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.

OXY Y-1 Company
 5 Greenway Plaza, Ste. 110
 Houston, TX 77046



9590 9403 0584 5183 3643 56

7016 1370 0000 0397 0846

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

CERTIFIED MAIL

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

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.

Cimarex Energy Company
 600 N. Marienfeld St., Ste. 600
 Midland, TX 79701



9590 9403 0584 5183 3643 94

7016 1370 0000 0397 0808

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

A. Signature

Agent
 X Received by James Beard
 C. Date of Delivery

B. Received by James Beard
 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
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

Domestic Return Receipt

A. Signature

X Received by Virginia Cook
 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
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

Domestic Return Receipt

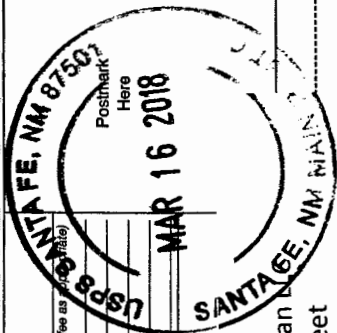
U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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 \$



Marathon Oil Permian
 5555 San Felipe Street
 Houston, TX 77056

See Reverse for Instructions

2280 2600 0000 0267 9702

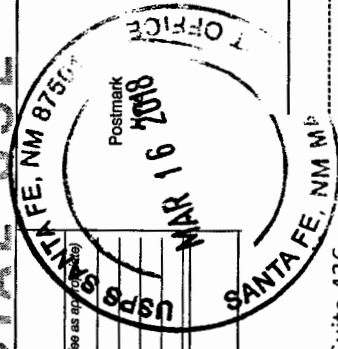
U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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 \$



Petrolux, Inc.
 200 West 1st Street, Suite 436
 Roswell, New Mexico 88201

for Instructions

5180 2600 0000 0267 9702

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.

Marathon Oil Permian LLC
 5555 San Felipe Street
 Houston, TX 77056



9590 9403 0584 5183 3643 70

Article Number (Transfer from service label)
 7016 1370 0000 0397 0622

PS Form 3811, April 2015 PSN 7530-02-000-8053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]*
 B. Received by (Printed Name) C. Date of Delivery
 Richard Vargas 3/19/18
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail™
 Mail 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 \$

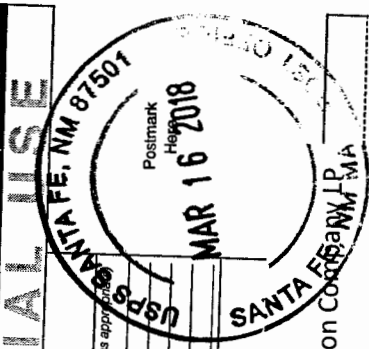
Cimarex Energy Company of Colorado
600 North Marienfeld Street, Ste. 600
Midland, TX 79701

for instructions

7016 1370 0000 0397 0839

**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 \$

Devon Energy Production Company LP
20 N. Broadway #1500
Oklahoma City, OK 73102

for instructions

7016 1370 0000 0397 0792

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.

Cimarex Energy Company of Colorado
600 North Marienfeld Street, Ste. 600
Midland, TX 79701



9590 9403 0584 5183 3643 63

7016 1370 0000 0397 0839

PS Form 3811, April 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.

Devon Energy Production Company LP
20 N. Broadway #1500
Oklahoma City, OK 73102



9590 9403 0584 5183 3644 00

7016 1370 0000 0397 0792

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

Domestic Return Receipt

CERTIFIED MAIL

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

DELIVERY

A. Signature *Viggo Curtis* 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
 Restricted Delivery

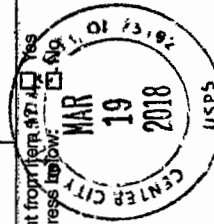
(over \$500)

CERTIFIED MAIL

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

DELIVERY

A. Signature *Rand Carroll* 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: _____

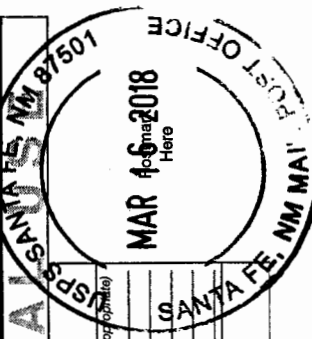


3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise
 Signature Confirmation™
 Signature Confirmation Restricted Delivery
 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
 Certified Mail Fee \$ _____
 Extra Services & Fees (check box, add fee as app. (in \$))
 Return Receipt (hardcopy) \$ _____
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____
 Postage \$ _____

Devon Energy Production Company LP
 333 West Sheridan Ave.
 Oklahoma City, OK 73102

for Instructions

2016 1370 0000 0397 0785

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.

Devon Energy Production Company LP
 333 West Sheridan Ave.
 Oklahoma City, OK 73102



9590 9403 0584 5183 3644 17

2. Article Number (Transfer from *certificado de envio*)
 7016 1370 0000 0397 0785

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

RECIPIENT: COMPLETE THIS SECTION

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

A. *Devon Energy* 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
 MAR 19 2018
 CENTER CITY, NM
 USPS

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

Domestic Return Receipt

Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA

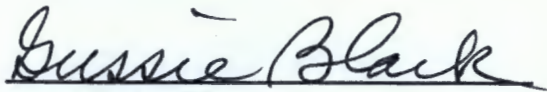
I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated
March 21, 2018
and ending with the issue dated
March 21, 2018.



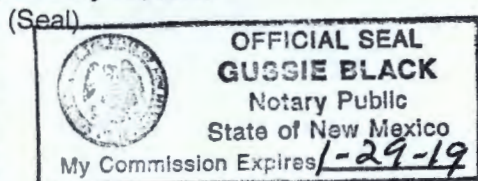
Publisher

Sworn and subscribed to before me this
21st day of March 2018.



Business Manager

My commission expires
January 29, 2019



This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said

LEGAL	LEGAL	LEGAL
LEGAL NOTICE March 21, 2018		
STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT OIL CONSERVATION DIVISION SANTA FE, NEW MEXICO		
<p>The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on April 5, 2018, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appointed for the hearing. If you are an individual with a disability who is in need or a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact Florene Davidson at 505-476-3458 or through the New Mexico Relay Network, 1-800-659-1779 by April 26, 2018. Public documents including the agenda and minutes can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.</p>		
STATE OF NEW MEXICO All named parties and persons Having any right, title, interest or claim in the following cases and notice to the public.		
<p>(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)</p>		
<p>To: ConocoPhillips Company, and its successors, heirs and/or devisees; OXY USA, and its successors, heirs and/or devisees; The Allar Group, and its successors, heirs and/or devisees; Strategic Energy Income Fund IV, LP, and its successors, heirs and/or devisees; Twin Montana Inc., and its successors, heirs and/or devisees; Talus Inc., and its successors, heirs and/or devisees; Mark Stodola, and his successors, heirs and/or devisees; Tom Golden, and his successors, heirs and/or devisees; Randal Schmidt, and his successors, heirs and/or devisees; Kenneth C. Haggart, and his successors, heirs and/or devisees; EOG Resources, Inc., and its successors, heirs and/or devisees; First Roswell Company, Ltd., and its successors, heirs and/or devisees; Thomas E. Jennings, and his successors, heirs and/or devisees; Timothy Z. Jennings, and his successors, heirs and/or devisees; Magnum Hunter Production, Inc., and its successors, heirs and/or devisees; EOG Y Resources, Inc., and its successors, heirs and/or devisees; EOG A Resources, Inc., and its successors, heirs and/or devisees; EOG M Resources, Inc., and its successors, heirs and/or devisees; OXY Y-1 Company, and its successors, heirs and/or devisees; Cimarex Energy Company of Colorado, and its successors, heirs and/or devisees; Marathon Oil Permian LLC, and its successors, heirs and/or devisees; Petrolux Inc., and its successors, heirs and/or devisees; Cimarex Energy Company, and its successors, heirs and/or devisees; Devon Energy Production Company LP, and its successors, heirs and/or devisees;</p>		
<p>CASE NO. 16052: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico. Applicant seeks an order from the Division: (1) creating a non-standard 320-acre, more or less, oil spacing and proration unit in the Bone Spring formation, comprised of the E/2 E/2 of Sections 22 and 27, Township 23 South, Range 32 East, NMPM, Lea County, New Mexico; and (2) pooling all mineral interests in the Bone Spring formation underlying this proposed non-standard spacing and proration unit. This proposed non-standard spacing and proration unit will be the project area for the Avion Federal Com Well No. 301H, to be horizontally drilled from a surface location in the NE/4 NE/4 (Unit A) of Section 22 to a bottomhole location in the SE/4 SE/4 (Unit P) of Section 27. Also to be considered will be the cost of drilling and completing said well, the allocation of these costs as well as the actual operating costs and charges for supervision, designation of COG Operating LLC as operator of the well, and a 200% charge for risk involved in drilling said well. Said area is located approximately 30 miles northwest of Jal, New Mexico. #32634</p>		

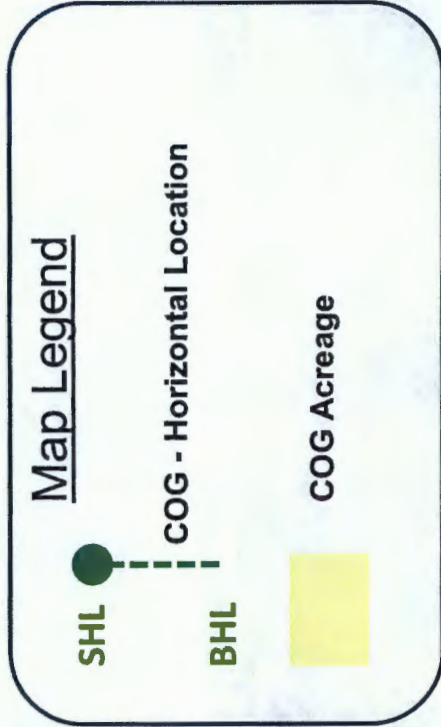
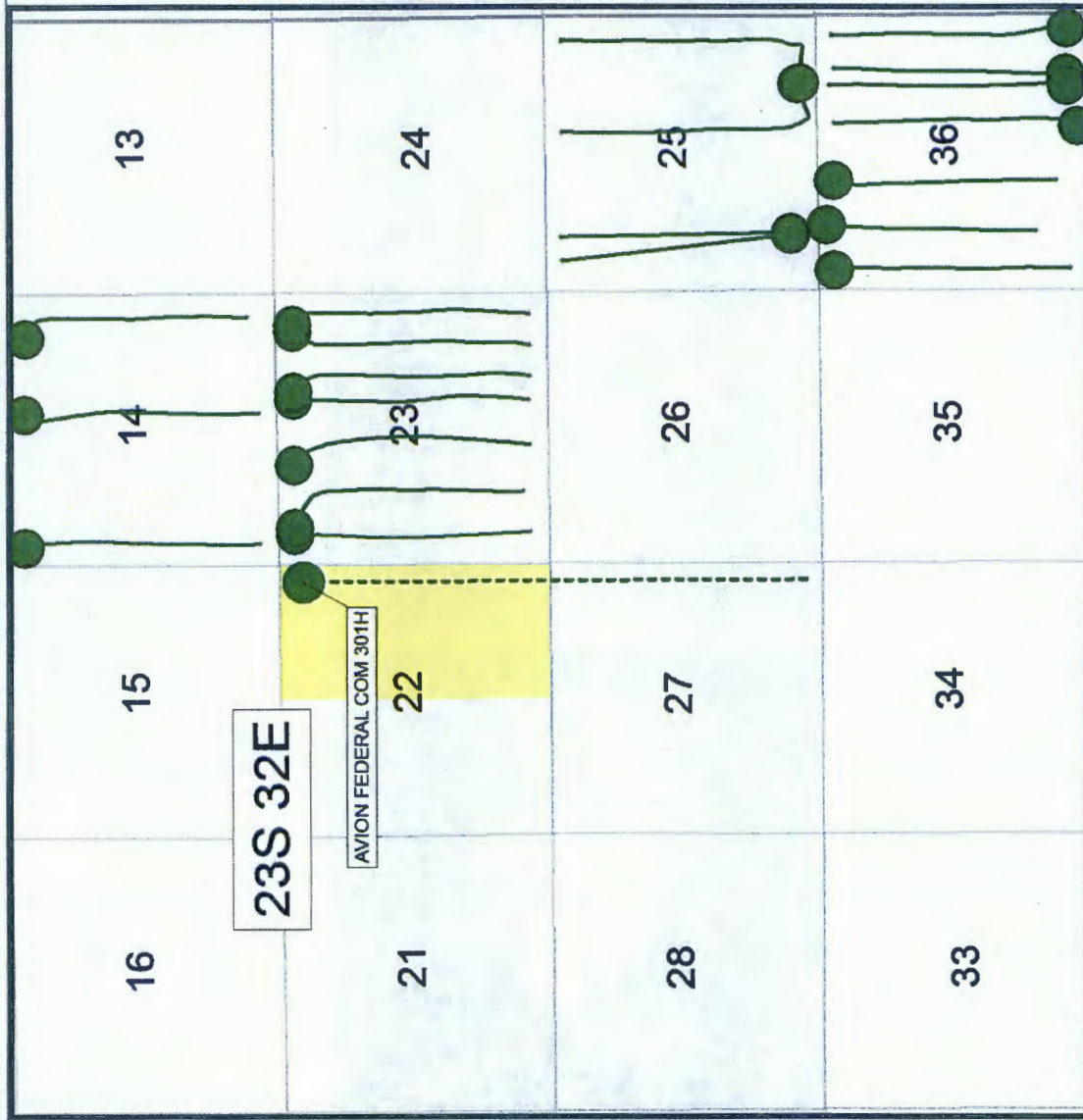
67115004

00208864.

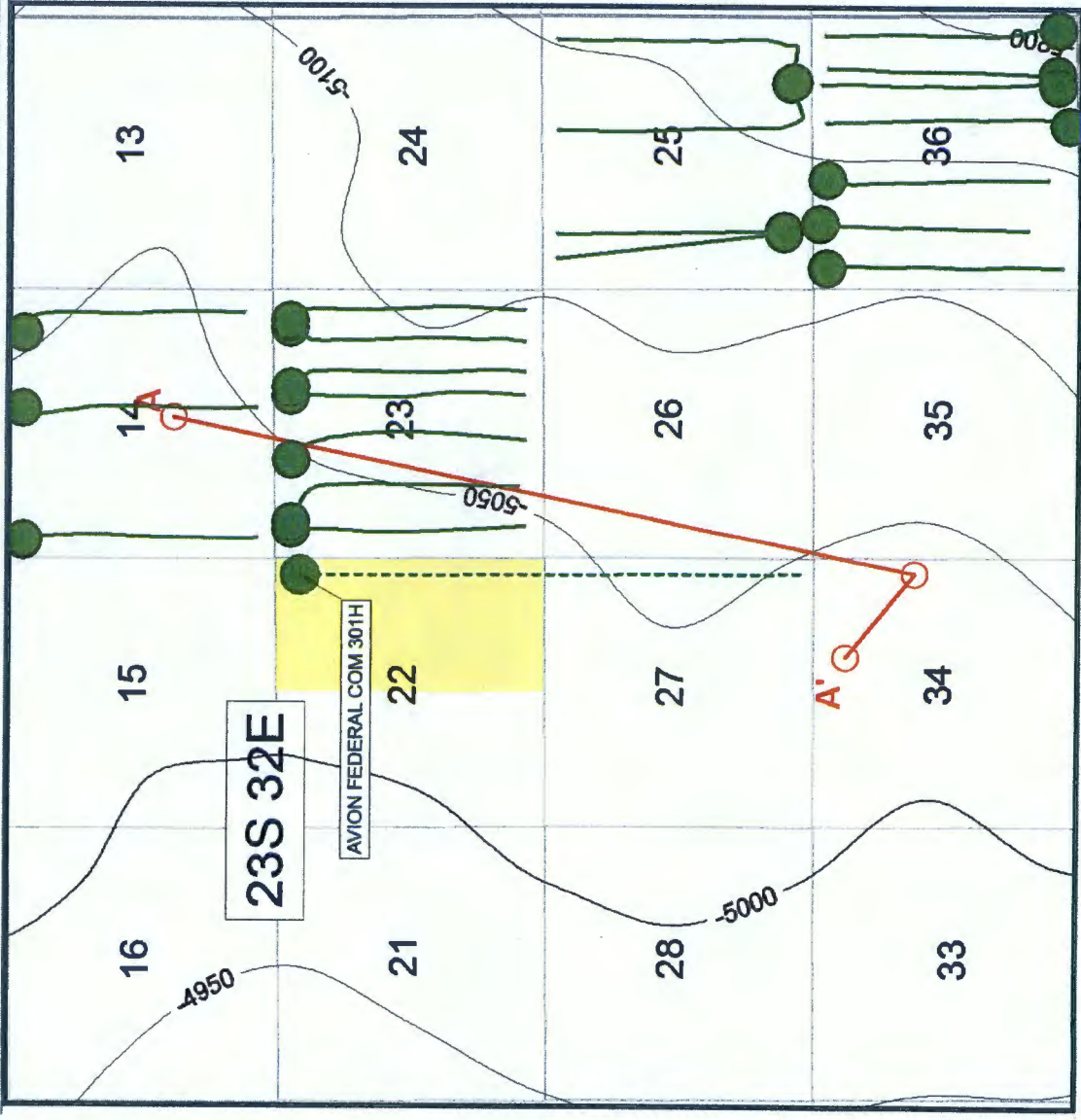
COG Operating LLC - SANTA FE
1048 PASEO DE PERALTA
SANTA FE, NM 87501

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Case No. 16052 Exhibit No. 5
Submitted by:
COG OPERATING LLC
Hearing Date: April 4, 2018

Bone Spring Pool Avion Fed Com 301H Location



Bone Spring Pool Bone Spring Lime Structure Map



Map Legend

- SHL (Green circle)
- BHL (Green vertical line)
- COG - Horizontal Location (Dashed line)
- Bone Spring Lime Structure Cl: 50' (Wavy line)
- Cross Section Line (Red line with circle)
- COG Acreage (Yellow rectangle)



Stratigraphic Cross Section A - A'

